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| **Risk Assessment** |
| **Risk Assessment for the activity of** | Welfare informal drop ins | **Date** | **24/08/18** |
| **Club or Society** | NurSoc | **Assessor** |  |
| **President or Students’ Union staff member** | *Jemima Kempton* | **Signed off** |  |

| ***PART A***  |
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| **(1) Risk identification** | **(2) Risk assessment** | **(3) Risk management** |
| **Hazard** | **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** |
| Spillage of hot beverages | Burns, inflammation, blistering | User, committee members, those in the vicinity, faculty staff members | **3** | **2** | **6** | Ensure hot beverages have tightly closed lids onEnsure drinks are not of scalding temperature (use urn)Store drinks only on stable surfacesLimit the amount of individuals within the space (book out a room) Committee hand out drinksAdvise individuals to wear clothing with ample coverageEnsure beverages are consumed when seated  | **2** | **2** | **4** | If any immediate risk, do not facilitate sessions with hot beverages present, offer cold beverages alternatively or ask individuals to self-cater |
| Food related illness | Gastroenteritis, diarrhoea, vomiting, fever, allergies | User, committee members, | **2** | **3** | **6** | No food to be prepared by members of committeeAll food contributed must be accompanied by full list of ingredients Everyone handling food must have washed their hands fully beforehandSeparate all food and labelsEnsure all pre-packaged food is within safe consumption limits eg use by/best before Ensure appropriate temperature environment | **2** | **2** | **4** | If any immediate risk, do not facilitate sessions with food present or ask individuals to self-cater |
| Overcrowding | Physical injuries, emotional stress | User, those nearby or in the vicinity | **2** | **2** | **4** | Advertise several dates and times for welfare drop-ins to avoid overcrowding of venueSet limit on number of places/people in session at one timeCommittee member to oversee entrances/exits at the doorBook venue with sufficient capacity | **1** | **2** | **2** | If any immediate risk, cease session  |

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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: J.Kempton | Responsible committee member signature: |
| Print name: Jemima Kempton | Date:24.08.2018 | 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 |