

**UK TRAVEL PROPOSAL, RISK ASSESSMENT &**

**EMERGENCY CONTACT DETAILS FOR**

**STUDENT RESEARCH ACTIVITY**

Please complete section A. Part B should only be completed if the trip includes an overnight stay.

**PART A**

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| **EMERGENCY CONTACT NUMBERS AT OXFORD BROOKES UNIVERSITY**  In the event of an emergency outside normal office hours the following contact numbers should be used | | | |
| Facilities Office | (UK) 01865 483059 | (INT) + 44 1865 483059 | |
| Facilities Office  Control Room (24 hrs) | (UK) 01865 483060 | (INT) + 44 1865 483060 | |
| Student Services | (UK) 01865 484650 | (INT) + 44 1865 484650 | |
| Name |  | |
| Faculty/Directorate |  | |
| Destination(s) |  | |
| Dates of trip |  | |
| Reason for trip |  | |
| Source(s) of funding – state account code(s), if known |  | |
| Will the source(s) of funding cover all costs (travel, accommodation, subsistence)? If not, how are the remaining costs being covered? |  | |
| Contact details (if/where possible) during travel |  | |
| Activities |  | | |
| Special points of safety (if known) |  | |
| Type of accommodation (e.g. hotel, camping) |  | |
| Method of travel |  | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **RISK ASSESSMENT**  Oxford Brookes University requires that a risk assessment be undertaken prior to any work-related trips either within the UK or abroad, *including trips for the purposes of research*. Such a risk assessment must be appropriate and proportionate to the proposed research and the level of risk anticipated. For this reason the following guidance has been produced *specific to* *research* *activity* undertaken by students within the Faculty of Health & Life Sciences.  In many cases, the research itself will not pose significant risks or hazards - but this can only be established through the process of risk assessment. The purpose of risk assessment is therefore to establish the level of risk for the researcher and the University. On this basis, the research can be planned to take all potential safety and security issues into account. Risks to *research participants* are appraised through the process of ethics review and are outside the remit of these procedures.  Research conducted at campuslocationsis likely to pose a lower risk than that conducted off-campus. Similarly, research within the UK *may* present fewer risks than research overseas which necessarily requires travel to the research destination.  For research in the UK, a preliminary assessment of the risks involved should be made by completing the section below. The initial assessment of risk will determine the need for a fuller risk assessment which may be sent to the Research Supervisor for completion by the Facilities and Services Manager.  The completed risk assessment must then be ‘signed off’ by the Associate Dean, Research & Knowledge Transfer or the Postgraduate Research Tutor or the relevant Head of Department.  **To be completed by students with their Research Supervisor.**   |  |  |  | | --- | --- | --- | | Research Student |  | | | Supervisor |  | | | Title of Research |  | | |  | | **Yes/No** | | **Assessing risk in a fieldwork site** | |  | | Does the fieldwork location at which the data are to be collected present any risks for the researcher i.e. a high crime rate, little public activity, poorly lit | |  | | Are there any local tensions such as strong cultural, racial or religious divisions? | |  | | Are there cultural, race or gender issues that might make the researcher more vulnerable e.g. a lone female researcher in an orthodox culture | |  | | **Risk and research participants** | |  | | Does the profile of the participants pose a risk e.g. history of psychological disturbance, violent behaviour? | |  | | Are the topics for discussion likely to provoke strong feelings / angry reactions / a threat of violence? | |  | | **Risk in the conduct of fieldwork / data collection** | |  | | Are there any situations that might provoke hostility? | |  |   **The initial assessment of risk will determine the need for a fuller risk assessment which may be sent for completion by the Facilities and Services Manager.**  **Declaration**  I / we have consulted the OBU guidance on Risk Assessment [(OBUHSN-36)](http://www.brookes.ac.uk/services/hr/health_safety/docs/obuhsn36.html), Working Alone Safely [(OBUHSN-31)](http://www.brookes.ac.uk/services/hr/health_safety/docs/obuhsn31.html) and Fieldwork and Outdoor Education ([OBUHSN – 24](http://www.brookes.ac.uk/services/hr/health_safety/docs/obuhsn24.html)).    Based on completion of the above checklist and an assessment of the risks involved in conducting the following research, I / we conclude that the risks involved in the conduct of this research are no greater than those ordinarily encountered in daily life. | | | |
| Signature of research student: | Date: | |
| Signature of research supervisor: | Date: | |

Please return this form to:

**Facilities and Services Manager, Executive Office, Sinclair Building, Gipsy Lane.**



**NOTICE OF INTENDED UK TRAVEL**

**EMERGENCY CONTACT DETAILS - RESEARCH STUDENTS**

**PART B**

The information below must be completed if you are staying overnight. The information you provide will be treated in confidence and only used in an emergency.

|  |  |  |
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| Emergency Contact Details | | |
| Name | | Student Number |
| Faculty/Directorate | | Department |
| Date of departure | | Date of return |
| Destination | |  |
| Home Address | | Telephone Number |
| Next of Kin's Name and Address | Telephone Number | |
| Current GP's Name and Practice Address | Telephone Number | |
| Signature: Date: | | |

Please return this form to: **Facilities and Services Manager, Executive Office, Sinclair, Gipsy Lane.**

*For Facilities and Services Manager use:*

* Part B to Research Administrator, Gatehouse, HHH.