



Solo vessel operators face more risks because they work alone.

Use these questions to think about how to reduce the risks and **come home safe**.

Note: These questions are just a starting point. You'll need to work out what other risks apply to your operation.

If you answer **no** to any of these questions, take steps to control the risk. **Include the risk and the control in your safety management system (SMS) risk assessment.**

Emergency contact	Yes	No
Does your emergency contact know where you're going and when you plan to be back?	<input type="checkbox"/>	<input type="checkbox"/>
Have you planned how to stay in regular contact with them?	<input type="checkbox"/>	<input type="checkbox"/>
Have you told them what to do if they can't contact you or you don't get back on time?	<input type="checkbox"/>	<input type="checkbox"/>

Health	Yes	No
Are you physically and mentally fit?	<input type="checkbox"/>	<input type="checkbox"/>
Are you sick or injured?	<input type="checkbox"/>	<input type="checkbox"/>
Are you on any prescribed medication? If you are, do you know the side effects?	<input type="checkbox"/>	<input type="checkbox"/>
Are you tired or have you been drinking alcohol recently?	<input type="checkbox"/>	<input type="checkbox"/>

Safety equipment	Yes	No
Will you wear a lifejacket at all times?	<input type="checkbox"/>	<input type="checkbox"/>
Is your lifejacket comfortable and does it suit the work you do?	<input type="checkbox"/>	<input type="checkbox"/>
Do you keep a personal locator beacon (PLB) on you at all times?	<input type="checkbox"/>	<input type="checkbox"/>
Is your PLB registered with AMSA?	<input type="checkbox"/>	<input type="checkbox"/>

Weather	Yes	No
Have you checked the weather forecast?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how you will check for weather updates?	<input type="checkbox"/>	<input type="checkbox"/>

Food and water	Yes	No
Do you have enough food and water for your trip?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have spare water, just in case?	<input type="checkbox"/>	<input type="checkbox"/>

Vessel maintenance and equipment	Yes	No
Is the engine serviced regularly?	<input type="checkbox"/>	<input type="checkbox"/>
Are the batteries charged and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
Is your radio and satellite phone in good working order?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have enough fuel?	<input type="checkbox"/>	<input type="checkbox"/>
Is your safety equipment in date and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
Does your vessel have an engine immobiliser?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a boarding ladder installed?	<input type="checkbox"/>	<input type="checkbox"/>
Have you looked for trip and fall hazards and made them safe?	<input type="checkbox"/>	<input type="checkbox"/>