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| **Risk Assessment** |
| **Risk Assessment for the activity of** | **Standing event** | **Date** | **26/08/2020** |
| **Club or Society** | **Southampton University Swimming Club** | **Assessor** | **Ryan Lamprell** |
| **President or Students’ Union staff member** | ***President*** | **Signed off** |  |

**COVID-19 Notice**

**This risk assessment must be read in conjunction with the club or society’s COVID-19 Risk Assessment on their SUSU page. Should any information in this risk assessment conflict with the measures listed in the COVID risk assessment, then the COVID risk assessment takes precedence over this document.**

| ***PART A***  |
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| **(1) Risk identification** | **(2) Risk assessment** | **(3) Risk management** |
| **Hazard** | **Potential Consequences** | **Who might be harmed** | **Inherent** | **Control measures** | **Residual** | **Further controls** |
| **Likelihood** | **Impact** | **Score** | **Likelihood** | **Impact** | **Score** |
| Slips, trips, and falls | Bruising, laceration, fracture of any body part. Potential head injury. | Everyone | 3 | 2 | 6 | **All areas to be kept tidy and no items to be placed where people are walking** | 2 | 2 | 4 |  |
| Overcrowding | Claustrophobia, panic and in extreme cases crushing injuries  | Public, members on stand | 3 | 3 | 9 | **Ensure members on stand don’t block the walkways when engaging with the public.** | 1 | 2 | 2 | Further control measures in place by venue. See venue’s own risk assessment. |
| Excessive heat from lack of air flow  | Dehydration, fainting | Members on stand | 1 | 4 | 4 | **Ensure all members on stand have access to water.****Ensure there are enough members on the stand to rotate in shifts with regular breaks to an environment with good airflow, heating control.** | 1 | 2 | 2 |   |
| Display falling over | Bruising, laceration to body parts. Potential head injury | Public and members on stand | 2 | 3 | 6 | **Ensure the stand is suitably restrained and not touched by members of the public** | 1 | 3 | 3 |  |
| Dehydration  | Cramp, fainting and in extreme circumstances loss of consciousness  | Swimmers | 3 | 2 | 6 | **Ensure all swimmers drink plenty of water and take a rest if needed.** | 1 | 2 | 2 |  |
| Transport to venue | Minor bumps/scrapes, contact with moving traffic, road accident and resulting injuries including concussion, fracture and in extreme circumstances death. | Members travelling to training | 2 | 4 | 8 | **Ensure that all drivers are suitably qualified and members traveling to training are vigilant of their surroundings. Members are encouraged to travel to training in pairs/ groups. Members are advised to wear suitable footwear and clothing for the conditions they are travelling in.** | 1 | 3 | 3 |  |

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| ***PART B – Action Plan*** |
| **Risk Assessment Action Plan** |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | **Review date** | **Outcome at review date** |
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| Responsible committee member signature: | Responsible committee member signature: |
| Print name: RYAN LAMPRELL | Date: 26/08/2020 | Print name: EVIE GARNER | Date: 26/08/2020 |

**Assessment Guidance**

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| 1. Eliminate
 | Remove the hazard wherever possible which negates the need for further controls | If this is not possible then explain why |  |
| 1. Substitute
 | Replace the hazard with one less hazardous | If not possible then explain why |
| 1. Physical controls
 | Examples: enclosure, fume cupboard, glove box | Likely to still require admin controls as well |
| 1. Admin controls
 | Examples: training, supervision, signage |  |
| 1. Personal protection
 | Examples: respirators, safety specs, gloves | Last resort as it only protects the individual |

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| **LIKELIHOOD** | 5 | 5 | 10 | 15 | 20 | 25 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 1 | 1 | 2 | 3 | 4 | 5 |
|  | 1 | 2 | 3 | 4 | 5 |
| **IMPACT** |

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| Impact | Health & Safety |
| 1 | Trivial - insignificant | Very minor injuries e.g. slight bruising |
| 2 | Minor | Injuries or illness e.g. small cut or abrasion which require basic first aid treatment even in self-administered.  |
| 3 | Moderate | Injuries or illness e.g. strain or sprain requiring first aid or medical support.  |
| 4 | Major  | Injuries or illness e.g. broken bone requiring medical support >24 hours and time off work >4 weeks. |
| 5 | Severe – extremely significant | Fatality or multiple serious injuries or illness requiring hospital admission or significant time off work.  |

Risk process

1. Identify the impact and likelihood using the tables above.
2. Identify the risk rating by multiplying the Impact by the likelihood using the coloured matrix.
3. If the risk is amber or red – identify control measures to reduce the risk to as low as is reasonably practicable.
4. If the residual risk is green, additional controls are not necessary.
5. If the residual risk is amber the activity can continue but you must identify and implement further controls to reduce the risk to as low as reasonably practicable.
6. If the residual risk is red do not continue with the activity until additional controls have been implemented and the risk is reduced.
7. Control measures should follow the risk hierarchy, where appropriate as per the pyramid above.
8. The cost of implementing control measures can be taken into account but should be proportional to the risk i.e. a control to reduce low risk may not need to be carried out if the cost is high but a control to manage high risk means that even at high cost the control would be necessary.

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| Likelihood |
| 1 | Rare e.g. 1 in 100,000 chance or higher |
| 2 | Unlikely e.g. 1 in 10,000 chance or higher |
| 3 | Possible e.g. 1 in 1,000 chance or higher |
| 4 | Likely e.g. 1 in 100 chance or higher |
| 5 | Very Likely e.g. 1 in 10 chance or higher |