



OYA RECREATIONAL ACTIVITY RISK ASSESSMENT

State of Oregon
OREGON YOUTH AUTHORITY

Instructions: Prior to OYA youth participation in a recreational activity that may be of higher risk or higher profile, a substitute care provider who has a comprehensive understanding of the participating offender behaviors and the proposed activity will complete this assessment, and submit it for OYA review and approval. Follow approval process below, depending on provider type.

Program and/or Foster Home: _____ Foster Care Certifier: _____

1. Purpose or Goal of Activity:

2. Description and Overview of Activity Planned:

3. Location, Date(s) and Duration:

4. Address The Following For Each Known and Possible Hazard or Risk:

a. The Hazard or Risk
b. Safety/Control Measures Needed to Reduce Risks
c. Care Provider Competencies and Training
d. Staffing Ratio and Special Supervision Plans
e. Group Dynamics and Offender-specific Behavior
f. Medical Needs/Medical Management Plan

5. Travel and Overnight Lodging Plans:

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6. Emergency Precautions with Descriptions of Emergency Gear That Will Be On Hand (available):

7. Communication Plan:

Approval Signatures

I have been actively involved in the process of planning this recreational activity:

Youth Signature

Date

Approving Signatures For Foster Home Activity:

Certified OYA Foster Parents Signature

Date

Reviewed by Foster Care Certifier

Date

Approving Signatures For Residential Program Activity:

Residential Treatment Provider Signature

Date

Reviewed by Community Resources Unit

Date