Risk Management Planning Worksheet for 4-H Programming

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 4-H 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.

1. Name of your program/activity: ________________________________________________________________

2. Description (WHO, WHAT, WHEN, WHERE, WHY)

   • WHO is involved in this activity? (include the ages of the youth involved)
   
   • WHAT are youth (and/or youth and adults) doing? What is the nature of the program/activity?
   
   • WHEN will this program/activity be offered? (the time of the year and the time of day)

   • WHERE will this program/activity be conducted?

   • HOW will this program/activity be conducted?

   • COSTS will this program/activity be offered at a profit or loss?

   • WHOM will be involved in this activity? (include the ages of the youth involved)

   • WHAT steps are necessary to prepare for this activity?

   • WHAT will be the anticipated outcomes of this activity?

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

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3. **Youth Supervision** (Describe in detail how youth will be supervised during this program/activity)

• What is the **ratio** of youth participants to volunteers/paid staff? ______________

• What is the total **number** of “supervisors” (i.e., volunteers and paid staff) involved? ______________

• During the 4-H program/activity, where will supervisors be **located**?

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

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• Will the supervision ratio that you identified earlier ever be reduced during your 4-H program/activity? If so, then in what situations might this occur? If this occurs, then how will you respond?

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4. **General Safety Procedures** (Include safety procedures specific to the program/activity. Be sure to address the handling of equipment, crowd control)

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5. **Consider the nature of this 4-H 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 rowdiness, horseplay, discipline, etc.)

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6. **Medical Procedures and First Aid Practices** (What will you do if participants become injured or ill during your 4-H 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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7. **How will participants and parents/guardians be informed of the nature of the 4-H 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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8. **What forms will need to be completed for this activity?** [Check (√) all that apply.]

   ___ Registration Form
   ___ 4-H Health History Report Form
   ___ 4-H Medication Form
   ___ 4-H Code of Conduct Form
   ___ 4-H Media Release Form
   ___ 4-H Equine Waiver Form (for horse-related activities)
   ___ General Waiver Form (if a parent/guardian refuses to sign the health form for religious reasons)
   ___ Enrollment forms, volunteer applications, and job descriptions for volunteers
   ___ Accident Insurance (if necessary)
   ___ Other: _____________________________________________________________________________
   ___ Other: _____________________________________________________________________________

9. **How will you ensure that “supervisors” (volunteers or paid staff) are adequately prepared to assist or lead this 4-H 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 4-H program/activity)

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10. **What instructions will youth participants receive before the 4-H program/activity begins?** (i.e., instructions for safety, training related to protective devices, rules and regulations, warnings, etc.)

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11. **Other important information not covered in questions 1-10.**

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