Motorcycling Australia
MULTIPLE ENTRY - TARGETED RISK ASSESSMENT (TRA)

Risk Calculator			**LIKELIHOOD:** ***How likely is it to happen?***				
CONSEQUENCE: ***How severely could it hurt someone (riders, officials or public)? And what impact will it have?***			**ALMOST CERTAIN** Will occur	**LIKELY** Could happen frequently	**POSSIBLE** Could happen occasionally	**UNLIKELY** Could happen but only rarely	**RARE** Could happen, but it is unforeseeable that this will occur
	PERSONAL INJURY	**ADMINISTRATIVE**					
CATASTROPHIC	Life threatening injuries, death or multiple fatalities	Major hardship to organisation. Huge $ loss.	**Extreme**	**Extreme**	**Extreme**	**High**	**Medium**
MAJOR	Extensive (Serious) injuries resulting in major medical treatment. Hospital.	Significant hardship to organisation. Major $ loss	**Extreme**	**Extreme**	**High**	**High**	**Medium**
MODERATE	Moderate injuries - medical treatment required (broken bones). Hospital.	Moderate hardship to organisation. Medium – High $ loss	**High**	**High**	**High**	**Medium**	**Low**
MINOR	First aid injury. No ongoing medical attention.	Some hardship to organisation. Minor $ loss	**High**	**Medium**	**Medium**	**Low**	**Low**
INSIGNIFICANT	No injury.	Little or no hardship to organisation. 0 – Low $ loss	**Medium**	**Low**	**Low**	**Low**	**Low**

RISK RATING:	RISK TREATMENTS	LEVELS OF CONTROL METHODS	
Extreme: Stop activity, immediate action required	**AVOID:** Don't do the activity	1. **AVOID**< Try to start here	5. **REDUCE** admin warning and rules
High: Prioritised action required	**TREAT:** Reduce – use controls	2. **SUBSTITUTE**	6. **PPE**< Last resort
Medium: Planned action required	**ACCEPT**: If low or if consequences are tolerable	3. **ISOLATE**	
Low: Action when possible	**TRANSFER:** (Caution – cannot transfer duty of care)	4. **REDUCE** by physical controls	

DATE	**VENUE or EVENT**	**NAME** of official completing this form	**SIGNATURE** of official completing this form

DESCRIPTION OF IDENTIFIED RISK **Must include area or location and Track Standards item number.**	**RISK RATING** **Describe word**	**CONTROLS / TREATMENT** **What has or will be done about it?**	**CONSULTATION REGISTER** **Who did you talk to?**
TRA #1	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?

TRA #2	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?
TRA #3	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: ` POSITION WHO ELSE WAS NOTIFIED?
TRA #4	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?

TRA #5	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?
TRA #6	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?
TRA #7	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?

TRA #8	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?
TRA #9	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?
TRA #10	**CONSEQUENCE** Select **LIKELIHOOD** Select **RISK RATING**	TREATMENT	RESPONSIBLE PERSON ADVISED: POSITION PERSON RESPONSIBLE FOR REVIEW: POSITION WHO ELSE WAS NOTIFIED?