**Risk Management Planning Worksheet for non- 4-H VCE Programming staff**

**UNIT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions:** Nothing can replace the good management practices of planning, documentation, and training. In order to adequately prepare for any activity, you must prepare for the best and worst that might occur. While there is no inclusive list of items from which to plan your activity, there are some general points from which to

start. **Use this “Risk Management Planning Form” as a tool when you are conceptualizing new VCE programs and activities.** Remember: The Risk Management Office at Virginia Tech should be involved in the review of all policy, procedural, and curriculum items that effect Virginia Cooperative Extension.

**Name of your program/activity:**

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**Description** (WHO, WHAT, WHEN, WHERE, WHY)

• WHO is involved in this activity? (include the **ages** of all involved)

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• WHAT are participants asked to do? What is the nature of the program/activity?

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WHEN will this program/activity be offered? (the time of the year and the time of day)

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WHERE will this program/activity be conducted?

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• WHY will this program/activity be conducted? (A brief overview of your main goals for offering the program)

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• How many volunteers are needed for this activity? \_\_\_\_\_\_\_\_\_\_\_\_

How will you ensure the **competence** of the volunteers? (i.e., that they know their responsibilities, that they know what to do in an emergency, that they have the appropriate certification and training where applicable, etc.)

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**General Safety Procedures** (Include: review of ADA compliance, highway and or pedestrian safety issues, safety procedures specific to the program/activity. Be sure to address the handling of equipment, crowd control)

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**Consider the nature of this program/activity, the time of year that it is being offered, and the location. Are there any potentially dangerous conditions that could arise with regarding to the facilities, environment, participants, etc.? If so, then describe these potentially dangerous conditions.** (NOTE: Potentially dangerous conditions can include environmental factors, factors related to your facilities, but also factors related to participant behaviors such as age or mobility, etc.)

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**Medical Procedures and First Aid Practices** (What will you do if participants become injured or ill during your program/activity? Who provides medical care? At what level of care? What procedures and practices are followed? How close is the nearest hospital? How long does it take EMS (emergency medical services) to arrive on-site if needed?)

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**How will participants be informed of the nature of the program/activity? How**

**will they be informed of the schedule, the do’s and don’ts, the safety rules, and insurance requirements?**

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**What forms will need to be completed for this activity?** [Check (√) all that apply.]

\_\_\_\_ Registration Form \_\_\_\_ Other

\_\_\_\_ Call in registration

\_\_\_\_ General Waiver Form

**How will you ensure that volunteers or paid staff are adequately prepared to assist or lead this program/activity?** (i.e., they understand the responsibilities of their position, they are aware of safety practices and procedures and how they should respond, they know to be alert to changing conditions that can bring about hazardous conditions, they know VCE policies related to the program/activity)

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**What instructions will participants receive before the program/activity begins?** (i.e., instructions for safety, training related to protective devices, rules and regulations, warnings, etc.)

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**Is a Virginia Tech certificate of liability coverage required for this event?**  \_\_\_\_\_\_

**Other important information not covered above?**

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