**RA2 (for Cat 2a risk): Royal Holloway, University of London - Travel / Fieldwork Risk Assessment Form**

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| Form Identification No.  (Optional Departmental Use) |  |
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| **sECTION 1: General Arrangements** | | | | | | | |
| Name of Principal Person Travelling / Field Work Lead: | | | Staff or PGR (with Staff Responsibilities): | | | | |
| Their Department: | | | Their Line Manager (staff only): | | | | |
| Course and course code (if applicable): | | | Their Supervisor (PGR students only): | | | | |
| Nature of proposed Travel or Fieldwork: | | | | | | | |
| Who is undertaking the Travel or Fieldwork (could be a lone traveller or a group) and why: | | | | | | | |
| a. Undergraduates | |  | a. Teaching purposes | | | |  |
| b. Postgraduates | |  | b. Thesis | | | |  |
| c. Staff | |  | c. Dissertation | | | |  |
| d. Other | |  | d. Other research project | | | |  |
| Principle location (eg city, country): | | | | | | | |
| Dates: | | From: | | | To: | | |
| **sECTION 2: COMPETENCY / PREVIOUS EXPERIENCE OF SIMILAR TRAVEL and FIELDWORK** | | | | | | | |
| Have those travelling watched the HSO’s fieldwork, travel and placement safety video? | | | | | Yes/No | | |
| Have those travelling any previous experience of this type of fieldwork / travel? | | | | | Yes/No | | |
| Have those travelling any previous experience of the place(s) they are visiting? | | | | | Yes/No | | |
| Any other details you wish to document that support the competency of those travelling for the activity:  \_ | | | | | | | |
| **SECTION 3: DETAILED ITINERARY** | | | | | | | |
| Place of departure: (home for UK travel or airport/station): | | | Destination(s): (venues, institutes, museums etc) | | | | |
| Principle modes of transport/travel arrangement: | | | Dates of stay at any accommodation used: | | | | |
| Name, address and telephone number of accommodation: | | | Name, address and telephone number of a fieldwork  base camp (if different / applicable): | | | | |
| **SECTION 4: IMPORTANT CONTACTS**  In case of emergency who will it be helpful for us to contact? (relating to Principal Traveller) | | | | | | | |
| People you’re working with: | | | | | | | |
| Name | Number | | email | Relationship | | | |
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| Personal contacts: | | | | | | | |
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| Summary of proposed activities: (eg speaking engagement, tour of facilities, viewings of artefacts, texts) | | | | | | | |
| **SECTION 5: PRE-TRIP PREPARATION AND CHECKS** | | | | | | | |
| You have read and understood insurance limitations described in the college policy and will highlight and discuss any areas that are not automatically covered with the Insurance Officer | | | | | | Yes/No | |
| If a Field Trip, list of travel / field workers attached? | | | | | | Yes/No/n/a | |
| Ratio of staff to students identified to be necessary (if applicable): | | | | | | \_ / n/a | |
| Any health Checks, vaccinations or medications identified as necessary (please specify): \_ / n/a | | | | | | | |
| Specific health requirements for a group available to Fieldwork Lead (if applicable): | | | | | | Yes/No/n/a | |
| Record of next of kin details for each individual available to Fieldwork Lead (if applicable)? | | | | | | Yes/No | |
| Record of Foreign Office advice if travel is overseas (to be checked again immediately prior to travel):  *[ie “no cautionary advice” or “advises against all but essential travel” or “advises against all travel”]* | | | | | | | |
| **SECTION 6: DECLARATIONS** | | | | | | | |
| These have moved to [this part](#_Electronic_Signatures:_) of the document. | | | | | | | |

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|  | **Groups Affected by the Activity:** | Royal Holloway, University of London |
| E = Employees  S = Students  V = Visitors  C = Contractors  E = Environment / Buildings  LW = Lone Workers |

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| **Outcome** | | | | |  | **Likelihood** | | | | |  | **Risk Rating**  **A risk higher than 14 is not acceptable** | | |
| **10** | **8** | **5** | **3** | **0.5** |  | **5** | **4** | **3** | **2** | **1** |  | **High** | **Medium** | **Low** |
| Fatality | Severe  Injury | Lost  Time  Injury | Minor  Injury | No  Injury |  | Certain | Very  Likely | Likely | Unlikely | Remote |  | 15-50 | 4-14 | 1-3 |

