Kat's Care Services 8 Stafford Road West Albury NSW 2640 ABN: 47 072 958 232

www.katscareservices.com.au

Benefit Risk Excursion and Hazard Management Audit

You must complete this form in conjunction with Kat's Care Services Excursions Procedure

	The state of the s		
Provider: Katrina Thompson	Date of Benefit risk assessment visit: 01/01/24 and ongoing	Date of excursion: Current to 31/12/2024	
Destination: LENNON BROS CIRCUS or OTHER ACTIVITIES	ES-Food and Entertainment Including Rides:		
Lincoln Causeway, Gateway Island NSW 3690, OR Council			
Council run activities at Albury Showground or Albury Racetrack – arranged for families such as		Routine: \square Non-Routine: \square	
markets, rides, music council run activities.	an an goard ranning cash as		
Route to Location:			
LINCOLN CAUSEWAY https://goo.gl/maps/5a3B7d5KLWt	RISK LOW WITH INTERVENTIONS IN		
PLACE.	WITH INTERVENTIONS IN	Proposed time of excursion: as booked.	
ALBURY RACETRACK https://goo.ql/maps/XTu6CWCaJ9Pe	acw6V0	rroposed time of exedision: as booked:	
ALBURY SHOWGROUNDS https://goo.ql/maps/HNTmp6Q			
Responsible Parent/Guardian Authorisations:	pazi xwojuo		
		Annuarimenta Duration, 2 FLIDC or langue if	divacted for
I agree to the participant attending	Anticipated Number of Participants: 4-7	Approximate Duration: 2.5HRS or longer if	directed for
excursion as documented and approved by	·	Council run activity.	
Service.			
Participant Name:	Parent/Guardian Signature:	Method of Transport: (PROVIDERS) VEHICLE CGI31Y OR (DAKODA)	
Dautisiaant Nama	Dawart Coandina Cianatuma	CG21YB	
Participant Name:	Parent/Guardian Signature:	Anticipated Number of Providers: 1	
Participant Name:	Parent/Guardian Signature:	Other Adults Listed:	
B. C. L. M.	D 1/0 1: 0: 1	Other Addits Listed.	
Participant Name:	Parent/Guardian Signature:	1. DANE KREMERS	
Participant Name:	Parent/Guardian Signature:	2. DAKODA THOMPSON & TANIKA THOMPS	SON
	Tanana atan ang natara	2. DARODA THOMISON & TANIRA THOMIS	
Participant Name:	Parent/Guardian Signature:	Service Approval Signed:	
Participant Name:	Parent/Guardian Signature:	Carrier Americal Dates 01:01:2024	
Tartelpane Name:	Tarchiq Gaaraian Signatarer	Service Approval Date: 01:01:2024	
Participant Name:	Parent/Guardian Signature:	Benefits of proposed excursions/outing and activities:	
Participant Name:	Parent/Guardian Signature:	Routine drop off/pick up	
Participant Name:	Parent/Guardian Signature:	Educational Outing	

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Participant Name:	Parent/Guardian Signature:	Nature experience	\boxtimes
Participant Name:	Parent/Guardian Signature:	Developing communication skills	\boxtimes
Participant Name:	Parent/Guardian Signature:	Extension of gross motor skills	\boxtimes
Participant Name:	Parent/Guardian Signature:	Meeting new people or developing relationships	
Participant Name:	Parent/Guardian Signature:	Learning about the community	\boxtimes
Participant Name:	Parent/Guardian Signature:	New Opportunities to learn □	
Participant Name:	Parent/Guardian Signature:	(provide rationale below)	

Benefits of the Activity:

Learning Vocabulary: participants can learn vocabulary from a second language by observing / mirroring peers or use vocabulary to seek help to understand what a circus or other entertainment entails. Learning Pro-social Behaviours: participants can learn pro-social skills like sharing; problem-solving and sensitivity to different cultures within a social setting.

Activity is a current currency used to reward positive behaviours and/or as a participant directed outing.

For participants impaired verbally excitement can develop with discussion explaining where we are going and what we are seeing; show pictures; make effort to dress up; model excitement for a wonderful and rewarding outing.

Praise positive behaviours in social setting upon return; discuss activity with others including participants verbally impaired (by name) and observe visual cues to use to extend conversation; ensure inclusion not exclusion.

Experience the Circus firsthand and discuss circuses with animals and without or other activities arranged by councils on either side of the causeway – very open topic that is discussed in the wider social setting. Provide participants with opportunity to role play and mirror what they have seen throughout the performance.

Experience local council run activities held at the Albury Showground or Albury Racetrack – such as night markets, rides, music, or activities authorised by the parent/guardian and Participant as guided with interest. TO HAVE FUN!

Hazard's Identified	Comment if hazard identified	Precaution/Control Measures	Managed by who and when?
Are there water hazards (including water play)?	☑ List:	Some puddles noted with rain – wear old shoes.	PROVIDER
Are there traffic hazards?	☑ List:	Carpark, participants to stay close to provider. Seatbelts to be always worn within vehicle.	PROVIDER
Are there human hazards?	☑ Comment:	Stranger Danger' 'Hands and Feet to Self.'	PROVIDER
Are there chemical hazards?	☐ Comment:	Not observed.	PROVIDER
Are there poisonous or dangerous plants?	☐ Comment:	N/A	PROVIDER

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Are there fall, trip, or slip hazards?	☑ Comment:	Yes - participants to be aware, tent is set up on grass area, stairs to seats-disabled access.	PROVIDER
Weather considerations? UV rating, gumboots, coat, hats, sun protection.	☑ Comment:	Dress to weather as cold within tent in Winter – and/or outdoors through cooler months.	PROVIDER
Are there toilets/hand washing and water accessible?	☑ Comment:	Always accompany participants to toilet area and remain until finished, older to be careful of stranger danger – disabled toilets normally available-call ahead re same.	PROVIDER
Is play equipment safe?	☑ Comment:	Parent/Guardian to acknowledge risk associated with rides. Participant reserves the right to choose appropriate risk.	PROVIDER
Is the environment clean and safe?	☑ Comment:	Participants to acknowledge not to touch any food / drinks not theirs.	PROVIDER
Is the environment smoke free?	☐ Comment:	Smoking areas noted – keep participants away from same.	PROVIDER
Is there mobile phone coverage?	☑ Comment:	Provider to have mobile always - 0409 274 790.	PROVIDER
Are there any other hazards not listed?	☑ List:	Carpark with younger participants, same to be monitored for older, participants need to be responsible and stay with provider, within tent and outside.	PROVIDER
Individual participant medication or other car needs? (Consideration of participant with special needs e.g., asthma or anaphylaxis):	☑ List:	Participant's medications carried with provider always, participants information able to be accessed via drop-box / information sheets carried on provider.	PROVIDER
Emergency contact numbers available:	☑ List:	Participant/parent/guardian information able to be accessed via drop-box, information sheets carried with provider for emergencies.	PROVIDER
First Aid kit available:	☑ List:	Yes, in vehicle.	PROVIDER

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