**COVID -19 Holiday Risk Assessment**

**Name of foster carer/s:**

**Name of foster child/ren:**

**Names of who is going on holiday:**

**Dates of holiday:**

**Address of holiday accommodation:**

**Holiday insurance details:**

**Name of SSW:**

**Are child(ren)’s social worker(s) aware of holiday and have they given their agreement? YES/NO**

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| --- | --- | --- | --- |
|  | **HOLIDAY DETAILS** |  | **STAY ALERT and SAFE** |
| **Destination**  |  | * Risk of contracting or spreading the Covid-19 virus
 | [www.gov.uk](http://www.gov.uk) coronavirus (COVID-19 ) guidance and support will be followed for the duration of the holiday |
| **Type of accommodation** |  | * Risk of contracting or spreading the Covid-19 virus
 | [www.gov.uk](http://www.gov.uk) coronavirus (COVID-19 ) guidance and support states that people from the same household are permitted to stay in holiday accommodation together in their ‘bubble’.  |
| **Travel arrangements** |  | * Risk of contracting or spreading the Covid-19 virus
 | [www.gov.uk](http://www.gov.uk) coronavirus (COVID-19 ) guidance and support states that people from the same household can travel together in a vehicleThe route to the destination should be planned including any breaks. Facemasks and hand sanitiser should be used and social distancing guidelines should be followed for any breaks where the family are having contact with people outside of their ‘bubble’. |
| **Eating arrangements** |  | * Risk of contracting or spreading the Covid-19 virus
 | The family will supply their own food. All crockery and cutlery provided by the Holiday Park in the caravan/ mobile home will be washed prior to using. If dining out then the family will follow Government Guidelines with regards to frequent washing, sanitising of hands, social distancing and wearing of masks in public areas.  |
| **Leisure**  |  | * Risk of contracting or spreading the Covid-19 virus
 | The family will follow Government Guidelines with regards to frequent washing, sanitising of hands, social distancing and wearing of masks in public areas.  |
| **Health** |  | * Risk of contracting or spreading the Covid-19 virus
 | At the time of completing this risk assessment the family are well and have no signs or symptoms of the Covid-19 virus or any other illness.  |
| **Travel Insurance** |  |  | Travel insurance has been seen by the SWW and the terms of the travel insurance are fully understood. |
| **Impact of potential need to self-isolate upon return** |  |  | Any impact upon foster child of having to self-isolate – ie: direct contact, return to school. |

Agreed and Signed by Group Manager Fostering : Date:

Agreed and Signed by Group Manager Child’s SW team (if trip is abroad) : Date: