

# Journey Management Plan - Detailed Form

Version:	JMPDGWT001
Status:	Approved
Date:	1/8/13

## JOURNEY MANAGEMENT PLAN

Journey Plan No. <i>(office use only)</i>	Company: GOWEST TOURS				
Driver to be tested at the discretion of supervisor prior to beginning travel and on return by Supervisor BAC Tester	Driver BAC Reading – <i>Point of Departure</i>		Time Test Conducted		Tester's Name & Signature
	Driver BAC Reading – <i>Point of Destination</i>		Time Test Conducted		Tester's Name & Signature

<b>Journey Management Details</b>					<b>Names of Passengers</b>
Is the Journey Necessary?					1.
Can it be combined with another Journey? If no why?					2.
Has the driver(s) been familiarised and Challenge Tested on the vehicle?					3.
Will the driver reach their destination before dark?					4.
Journey Manager responsible for driver and vehicle: Name: _____ Date: _____					5.
Signature: _____					6.
					7.
					<b>No. of Passengers:</b> <i>(attach additional sheet if required)</i>

Departure Date	Departure Time	Vehicle Registration No.	Unique Vehicle Identification Number	Driver Name	Driver's Signature
Route Place Names	Arrival Time	Departure Time	Rest (Tick)	Call Base	Telephone No. – Travelling Party
1.			€	€	Telephone No. of Journey Manager responsible for driver & vehicle
2.			€	€	
3.			€	€	
4.			€	€	
5.			€	€	

Reason For Night Driving	Journey Manager's Remarks		Approving Manager's Name (Superintendent and above)
	1. Vehicle Prestart Checks Completed	€	<b>Construction Manager's Signature</b>
	2. Fatigue Management Sheet Completed (attached)	€	
	3. Route Map Attached	€	
	4. Counselling for Driver	€	
<i>Email completed Journey Management Plan to Kristy.Klynsoon@agc-ausgroup.com / Angela.McDonald@agc-ausgroup.com / Rachel.Pridmore@agc- ausgroup.com</i>			

<b>DRIVING HAZARD ANALYSIS</b>			
Hazard	Control	Risk Rating	Responsibility
Fatigue <ul style="list-style-type: none"> <li>- Night Driving</li> <li>- Alcohol</li> <li>- Dehydration</li> <li>- Prolonged periods of driving without breaks</li> </ul>	<ul style="list-style-type: none"> <li>- Ensure driver is well rested before departing</li> <li>- Travel during daylight hours</li> <li>- Have 2 persons in vehicle for journey where possible</li> <li>- Rotate driving</li> <li>- Night driving <i>only if authorised</i> by the Construction Manager</li> <li>- BAC test for driver before departing</li> <li>- No alcohol to be consumed on trip</li> <li>- Ensure 10 L water taken per person</li> <li>- Journey to be logged with Go West Site</li> <li>- Complete Fatigue Management check sheet (DO NOT drive if in the high risk category).</li> <li>- Take regular driving breaks. A break of ten minutes every two hours as a minimum.</li> </ul>		
Road Conditions <ul style="list-style-type: none"> <li>- Unsealed roads</li> <li>- Pot holes</li> <li>- Poor visibility</li> <li>- Inclement Weather</li> </ul>	<ul style="list-style-type: none"> <li>- Drive to road / weather / visibility conditions</li> <li>- Ensure all loads are secured</li> <li>- Drive defensively and obey all road rules</li> <li>- Drive with headlights on throughout journey</li> <li>- Check weather forecast prior to departure - cancel trip if severe</li> <li>- Stop journey if severe weather develops - wait until conditions are safe to continue</li> <li>- Driver to complete defensive driver / 4WD training</li> </ul>		
Other Traffic	<ul style="list-style-type: none"> <li>- Drive defensively and obey all road rules</li> <li>- Maintain safe separation distances</li> <li>- Only overtake under safe conditions</li> </ul>		

Hazard	Control	Risk Rating	Responsibility
Wildlife	<ul style="list-style-type: none"> <li>- Maintain good visibility lights / clean windscreens</li> <li>- Travel during daylight hours</li> <li>- Do not swerve to avoid fauna on road</li> <li>- Remove any deceased animals from the road - check for young and euthanise if required. Report incidents.</li> </ul>		
Speeding	<ul style="list-style-type: none"> <li>- Drive defensively and obey all road rules</li> <li>- Drive to road conditions</li> <li>- Set departure and arrival times with sufficient time for safe travel including stopping and rest breaks.</li> </ul>		
Unfamiliar With Destination <ul style="list-style-type: none"> <li>- Anxiety</li> <li>- Journey takes extended time</li> <li>- Insufficient fuel</li> </ul>	<ul style="list-style-type: none"> <li>- Driver to familiarise themselves with journey route</li> <li>- Source relevant maps</li> <li>- Allow adequate time for delays or rest breaks</li> <li>- Ensure vehicle has full fuel tank before departure</li> <li>- Plan refuelling points along route as required</li> </ul>		
Vehicle Breakdown <ul style="list-style-type: none"> <li>- Poor maintenance</li> <li>- Puncture</li> </ul>	<ul style="list-style-type: none"> <li>- Complete vehicle pre-start before departure</li> <li>- Ensure spare tyre is in good condition and pumped up</li> <li>- Carry 2nd spare tyre for vehicle if in remote areas</li> <li>- Park well off the road if tyre change is necessary</li> <li>- Vehicles to travel in convoy if possible</li> </ul>		
Driver gets lost	<ul style="list-style-type: none"> <li>- Lodge Journey Management Plan</li> <li>- Source relevant maps</li> <li>- Follow agreed route in Journey Management Plan</li> <li>- Carry mobile phone/ Satellite Phone</li> <li>- Remote travel, carry EPIRB device.</li> <li>- Phone in at designated points in Journey Management Plan</li> <li>- Stay with the vehicle if lost or broken down</li> </ul>		
Vehicle accident	<ul style="list-style-type: none"> <li>- Carry mobile phone/ Satellite Phone</li> <li>- Vehicle to have 1<sup>st</sup> aid kit and fire extinguisher fitted</li> <li>- Identify if member of the travel party is 1<sup>st</sup> aid trained.</li> </ul>		

<b>Journey Management Plan - Basic Form</b>	Version:	
	Status:	
	Date:	

Journey Plan Date: \_\_\_\_\_ Retain until: \_\_\_\_\_

Originator: \_\_\_\_\_ Department: \_\_\_\_\_

Location / Job: \_\_\_\_\_

Journey From: \_\_\_\_\_

Journey To: \_\_\_\_\_

Driver & Nominated Contact Person \_\_\_\_\_ Contact Number: \_\_\_\_\_

Secondary Contact  
(if your nominated contact person is unavailable) \_\_\_\_\_ Contact Number: \_\_\_\_\_

Secondary Contact  
(if your nominated contact person is unavailable) \_\_\_\_\_ Contact Number: \_\_\_\_\_

Sat Phone Number: \_\_\_\_\_

Radio Channel: \_\_\_\_\_

Vehicle Details: \_\_\_\_\_

**Journey Details:**

*Include expected time of arrival/return, deviations, rest breaks etc and sequence of events if going to more than one area ...*

---



---

Route map attached YES  NO  Driver competent in Defensive 4WD YES  NO

*(if applicable)*

**SIGNED**

Originator: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Receiving Depot Manager: \_\_\_\_\_ Date: \_\_\_\_\_

***Please email the completed form to the receiving Depot Manager for their sign-off and retention.***