**Assessment Title**

|  |  |  |  |  |  |  |
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| **Groups** | **Identified Hazards** | **Controls Measures in Place** | **Residual Risk (delete as app.)** | | | **Further Action?** |
| **Outcome** | **Likelihood** | **Risk** |
| Physical Hazards – in an environment, that could harm the traveller(s) without physically touching them. | | | | | | |
|  | **Weather** - extreme hot / cold | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Atmospherics** – eg dry air on a plane | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Loud noise**, eg music at an event | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Heights** – eg low hotel balcony | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| Biological Hazards – from insects, animals, plants etc | | | | | | |
|  | **Viruses** - including COVID-19 | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Vaccinations** -Optional and mandatory check [here](https://travelhealthpro.org.uk/countries) | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Health factors** - individual traveller’s | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Insects / spiders -** Heightened risk | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Animals** - Rabies / bites / attack | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Hygiene / sanitation** - poor quality, disease risk | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| Chemical Hazards | | | | | | |
| If your travel incorporates use of or risk of exposure to hazardous chemicals please use the RA3 risk assessment 🡺 | | | | | | |
| Work Equipment / Vehicle / Non-Standard Building or Environment Hazards | | | | | | |
| If your travel incorporates use of work equipment (scientific or otherwise), proximity to vehicles, non-standard buildings or environments please use the RA3 risk assessment 🡺 | | | | | | |
| Personal Safety / Psychosocial | | | | | | |
|  | [**FCDO headline advice**](https://www.gov.uk/foreign-travel-advice) | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | Crime, terror, social unrest, local laws (eg driving, alcohol), cultural differences (eg attitudes to protected characteristics), health and medicine | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | Vulnerability to destination country laws / custodial sentences for written articles or posts construed as critical of the government | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Language barriers** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Lone working** - moving around the city at day and at night / harassment / intimidation | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Fatigue** - stress / anxiety | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| Environmental Hazards | | | | | | |
| If your travel / fieldwork involves activities that may significantly impact the environment, please use the RA3 risk assessment 🡺 | | | | | | |
| Travel Hazards | | | | | | |
|  | **Public transport** - Unsafe/unreliable | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Own vehicle** - overseas compliance, insurance, breakdown | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Vehicles general** - inadequate or attracts attention of thieves, overseas rules and driver competency | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Routes** - Short notice closures | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Flying** – DVT, infections, dry air | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Accommodation** – unsafe / not secure | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Food and water** – poor standards / quality | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| Safeguarding | | | | | | |
|  | **U18s** contact | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Vulnerable adults** contact | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| First aid | | | | | | |
|  | *Applicable hazards might be:*  **Gastro-intestinal distress** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Prescription medications** required - check legality to bring into destination country (eg custodial sentences for breaches) | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Occupational Health factors** - if traveller has routine work controls that need to be applied to the travel | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
|  | **Other** | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |
| Emergency Procedures | | | | | | |
| Category 2a Travel requires the Person Travelling to be aware of the standard College Emergency Procedures, see foot of this document | | | | | | |
| Other Hazards (please specify)\* | | | | | | |
|  |  | N/A  or  Your control: \_ | \_ | \_ | **Low**  **Med**  **High** | Yes / No |

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| **No.** | **Control Measures Rejected** | **Reason** |
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| **No.** | **Further Control Measures Required** | **Allocated to:** | **Target Date** | **Date Completed** |
| 1 |  |  |  |  |
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**Worker (and/or HSO) Involvement – ie consulted on the assessment**

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| --- | --- | --- | --- |
| **Name** |  | **Date** |  |
| **Name** |  | **Date** |  |
| **Name** |  | **Date** |  |

