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|  | FORM OV 2 (CSF4253) NOTIFIABLE VISITS AUDIT CHECKLIST(For use by establishments not using HCC’s EVOLVE systeme.g. DofE Units in Independent Schools operating under Hertfordshire’s DofE Licence) |
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| **Establishment:** | **Visit Leaders:** |
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| **Visit:** | **Dates of Visit:** |

This checklist must be completed by managers to confirm that suitable arrangements are in place for visits notifiable to the Local Authority. It should be completed in good time to allow time for remedial action to be taken, where necessary. A copy should be filed with the approval form (OV3) and a copy given to the visits organiser where required.

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| **NOTIFIABLE VISITS** (Establishment staff-led adventurous activities, overseas visits) | **Yes / No / N/A** |
| Aims and Objectives |  |
| Will the visit meet clearly stated objectives and have these been communicated? |  |
| Training (also see NG [3.2d](https://oeapng.info/downloads/download-info/3-2d-4-4a-assessment-of-competence))  |  |
| Has the trip been organised by, or in liaison with, someone who has attended the HCC ‘Management of Offsite Visits (EVC) Training’ course, or equivalent? |  |
| Is the group leader aware of, and following, Hertfordshire’s Policy Statement for LOtC and Offsite Visitsin line with the Youth Connexions Hertfordshire Duke of Edinburgh’s Award Expedition Code of Practice? |  |
| Have other supervisors been trained/briefed on arrangements and their roles and responsibilities? |  |
| Are the group leader/supervisors suitably competent / experienced to undertake their role, deal with the age group and any special needs of those going on the visit? |  |
| Have other training needs been identified and met (e.g. first aid, life-saving)? |  |
| Risk Assessment (see NG [4.3c](https://oeapng.info/downloads/download-info/4-3c-risk-management/), [4.3f](https://oeapng.info/downloads/download-info/4-3f-risk-management-some-practical-advice), [4.3g](https://oeapng.info/downloads/download-info/4-3g-risk-management-what-to-record-and-how), [6a FAQs](https://oeapng.info/downloads/download-info/6a-faqs-asking-for-providers-risk-assessments)) |  |
| Has a suitable visit specific risk management document been produced? |  |
| Where those attending the visit have special requirements (e.g. due to special behavioural or medical needs) has an individual risk assessment been carried out? |  |
| Has an exploratory visit been carried out? |  |
| Has the venue/location been assessed – are safety arrangements at the venue suitable? (Not applicable if LOtC Quality Badge held) |  |

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| Providers (see NG [4.4g](https://oeapng.info/downloads/download-info/4-4g-selecting-external-providers-and-facilities), [4.4h](https://oeapng.info/downloads/download-info/4-4h-preliminary-visits-and-provider-assurances), [3.2f](https://oeapng.info/downloads/download-info/3-2f-aala-licensing), [3.2i](https://oeapng.info/downloads/download-info/3-2i-contracts-and-waivers), |  |
| Have providers’ safety arrangements been assessed using Form OV6 or an equivalent means? (Not applicable if LOtC Quality Badge held) |  |
| Are providers suitably insured? |  |
| Do providers have adequate emergency arrangements? |  |
| For adventurous activities, does the provider hold either:* an AALA Licence (give licence number):
* an accreditation taken under a non-statutory scheme that includes an assessment of safety (e.g. LOtC Quality Badge)

