**4-H Events Information and Risk Management Checklist
Jefferson County 4-H**

*Dear 4-H Event Coordinator,****Please complete and return the following form and checklist at least 2 weeks prior to your event****. Taking the time to identify potential risks inherent to your event – and then making a plan to avoid, reduce, or respond to such risks – will help you to fulfil your duties as a 4-H leader in providing a safe environment for all youth and adult participants. Please consider asking key adults and/or youth 4-Hers to help you complete this checklist so that all of your event leaders take responsibility for event safety. Please also contact me if I can be of assistance as you plan.
 Very best wishes on your event planning, Tanya Barnett (4-H Coordinator, WSU Extension Jefferson County)*

**EVENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Event: |  | Date(s): |  |
| Location(s): |  | # of Anticipated Participants ENROLLED in 4-H (Youth & Adult): |  | # of Anticipated **Participants NOT Enrolled in 4-H** (Youth & Adults): |  |
| Name of EventCoordinator: |  | Coordinator’s Phone #& Email: |  |
| Positive Youth Development Goals for Event: |  |

**FACILITIES***Safety Requirements*

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | The site provides a safe environment for all participants |
|  | The site is accessible for individuals with disabilities and special needs |
|  | Emergency exits are clearly marked, unlocked and easily accessible |
|  | Emergency equipment (e.g., fire extinguishers) exists and is accessible |
|  | Buildings and grounds are free of dangerous objects (e.g., rusty nails, broken glass, hypodermic needles, unsafe equipment, etc.) or dangerous areas are clearly marked as off-limits |
|  | The facilities meet animal needs (if applicable) |
|  | Buildings not in use during event remain locked |
|  | If other groups plan to the site during our event, we have a plan in place to avoid conflicts |

*Liability Requirements*

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | I have obtained facility use forms, agreements, and/or contracts from site managers |
|  | I have shared these forms, agreements, and/or contracts with 4-H Staff so that he/she can take these through the appropriate channels at WSU for review |
|  | I have followed up with facility management and/or 4-H Staff to be sure that forms, agreements, and/or contracts have been received and meet requirements of both entities |
|  | If payment of facility is required, I have made sure that all forms, agreements, and/or contracts have been approved prior to making a payment and/or deposit |
|  | If facility requires a certificate of liability, I have contacted 4-H Staff to arrange this |
|  | **If event will involve participants NOT enrolled in 4-H, I have contacted 4-H Staff to arrange Special Event Insurance coverage** |

**TRANSPORTATION***Compliance with WSU Safety Policies and Procedures Manual (*[*https://policies.wsu.edu/prf/index/manuals/7-00-motor-vehicle-safety/7-10-requirements-driving-vehicles-university-business*](https://policies.wsu.edu/prf/index/manuals/7-00-motor-vehicle-safety/7-10-requirements-driving-vehicles-university-business)*)*

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | I have checked driver qualifications: valid drivers license (valid for vehicle to be driven), at least 18 years old, at least 2 years of driving experience, and insurance coverage |
|  | I have checked driving conditions and condition of vehicle(s) and planned for safest route |
|  | I have oriented drivers re: planned route, arrival time and destination, First Aid Kits, and communication plan (e.g., exchanging cell phone numbers in case of separation)  |
|  | Drivers will remind all passengers to wear their seatbelts at all times |
|  | All passengers reminded to talk and act in a manner that will not distract the driver |
|  | Drivers reminded to operate vehicles in a professional and safe manner, and comply with applicable traffic laws and regulations at all time |
|  | Drivers carry a copy of all passengers’ emergency contact and medical information |

**LEADER & PARTICIPANT RESPONSIBILITIES**

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | We have organized the event schedule to prevent injury, fatigue, and/or undue stress to participants and leaders |
|  | We have an adequate number of enrolled, adult Certified 4-H Volunteers[[1]](#footnote-1)\* (including chaperones) – i.e., at least 1 Certified 4-H Volunteer per group of up to 10 youth |
|  | All chaperones, volunteers, and leaders (youth and adult) have received an orientation regarding: their roles and responsibilities, emergency procedures and contacts, event schedule, and incident reporting |
|  | All participants will receive an orientation regarding event and/or facility rules, emergency procedures, event schedule, equipment use, and 4-H Youth Code of Conduct (<https://s3.wp.wsu.edu/uploads/sites/2077/2018/09/4-H-Youth-Code-of-Conduct.docx>)  |
|  | All parents/guardians have travel and event schedule and emergency contact information |
|  | We have adequate tracking systems for participant check-in/-out and accompaniment during event, e.g., “buddy system” or “truddy system” (3 youth) |

**EMERGENCY**

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | Through <https://wa.4honline.com>, I will have access to all participants’ health and authorization information (including emergency contacts) and/or I will have printed copies of this information during the event (contact 4-H Staff prior to event to obtain access and/or hardcopy participant information) |
|  | We have an emergency action plan that includes: minor incident/first aid response, access to emergency medical treatment and contact numbers, at least 2 adults on hand at all times, back-up plans, and natural disaster procedures |
|  | We have at least one up-to-date First Aid Kit accessible at all times |
|  | Incident Report Forms are downloaded and available during the event (download at <https://s3.wp.wsu.edu/uploads/sites/2077/2017/06/Incident-Report-Form.pdf>)  |
|  | We have made arrangements for a doctor, nurse, EMT, and/or CPR-trained personnel on site or on call |

**OVERNIGHT EVENTS**

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | We have an adequate number of enrolled, adult Certified 4-H Volunteers[[2]](#footnote-2)\* – i.e., at least 1 Certified 4-H Volunteer per 10 youth; Volunteer must be 21 for overnight events within WA and 25 for overnight events outside of WA |
|  | We have a minimum of 1 Certified 4-H Volunteer per 10 youth and per gender (i.e., for co-ed overnight events, a minimum of 2 Certified 4-H volunteers needed) |

 **FOOD**

|  |  |
| --- | --- |
| ✓ or NA |  |
|  | Food handlers will follow WA Food Safety Tips (<https://www.doh.wa.gov/YouandYourFamily/FoodSafety/Tips>; e.g., raw meat separate from fresh fruit)  |
|  | Through <https://wa.4honline.com>, I will review all participants’ dietary restrictions |
|  | We will have access to clean water at all times  |

*I have reviewed this document and confirm that its contents are accurate:*Event Coordinator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4-H Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WSU 4-H STAFF CONTACT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Name & Role | Office Phone # | Emergency Phone # | Email Address |
| Tanya Barnett, 4-H Coordinator in Jeff. Co. | 360-379-5610 x208 | 206-853-0562 | tanya.barnett@wsu.edu  |
| Joy Lile,WSU 4-H Regional Specialist | 360-337-7157 #6266 |  | joy.lile@wsu.edu  |
| Clea Rome,WSU Extension Dir. Jeff. Co. | 360-417-2280  |  | clea.rome@wsu.edu |
| Nancy Deringer,WSU State Program Leader 4-H Youth Development | 509-358-7788 |  | nancy.deringer@wsu.edu  |

1. \* Any adult who will be alone with 4-H youth must successfully complete the 4-H Volunteer Certification Process; contact your 4-H Staff for volunteer application [↑](#footnote-ref-1)
2. [↑](#footnote-ref-2)