**Risk Assessor to ensure final page, below, is completed prior to activity taking place.**

# Electronic Signatures: Assessor, Validator, Travel/Fieldwork Authoriser

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| --- | --- | --- | --- |
| **Risk Assessor (Person Travelling or Undertaking the Fieldwork, Principal Traveller, Field Work Lead etc)** | | | |
| I confirm that in my view this assessment is an accurate reflection of the risk associated with the activity and the controls that, it is my intention, will be put in place. | | | |
| **Name** |  | **Date** |  |
|  | | | |
| **Risk Validator (role requirements as laid out in Travel, Fieldwork and Placement Policy)** | | | |
| I confirm that (based on the information the Assessor has shared) that the assessment appears 'suitable and sufficient' - in the sense that (a) a proper check of appropriate advice and guidance seems to have been made (eg FCDO), (b) the detail appears to reflect the level of hazard/threat described in that guidance, (c) risks to the activity participants and to others have been considered, (d) controls have been put in place for obvious significant risks and (e) the document appears to be an accurate reflection of residual risks, whether low, medium or high | | | |
| **Name** |  | **Date** |  |
| If Escalated validation is required – ie to HSO for High Risk; to Director of Health, Safety and Business Continuity for Very High Risk | | | |
| **Name** |  | **Date** |  |
| |  |  | | --- | --- | | **Travel Risk category**  As defined in Policy  Validator’s assessment of the risk category, used to determine final level of Validation and Authorisation required. | **2a LOW**  **2b MED**  **3 HIGH**  4 VERY HIGH | | | | |
| **Travel / Fieldwork Authoriser (role requirements as laid out in Travel, Fieldwork and Placement Policy)** | | | |
| I confirm that, based on this ‘validated’ risk assessment, I am confident that (a) the residual level of risk reflects the colleges risk appetite, (b) a suitable balance of risk and value of the activity has been established and (c) the controls described in the risk assessment reduce risk to 'as low as reasonably practicable' - ie I believe all possible measures have been taken unless grossly disproportionate to their benefit, financially, operationally or are in conflict with another, higher-priority health and safety control. When considering financial proportionality against possible safety measures, I have factored in any revenue associated with the work. | | | |
| **Name** |  | **Date** |  |
| **Position** |  | **Comments** |  |

**Travel / Fieldwork Emergency Procedures**

**Minor incident/accident – non-life threatening eg broken limb, sickness requiring hospital visit**

Minor incidents should be dealt with by the traveller / lead traveller themselves where possible.

If they are able to do so, they should notify their / the injured party’s “in case of emergency” [ICE] contacts or

ask co-travellers or supporting police/emergency/medical agencies to do so if they are unable.

*[To reduce the shock to ICE contacts and prompt their availability for additional information gathering calls it is*

*recommended that the traveller or a co-traveller call first – in advance of any contact that may then be made by*

*police/emergency/medical staff.]*

Where possible, the traveller / lead traveller or a person nominated by them should maintain a log of all

developments relating to the incident for reference and record keeping purposes. The incident should be

reported as soon as possible to the **traveller’s HoD [Head of Department]** or **DoP [Director of Professional**

**Services]** so that the department/College is prepared for any subsequent contact with next of kin. Eventually

the incident should also be reported to the Health and Safety Operations Office so that steps can be

investigated to reduce the likelihood of a similar or worse incident reoccurring in the future.

**Major incident/accident - major injury requiring repatriation/emergency treatment; fatality or that**

**involves a significant number of individuals**

The lead traveller or a nominated person should first contact **Royal Holloway Security** immediately to report

a major incident. Security will escalate and handover to the **RHUL Incident Team** who will coordinate contact

with next of kin and ICE contacts. The traveller / lead traveller or a nominated person should also report the

incident to the Departmental HSC, the Health and Safety Operations Office and the Head of Department or

School Administration Office as soon as possible.

All parties – those travelling and those at the College – should strive to capture an accurate log of all calls and

developments relating to the incident for reference and record keeping purposes. If possible photographs of

the scene including any equipment involved/damage caused should be taken and forwarded with reports

where appropriate.

**Do NOT under any circumstance:**

Contact or engage with a traveller’s next of kin or emergency contact in a major incident/accident scenario

Contact or engage with any media or other institutional representatives – this is solely the Royal Holloway

Incident Team’s responsibility

**Emergency Mental Health Support**

Anyone affected should contact Royal Holloway Security providing details of the individual/s involved and

what the emergency is. Security will then contact appropriate

