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| **Risk Assessment** | | | | |
| **Risk Assessment for the activity of** | **Nightline** | | **Date** | **7/9/18** |
| **Club or Society** | **Southampton Nightline** | **Assessor** |  | |
| **President or Students’ Union staff member** |  | **Signed off** |  | |

| ***PART A*** | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **(1) Risk identification** | | | **(2) Risk assessment** | | | | **(3) Risk management** | | | |
| **7Hazard** | **Potential Consequences** | **Who might be harmed**  **(user; those nearby; those in the vicinity; members of the public)** | **Inherent** | | |  | **Residual** | | | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** | **Control measures (use the risk hierarchy)** | **Likelihood** | **Impact** | **Score** |
| Fire and not informed of fire procedures | Serious injury or death | Nightline volunteers | **2** | **5** | **10** | **Inform in the training of the fire procedures, and have information on site of the buildings fire procedure** | **2** | **3** | **6** | Organise frequent drills of volunteers in fire procedure |
| Emotional distress from work | Mental health injury leading to further consequences | Volunteers | **3** | **3** | **9** | **Have training of how to deal professionally with uncomfortable calls. The service is available to volunteers as well. Able to discuss with external or internal coordinator if having issues.** | **2** | **2** | **4** | Welfare up-to-date |
| Breach of anonymity | Threat to volunteers or callers | Volunteers and users | **2** | **3** | **6** | **Reiterate the importance of anonymity in the nightline training procedures. Never ask name of user or provide name in call. All members and volunteers on secure server only those within it can see** | **1** | **2** | **2** |  |
| Prolonged hours without sleep | Subsequent health issues | Volunteers | **3** | **2** | **6** | **Bed is provided for rest. Discourage from continuous consecutive nights on shift. Able to just operate IM if organised with the committee** | **2** | **2** | **4** | Keep updated on volunteers wellbeing and opinions on the night time shifts. |
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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: Charlotte Samways | | | | Date: 7/9/2018 | Print name: | | Date |

**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 |