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| Safety Plan  *A safety plan must be completed for every activity and group within the circuit, including regular and one-off events.*  *For regular activities, a plan can be created and updated annually.*  *This safety plan must be completed and returned to the church safeguarding officer at least 2 weeks before. Contact: enter*  *Any off-site activities must be completed and returned to the circuit safeguarding officer at least 4 weeks before. Contact: enter* | | | | | | | | | | | | | | | |
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| **Church/Chapel:** | |  | | | | | | **Type:** (⌧ check) | | On-Site (Church) | | | | Off-Site | |
| **Group/Event:** | |  | | | | | | **Group/Event Leader/s:** | |  | | | | | |
| **Location:** | |  | | | | | | **Leader Contact Details:** | | ✆ |  | | | | |
| **Date/s:** | |  | | | | | | 🖳 |  | | | | |
| **Time/s:** | |  | | | | | | 🖃 |  | | | | |
| **Activity/ies:** | |  | | | | | | | | | | | | | |
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| **Attendees (**⌧ **check all that apply):** | | | | | | | | | | | | | | | |
| Church/Circuit Members | | | Wider Community/General Public | | | | | Circuit Employee/s e.g. Minister | | | | Invited Guest/s e.g Speaker/s | | | |
| Children with Parents/Carers | | | Children without Parents/Carers | | | | | Vulnerable Adults | | | | People with a Disability or Frail | | | |
| **Expected # of Attendees:** | | |  | | | **The venue can safely host this number of attendees:** | | | | | | yes/no | | | |
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| For support in planning large events, go to: https://www.methodist.org.uk/media/3982/organising-events-guidance-pack-large.pdf  NSPCC recommended adult:child ratios: 0 - 2 years – 1:3 2 - 3 years – 1:4 4 - 8 years – 1:6 9 - 12 years – 1:8 13 - 18 years – 1:10 | | | | | | | | | | | | | | | |
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| **Contingency Plans** | | | | | | | | | | | | | | | |
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| If at any time you have a worry or concern about a child, a young person, or a vulnerable adult who attends the group, event, church or uses the premises, report your concerns as soon as possible to one of our trained safeguarding officers:  Church: enter here  Circuit: *enter*  Minister: enter here  If you have an immediate concern for someone’s safety and/or welfare and you are unable to reach one of our safeguarding leads, please call:  *enter local social services numbers*  You can read our church’s safeguarding policy online: enter website here | | | | | | | | | | | | | | | |
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| Completed by: |  | | | Date: |  | | Safeguarding Officer: | |  | | | | Date Received: | |  |
| Notes: |  | | | | | | | | | | | | | | |

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| **Area** | **Element** | **Risks** | **Likelihood** | **Harm** | **Overall Score** | **Prevention** | **Person Responsible** | **Person/s to Action** | **When** | |
| Specific Element of the Group or Event  e.g. serving tea/coffee | What could be unsafe?  Are there any potential hazards? | 5=Certain  4=Probable  3=Possible  2=Not impossible  1=Never | (physical & psychological)  5= Life-  threatening  4=Serious  3=Harm  2=Minimal  1=No harm | Likelihood x Harm  *Scores of 9+ requires permission of SO and minister* | What actions would reduce the likelihood of this happening? | Who is the lead person to ensure this action is planned for, communicated and implemented? | Which people need to be aware of this and support/ action the implementation? | Communicated to volunteers by when? | Implemented by when? |
| **Location, venue, building or room** |  |  |  |  |  |  |  |  |  |  |
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| **Activities & equipment** |  |  |  |  |  |  |  |  |  |  |
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| **Area** | **Element** | **Risks** | **Likelihood** | **Harm** | **Overall Score** | **Prevention** | **Person Responsible** | **Person/s to Action** | **When** | |
| Specific Element of the Group or Event  e.g. serving tea/coffee | What could be unsafe?  Are there any potential hazards? | 5=Certain  4=Probable  3=Possible  2=Not impossible  1=Never | (physical & psychological)  5= Life-  threatening  4=Serious  3=Harm  2=Minimal  1=No harm | Likelihood x Harm  *Scores of 9+ requires permission of SO and minister* | What actions would reduce the likelihood of this happening? | Who is the lead person to ensure this action is planned for, communicated and implemented? | Which people need to be aware of this and support/ action the implementation? | Communicated  to volunteers by when? | Implemented by when? |
| **Volunteers** |  |  |  |  |  |  |  |  |  |  |
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| **All attendees** |  |  |  |  |  |  |  |  |  |  |
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| **Area** | **Element** | **Risks** | **Likelihood** | **Harm** | **Overall Score** | **Prevention** | **Person Responsible** | **Person/s to Action** | **When** | |
| Specific Element of the Group or Event  e.g. serving tea/coffee | What could be unsafe?  Are there any potential hazards? | 5=Certain  4=Probable  3=Possible  2=Not impossible  1=Never | (physical & psychological)  5= Life-  threatening  4=Serious  3=Harm  2=Minimal  1=No harm | Likelihood x Harm  *Scores of 9+ requires permission of SO and minister* | What actions would reduce the likelihood of this happening? | Who is the lead person to ensure this action is planned for, communicated and implemented? | Which people need to be aware of this and support/ action the implementation? | Communicated to volunteers by when? | Implemented by when? |
| **Children/vulnerable adults specifically** |  |  |  |  |  |  |  |  |  |  |
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| **Medical/first aid/disabilities** |  |  |  |  |  |  |  |  |  |  |
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| **List of Volunteers**  **(past 12 months and current if for a regular group/event)**  *Please complete all columns that apply* | | | | |
| **Name** | ✓  Attended Basic safeguarding training and/or Advanced Module in the last 3 years | ✓  If no training, have they read & signed ‘Safeguarding Information Leaflet and Agreement’?  *Submit signed copies* | ✓  Has current DBS check  *Check with Minister or*  *church safeguarding officer if unsure* | ✓  I have their contact details including address should a safeguarding issue arise |
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