

Pagoda Trip/Activity Risk Assessment

Before you take a group of participants on a day trip, a group activity or a weekend away, you MUST run through the steps below to make sure nothing gets forgotten.

* Indicates required question

1. Email *

2. Name of trip or activity *

3. Date of trip or activity will take place *

Example: January 7, 2019

4. Travelling from which Pagoda destination? *

Mark only one oval.

- Bangkok
- Chengdu
- Hanoi
- Ho Chi Minh City
- Lisbon
- Madrid
- Manchester
- Mexico City
- Taipei

5. Planned participant to staff/uni staff/tour guide ratio *

Mark only one oval.

- <10:1 - fewer than 10 participants to 1 staff member/uni staff/tour guide
- >10:1 - more than 10 participants to 1 staff member/uni staff/tour guide

6. Planning Risks *

Which of these risks should we be thinking about for on this particular group doing this particular trip/activity during the planning phase?

Check all that apply.

	Low	Medium	High	Not applicable
Ticket availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drop outs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overdemand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underdemand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bad accessibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-existing medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Busy itinerary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cancellation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transport delay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staffing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Preventative Measure - Planning Risks

What measures should we be putting in place to prevent some of the common issues that might effect the planning of this trip/activity?

Mark only one oval per row.

	Early deadline	Late deadline	Adapt itinerary	More staff	Contingency	Time buffer
Ticket availability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High cost	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drop outs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overdemand	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Underdemand	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Language barrier	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bad accessibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pre-existing medical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Busy itinerary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cancellation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transport delay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staffing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Other Planning Risks *

Please list any other planning risks that could impact on this particular activity/trip and write down any preventative measures we are taking.

11. Other People Risks *

Please list any other people risk that could impact on this particular activity/trip and write down any preventative measures we are taking.

12. Natural Risks / Force Majeure *

How likely are the following risks to occur during this trip/activity?

Check all that apply.

	Low	Medium	High	Not Applicable
Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Earthquake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flooding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forest Fire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Typhoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Preventative Measures - Natural Risks

What actions have we put in place in case they occur? For example, what if one of these things effects place in the hotel where you will be staying or the mountain you are going to climb?

Mark only one oval per row.

	weather forecast	warned participants	trained staff	evacuation plan
Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Earthquake	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flooding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Forest Fire	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Typhoon	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Other potential natural risks? *

Please list any other natural risks that could impact on this particular activity/trip and write down any preventative measures we are taking.

15. Final Pre-Trip Checklist *

In case of emergencies and difficulties accessing wifi/internet in the destination, the following details must be printed/written down in advance.

Check all that apply.

	Done	Still to be actioned
Printed copy of participant list & emergency details	<input type="checkbox"/>	<input type="checkbox"/>
Noted embassy contact details for all relevant nationalities near location	<input type="checkbox"/>	<input type="checkbox"/>
Noted best international hospital details in location	<input type="checkbox"/>	<input type="checkbox"/>

16. Actions required *

For any points in the checklist that are "still to be actioned", on what date will the action be completed and by who?

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