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| **CONTACT DETAILS** | | | |
| Name of person submitting assessment: Click here to enter text. | | Position: Click here to enter text. | |
| School/Branch/Faculty: Click here to enter text. | | Date of assessment: Click here to enter a date. | |
| Phone: Click here to enter text. | | Email: Click here to enter text. | |
| **MOBILITY PROGRAM DETAILS** | | | |
| Name of mobility program: Click here to enter text. | | | |
| Program commencement date: Click here to enter text. | | | |
| Name and position of **all** staff accompanying mobility program: Click here to enter text. | | | |
| Mobility Partners involved (such as Third Part Providers, partner institutions that are providing services etc): Click here to enter text. | | | |
| Outline of proposed Mobility Program including major activities (draft itinerary): Click here to enter text. | | | |
| Is this program funded through a Government Mobility Grant? No  NCP:  Endeavour: | | | |
| Who in the school/faculty will provide pre-departure and in-country risk management support? Click here to enter text. | | | |
| **DETAILS:** of the program / activity | | | |
| Provide a brief summary about what you want to achieve – what is the objective or goal of the program / activity?  [*Describe the activity in as much detail as needed so that decision makers will understand what you want to do / want to achieve. Include details such as the number of students involved, student/staff ratio, who is delivering the learning content, how student work will be assessed, what cultural activities or excursions are planned?*Click here to enter text. | | | |
| **SOURCE OF RISK / CONTRIBUTING FACTORS:** You must use the DFAT Country Profiles on the Smartraveller website to identify possible risks and address how you will mitigate these risks. You should also identify risks particular to your program. | **CONSEQUENCES:** Potential consequences | | **CURRENT CONTROLS:** i.e. that are in place now |
| List at least 5 factors that may contribute to, or have an adverse or unanticipated impact on this activity, and the success of it?  [*Think broadly: it may be about people, behaviour, language or cultural issues, the nature of the environment, financial considerations, political security or personal safety, medical emergencies, level of supervision etc].* | List at least 5 activities that could go wrong, or stop you achieving your objectives / target? What would keep you awake in the night worrying about this activity?  [*Consider the worst things that could happen or go wrong. Think broadly: it may be people, behaviour, environmental; weather; property damage; personal injury / harm; legal issues; adverse media attention; reputational; financial loss / impac*t] | | What processes / procedures are in place already that are designed to stop things going wrong?  *For example, do you have an in-country emergency response plan? What is your Plan B? How will you contact students? Are these systems, processes, procedures sufficient to stop you worrying about what might go wrong?* |
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| **RISK RATING:** | | | |
| Using the [University Risk Matrix](http://www.adelaide.edu.au/legalandrisk/system/files/media/documents/2019-01/University_Risk_Matrix.pdf), assess the likelihood & impact of something going wrong – i.e. failing to achieve your objective or target.  Assessing the likelihood & impact will give a risk rating [e.g. low, medium, high or extreme risk].  Likelihood: Click here to enter text. Impact/consequence: Click here to enter text.  Document the risk rating: Choose an item. | | | |
| **IS FURTHER TREATMENT NEEDED?** | | | |
| If the *existing* systems, processes, procedures are not sufficient to prevent things going wrong, consider what more can be done that is reasonable and practical, with consideration for financial or resource constraints. Further treatment is determined based on the strength of the current controls and the risk rating. If you don’t think any further treatment is needed, please say why.  Click here to enter text. | | | |
| *For assistance with any of the above fields, refer to the* [Risk Management Framework](http://www.adelaide.edu.au/legalandrisk/system/files/media/documents/2020-04/risk-management-framework.pdf) *on the Legal and Risk Branch website.* | | | |

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| **ADDITIONAL CONSIDERATIONS:** | | |
| Will this activity involve children (i.e. students under 18 years of age)? | Yes  No | **If Yes**: refer to the [Child Safe Environment Policy](http://www.adelaide.edu.au/policies/3883/) |
| When will this activity occur? | Start date: Click here to enter a date. | End date: Click here to enter a date. |
| In what country/countries will the activity occur? | Click here to enter text. | |
| What are the estimated number of students participating in the program? | Click here to enter text. | |
| Have you read and understood the obligations of staff and students under the DFAT Preventing Sexual Exploitation, Abuse and Harassment (PSEAH) Policy? <https://www.dfat.gov.au/sites/default/files/guidance-on-assessing-the-risk-of-seah.pdf> | Yes  No | |
| Are there any DFAT warnings or sanctions applied to this country / these countries?  Check the DFAT website:  [smarttraveller.gov.au](http://smartraveller.gov.au/Countries/Pages/default.aspx) | Yes  No  Please provide details: | **If Yes**:  Policy exclusions may apply - check the [Travel Insurance Guide](http://www.adelaide.edu.au/legalandrisk/system/files/2020-02/travel-insurance-guide.pdf) for a list of excluded countries. Please contact the Insurance Office if you’re unsure:  T: +61 8 831 34539  Email: [helpdesklegal@adelaide.edu.au](mailto:helpdesklegal@adelaide.edu.au)  Where the DFAT warning is 3 or 4, a [Travel to High Risk Destinations](https://www.adelaide.edu.au/finance/docs/forms/secure/high-risk-travel-approval-form.pdf) form *is required*; attach a copy of the approval to travel |
| Have you talked to your Head of School or Faculty Deputy Dean (International) about this proposal? | Yes  No | **If Yes**:  Who have you discussed this with?  Click here to enter text.  **If No**:  Please check the Staff & Contacts list on the [Global Engagement website](https://www.adelaide.edu.au/pvci/about/staff) for the list of current Associate Deans (International)  [*scroll down to the dropdown heading ‘Other university staff involved in Global Engagement activities’*] |
| Please send this risk assessment, and a copy of any supporting documentation, to your School /Faculty approver, with a CC to [emma.laurence@adelaide.edu.au](mailto:emma.laurence@adelaide.edu.au) | | |
| **A copy of the assessment - including any/all relevant documents is attached** | | |

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| **AUTHORISATION (SIGNATURE REQUIRED)** |
| **Head of School/Associate Dean International**  **Name (please print)**  **……………………………………………………………………………………………………………………………………………….**  **Signature:………………………………………………………………….…………… Date:……………………………………..** |