**Medium/High Risk Travel Risk Assessment**

**This form must be completed in full if an initial risk assessment identifies proposed travel as Medium or High risk - see Safety Code of Practice 38 for definitions of what constitutes low, medium and high risk travel.**

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| **Safety Code of Practice 38 Overseas Travel sets out University of Reading procedures for planning and undertaking overseas travel. However neither this form nor the Safety Code can define the precautions that are appropriate for all travel assessed as medium or high risk. These must be tailored to suit the individual traveller, the risks that have been identified, and the destination country.** |

If travel is repeated, completion of this form will constitute a generic assessment for repeat travel, **PROVIDED** that this is reviewed before every visit to check that circumstances have not changed and that the assessment remains valid.

**In addition, any proposal to undertake travel against the advice of the UK Government must be approved by the Vice-Chancellor, the Deputy Vice Chancellor or a Pro-Vice Chancellor. This form should be used to present a supporting statement in support of the proposal.**

This form **only addresses travel aspects** of working overseas. Any hazards and risks associated with the work activities must be subject to a separate risk assessment. Contact your HSC or H&SS for the correct form.

**OVERSEAS TRAVEL CHECKLIST FOR:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name(s) of Traveller: | |  | | |
|  | |  | | |
| Travel to (country/location): | |  | | |
|  | |  | | |
| Purpose of visit | |  | | |
|  | |  | | |
| Department/School | |  | | |
|  |  |  | |  |
| Dates from: |  | | To: |  |

**COMPLETE FOR MEDIUM AND HIGH RISK TRAVEL**

1. **Description of proposed travel/fieldwork and any relevant background information:**
2. **Summary of hazards and risks:**

**e*.g.*** *GOV.UK advises that there is a substantial risk of terrorist or criminal activity; disease outbreak occurring in-country; remote & hostile location with poor road access and limited communications; traveller has a significant medical condition that requires ongoing medical support.*

1. **Explain why other options of achieving the work objective are not considered viable:**
2. **Agreed precautions and control measures:**
3. **Details of the nearest Embassy, High Commission, Consul Etc.**
4. **Outline the benefits to the University that would justify approval. Outline the consequences of not going ahead:**

**I have considered the risks and proposed precautions and control measures and agree that the work can proceed, subject to these precautions being rigorously observed.**

**Signatures/Authorisation:**

|  |  |
| --- | --- |
| **Person completing Risk Assessment:** | **Date:** |
| **Principle Investigator/ Supervisor:** | **Date:** |
| **Any other reviewee e.g. your HSC (optional)** | **Date:** |
| **Head of Department/School/Function:** | **Date:** |
| **Vice Chancellor (or PVC) for HIGH RISK GOV.UK restricted destinations only** | **Date:** |