**Day Visit Risk Assessment**

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| **Title/Venue:** Enter details | **Departure date:** Select a date | **Visit wholly within school hours?:** Yes/No |
| **Visit Leader:** Enter name | **Number of adults (incl. leader):** Number | **Number of young people:** Number |

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| **Section of****Visit** | **Significant and Foreseeable Hazards** | **Initial** **risk rating** | **Who is at risk?** | **Appropriate Control Measures** | **Result risk****rating** |
| **Transport** | Coach transportRoad Traffic Accident | High | All | Reputable and appropriate coach transport provider and vehicle used – what assurances have been sought – LA list or CTAF?Visit leader has confidence to challenge coach operator if any practice is inadequate.Supervision during boarding/disembarking and appropriate location chosen.Supervision of group by staff in conjunction with driver, use of functioning seatbelts by all members of party and staff positioned throughout coach.Luggage stored appropriately and aisles/emergency exits kept clearSupervision of group whilst walking from drop-off/pick-up point and whilst crossing roads. Appropriate and safe road crossing locations used throughout visit with appropriately sized group(s).Plans/preparation for travel sicknessIf it is necessary to exit the coach due to breakdown or RTA then this will be done with adult supervision. Adults and children will exit the coach in a safe manner and will be kept safely away from the road.Follow procedures for RTA / Vehicle Breakdown.Contact Police / Highways Agency if traffic management is required to safeguard the party in the event of a breakdown. | Low |
| **Safeguarding / Supervision** | Lost or separated participantParent/Carer helpersGeneral public | Medium | Young person | Safeguarding procedures followed at all times.Appropriate group size and ratios in line with guidance and all adults aware of their roles and responsibilities and have the competence and experience to fulfil them.Smaller manageable sub-groups each with a competent adult.Briefing of group at start of visit and reminders during visit.Supervision and vigilance by adults, awareness of the general public, dogs etc. and confidence to challenge as appropriate.Group control such as 'buddy system' in place, minimum group of 4, coloured caps.Participants aware of what to do if separated and i.d. carried by participants.Regular head counts taken during visit and before all departure points.All staff have mobile contact numbers of all other staff on visitSupervision during any rest breaks in journey with a time limit and meeting point. Head count taken before departure.Appropriate supervision and checking of public toilets if used.Appropriate usage of electronic devices by participants. | Low |
| **Incident / Illness** | EmergencyParty member taken ill or injured | High | All | Suitable first aid kit and first aid trained member of staff.Follow protocols when dealing with first aid.Fully operational mobile phone with key numbers 'programmed'.Up to date medical information.Location of nearest A&E known for destination.Sufficient participant:staff ratio to ensure sufficient safeguarding of party if staff member or participant taken ill.Emergency procedures taken by Group Leader on visit.School has emergency plan in place and access to contingency funds on visit.Group Leader knows procedure to summon emergency assistance.Follow directions given by emergency services if in attendance. | Low |
| **Environment / Weather** | Extremes of weather | Medium | All | Check of weather forecast and plans adjusted accordingly.Appropriate clothing/footwear for weather conditions and checked before departureWet/cold - warm waterproof clothingHot - liquids and sun protection. | Low |
| **Venue / Provider / Site** | Enter details | Rating | Who? | Does the provider hold a LOtC Quality Badge or has a PAF been completed?Is there clear communication between the provider and visit leader so that all parties are aware of their responsibilities wih regards fulfilling duty of care? | Rating |
| **Activity Arrangements** | Enter details | Rating | Who? | Enter details | Rating |
| **The Group**(medical/anxieties/behaviour) | Enter details | Rating | Who? | Enter details | Rating |

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| **What is your plan ’B’ and any other relevant contingency information?**Enter details |

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| **Additional information:**Enter details |

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| **Ongoing risk assessment – the most essential element:** 1. **Apply** the control measures - 2. **Monitor** their effectiveness - 3. **Amend** & **adapt** as required |
| **Risk assessment completed by:** Enter name**Date:** Select a date | **All staff will be appropriately experienced and qualified to competently fulfil their leadership roles and responsibilities.****This risk assessment will be shared with the relevant adults on the visit.** | [ ] [ ]  |