

Ashley C of E Primary School

RISK ASSESSMENT FOR EDUCATIONAL VISITS/OFF SITE VISITS

Venue/s:

Date of visit:

Educational Objectives:

Visit Leader:

Date of this Assessment:

Which classes:

Names of School Staff Accompanying children:

Number of children:

Age range of children: Total number of adults:

Ratio:

HAZARD- anything which can cause harm	RISK: High, Medium or Low	CONTROL MEASURES	Revised risk: High, Medium or Low
Transport / Route (breakdown? Crossing roads?)	LOW		
Group (medical needs? Behaviour issues?) Children with asthma XXXX with ADHD	LOW		
Weather	LOW		
Venue / (surfaces heights)	LOW		
HAZARD- anything which can cause harm	RISK: High, Medium or Low	CONTROL MEASURES	Revised risk: High, Medium or Low
Supervision (experience of helpers) Teachers TAs	LOW		

Parent Helpers			
Activities	LOW		

ONGOING ASSESSMENTS - Record here any assessments made, control measures taken during the course of the visit