Where a non statutory scheme is used give name and contact details of scheme provider: |  |
| Supervision (see NG [4.2a](https://oeapng.info/downloads/download-info/4-2a-group-management-and-supervision), [4.2b](https://oeapng.info/downloads/download-info/4-2b-residentials), [4.3b](https://oeapng.info/downloads/download-info/4-3b-ratios-and-effective-supervision), [6c FAQs](https://oeapng.info/downloads/download-info/6c-faqs-duty-of-care-when-working-with-providers)) |  |
| Is the ratio of supervisors to participants appropriate?Do levels comply with:* Hertfordshire’ s Policy Statement for LOtC and Offsite Visits requirements:
* service requirements for supervision;
* where relevant, the individual care plan.
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| Safeguarding (see NG [4.3e](https://oeapng.info/downloads/download-info/4-3e-safeguarding), [3.2g](https://oeapng.info/downloads/download-info/3-2g-vetting-and-disclosure-and-barring-service-dbs-checks), [4.4m](https://oeapng.info/downloads/download-info/4-4m-young-people-in-a-sexual-relationship)) |  |
| Where necessary, have checks been made, through the Disclosure and Barring Service, on all those who will have one to one contact with children? |  |
| Do supervision levels take account of child protection requirements? |  |
| Communication and Consents |  |
| Have arrangements been made to inform and prepare children or young people for the visit? |  |
| Have arrangements been made to give parents/carers full information and to obtain acceptable evidence of their consent? |  |
| Transport (see NG [4.5a](https://oeapng.info/downloads/download-info/4-5a-transport-general-considerations)) |  |
| Are transport arrangements suitable? |  |
| Do those who are driving have appropriate training *(e.g. HCC Minibus permit)?* |  |
| Where transport is hired, have checks been made on the company’s licences (PCV), provision of seatbelts, needs of those with disabilities etc? |  |
| Where staff or volunteers are using their own vehicles, have checks been made on their licence and insurance? |  |

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| Emergency Arrangements (see NG [Section 4.1](https://oeapng.info/downloads/good-practice/)) |   |
| Are suitable contingency plans in place for foreseeable events (staff illness, weather, need to change activities)? |  |
| Do group supervisors have up to date details of emergency contacts at establishment level? |  |
| Have arrangements been made to ensure establishment emergency contacts have full information about the visit? |  |
| Are arrangements in place for the notification of critical incidents to the manager and, where applicable, in line with Hertfordshire’s Duke of Edinburgh’s Award Expedition Code of Practice? |  |
| Are there clear systems/means of communication available during the visit? |  |
| Are there clear procedures and guidelines for aborting the visit where risks are unacceptable? |  |
| Are suitable first aid arrangements in place? |  |
| Are supervisors aware of the action to take in the event of a missing person? |  |
| Insurance/Financial Arrangements |  |
| Are there adequate insurance arrangements in place? |  |
| Are you satisfied with the financial arrangements? |  |
| **Adventurous Activities led by Establishment Staff** (see NG [6h FAQs](https://oeapng.info/downloads/download-info/6h-faqs-adventure-activity-qualifications)) |  |
| Where adventurous activities are planned, has the risk assessment been assessed by a suitably qualified technical adviser? |  |
| Name of Adviser: Qualification: Tel: No: / Email: |  |
| Is the group leader or another tutor competent to instruct in the activity? State qualification:  |  |
| Is the group leader or another tutor familiar with the location/centre where the activity is taking place? |  |
| Is any equipment to be used appropriately maintained and, where required, undergone regular thorough examination. |  |
| **Overseas Visits** (see NG [7.1r](https://oeapng.info/downloads/download-info/7r-overseas-visits)) |  |
| Have overseas trips been booked through an ATOL Registered Company?Where not, are suitable arrangements for repatriation are in place in case of an emergency? |  |
| For overseas visits, have checks been made on:* Passport & visa requirements?
* Medical requirements, need for vaccination etc?
* Language and communication?
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| For expeditions: (see NG [7.1q](https://oeapng.info/downloads/download-info/7q-overseas-expeditions/))* Has adequate time been given to planning the trip?
* Are at least 2 members of staff to go on the trip?

Are contract arrangements satisfactory? |  |
| Is this a multi-establishment off-site visit?If YES, please insert name(s) of the other establishments who are involved with visit: |  |

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| APPROVAL: To be completed by the manager.*(Note: This would normally be the Head of Establishment unless specifically detailed in the Establishments own Offsite Visits Policy)*I confirm that the above items are in place, along with appropriate risk assessments, and that I am satisfied with all aspects of the planning, organisation and staffing for this visit.  |

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| Signed: |  | Date: |
| Manager’s full name: |

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| A signed copy of this checklist, together with the appropriate DofE Expedition forms, where applicable, needs to be sent to the Hertfordshire’s DofE Accreditation Officer:(expeditions@hertfordshire.gov.uk or Postal Point CHO022, Farnham House, Six Hills Way, Stevenage, SG1 2FQ)Date sent:  |