


HEALTH AND SAFETY MANAGEMENT SYSTEM FORMS		Guidance	F006
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The Travel Risk Assessment Form must be completed by any member of staff who will be travelling overseas on University business. All sections must be completed. Section A should be completed and submitted to the authorising person within the Faculty or Department. Once both Sections A and B have been completed, the form must be sent to travel@aber.ac.uk to arrange Travel Cover. Travel Cover will not be arranged without receipt of this completed form. A copy of the completed form is to be retained by your Faculty or Department for information for in the event of an emergency.


SECTION A

Travel Details

Name of Traveller		
Faculty / Department		
Email Address		
Staff / Student Number		
Name of Line Manager / Supervisor		
Contact number(s) during the period of travel		
Date(s) of Travel	<i>From:</i>	
	<i>To:</i>	
Destination(s) (Cities and Countries)	1.	
	2.	
	3.	
	4.	
Purpose of Travel <i>Note: Specific Risk Assessments for high risk activities must accompany this form</i>		
Current FCO advice for country(ies)/region(s) https://www.gov.uk/foreign-travel-advice	Choose an item.	


Emergency Contact Information

British Embassy Contact Details https://www.gov.uk/world/embassies	
Address of Nearest British Embassy (to country/region visiting)	
Emergency Contact Number for Country(ies) to be visited	
Travel Cover Provider Details	Tel: +44 (0)20 7902 7405 Fax: +44 (0)20 7928 4748 Reference: UMAL/025
Contact Details of Host Organisation (if applicable)	


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Risk Assessment


Hazards and Controls	Controls in Place			Control Measures to be Implemented / Further Details
	Yes	No	N/A	
Personal Safety and Security				
Foreign and Commonwealth Office (FCO) travel advice has been consulted and will be adhered to at all times, particularly in respect of no go areas, carrying valuables, and use of approved transport companies etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lone working to be avoided and first aid supplies to be carried if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No significant events (e.g. civil unrest, strikes, riots, political demonstrations, upcoming elections, etc.) due to take place during the period of travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Be aware of crowded areas, opportunistic theft and cultural sensitivity, and if confronted by aggressor, hand over items requested and report incident to local Police	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Travel Documents / Insurance / Legal Entry				
Passport checked as valid (e.g. valid for at least 6 months beyond the completion of the trip if required)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Visa requirements checked and visa to be obtained if necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Work permit requirements checked and work permit to be obtained if necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Contact details for British Embassy / High Commission / Consulate for country(ies) to be visited available if needed to arrange replacement passport or other assistance as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Keep copies of travel documentation separate from originals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Travel Cover				
University Travel Cover to be arranged and contact details for the Travel Cover Provider to be carried for duration of trip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional private Travel Cover to be arranged if required e.g. if extended trip to include period of annual leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
University Travel Cover Policy provides an acceptable level of cover for the activities to be undertaken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Accident / Injury / Illness / Poor Health				

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Hazards and Controls	Controls in Place			Control Measures to be Implemented / Further Details
	Yes	No	N/A	
No known or pre-existing medical conditions which have the potential to affect or impact the traveller's ability and fitness to travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Traveller is not travelling against medical or GP advice <i>Note: Doing so will invalidate the University's Travel Cover Policy</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guidance on required vaccinations/medications sought and where required obtained prior to travel (e.g. anti-malarial medication)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Traveller to have valid European Health Insurance Card if applicable i.e. if travelling to Europe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Country is not regarded as high risk for diseases, epidemics, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Consideration for hygiene standards such as sanity of drinking water and food vendors (e.g. only drink bottled water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Entry requirements for medication considered and addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adequate supply of essential prescription and other medication to be carried, accompanied with GP letter justifying quantity and type of medication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Communication				
Next of kin information and contact details up-to-date and accurate on Pobl Aber People (for staff) or Student Record (for students)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Full travel itinerary to be made available to the Faculty / Department prior to departure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency contact numbers and addresses pre-populated in the mobile phone to be used during the trip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Arrangements known on how to contact the Faculty / Department in the event of an emergency or if assistance is required while overseas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Where appropriate, communication plan in place and to be adhered to, whereby the University will be contacted in accordance with a mutually agreed timetable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Confirmed mobile phone reception will be available in the country(ies)/region(s) to be visited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Laws and Culture				

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Hazards and Controls	Controls in Place			Control Measures to be Implemented / Further Details
	Yes	No	N/A	
Health, Safety and Environment standards checked as comparable to UK, and any additional/varying requirements understood and addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal variances and cultural norms are understood and can be accommodated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Care to be taken when taking photographs, videos or using binoculars, to avoid such actions being misunderstood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lack of Money				
Obtain sufficient local currency for duration of stay and allow for contingencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Check that credit card can be accepted in the country/region and that cash can be obtained via ATM's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Weather				
Conditions unlikely to lead to medical or other emergency e.g. extreme cold or heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate luggage to be taken e.g. clothing, footwear, sunscreen etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Accommodation				
Use of reputable hotel accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Familiarisation with evacuation procedures in accommodation, including nearest exit routes and ways of raising the alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Doors to be locked at night and when away during the day, and remain vigilant when arriving, leaving and answering doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Use secure storage facilities for valuables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Obtain suitable electrical adapter for local voltage/plug type and use equipment as intended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Transport				
Availability and standards of transportation are acceptable (i.e. equivalent to UK standards) and understood to the traveller, and any perceived unsafe transport methods will not be used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Appropriate documentation (e.g. driving licence) available if hiring a car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If required, car insurance arranged which provides appropriate insurance cover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<u>Hazards and Controls</u>	Controls in Place			Control Measures to be Implemented / Further Details
	Yes	No	N/A	
Other Risks and Hazards as Applicable				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Declarations and Signatures

In signing this declaration, the traveller confirms that the information provided is correct to the best of their knowledge, and that any subsequent alterations required during the period leading to travel will be made as necessary.

Name of Traveller (PRINT)	
Signature	
Date	

In signing this declaration, the authoriser confirms that they have reviewed the information provided, and that the identified hazards have been addressed and reduced as far as reasonably practicable to allow the travel to take place.

Name of Authoriser (PRINT)	
Signature	
Date	

SECTION B

To be completed when travel and accommodation has been confirmed following authorisation.

Travel Details

This section must be completed for **all** journeys following the booking of transport.

Travel 1


Date of Travel	
Flight Number	
Airline	
Departure Airport	
Destination Airport	

Travel 2

Date of Travel	
Flight Number	
Airline	
Departure Airport	
Destination Airport	

Travel 3

Date of Travel	
Flight Number	

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Airline	
Departure Airport	
Destination Airport	

Travel 4

Date of Travel	
Flight Number	
Airline	
Departure Airport	
Destination Airport	

**Please add additional entries if undertaking further travel during the trip.*

Accommodation Details

Complete one entry for **each** accommodation during your travel.

Accommodation 1

Hotel Name		
Address		
Phone Number		
Duration of Stay	<i>From:</i>	
	<i>To:</i>	

Accommodation 2


Hotel Name		
Address		
Phone Number		
Duration of Stay	<i>From:</i>	
	<i>To:</i>	

Accommodation 3

Hotel Name		
Address		
Phone Number		
Duration of Stay	<i>From:</i>	
	<i>To:</i>	

Accommodation 4

Hotel Name		
Address		
Phone Number		

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Duration of Stay	<i>From:</i>	
	<i>To:</i>	

**Please add additional entries if staying in further accommodation during the trip.*