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| **Risk Assessment** | | | | |
| **Risk Assessment for the activity of** |  | | **Date** | **18/09/2020** |
| **Unit/Faculty/Directorate** | **University of Southampton Snooker and Pool Society** | **Assessor** |  | |
| **Line Manager/Supervisor** | ***Ross Honer- SUSPC President*** | **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** |
| The spread of COVID-19 | Serious illness, particularly to those with underlying health conditions | Anybody who accesses the snooker room or comes into contact with an infected person | **4-5** | **2-5** | **As high as 25 if control measures not put in place** | * **Only two out of four snooker tables in use (either tables 1 and 3 or 2 and 4)** * **Maximum of two players per table** * **Social distancing** * **Regular sanitation of tables and equipment** * **Fire door open to maximize air circulation** | **3** | **3** | **9** | Access to snooker tables only granted to those who book in advance |
| Tripping over the floor | Minor injuries, collisions with table/floor/people | User, anyone in the near vicinity | **2** | **1** | **2** | **Snooker benches will be cleared. Any loose area of carpet around the competition table will be stuck down with black gaffer tape to minimize tripping and/or falling of player.** | **1** | **1** | **1** | Not necessary |
| Being hit with a cue | Minor injuries, typically. Could have minor damage to the eye if the cue hits the eye. | User, anyone in the near vicinity | **2** | **1** | **2** | **Ensure no members of the society are being reckless when handling a cue. Tutorials of how to use a snooker cue will be given to those unfamiliar where possible to avoid misuse and injury.** | **1** | **1** | **1** | Not necessary |
| Hot iron | Burns | User | **2** | **2** | **4** | **Ensure all members with access to the iron are briefed on how to store and handle it it safely. Use of iron tray to place the iron on when hot.** | **1** | **2** | **2** | Not necessary |
| Stanley Knife – Used for replacing tips on cues | Cuts | User | **2** | **2** | **4** | **Ensure no members are being reckless with the use of the knife, and that the blade is always sheathed when not in use.** | **1** | **2** | **2** | Not necessary. |
| Equipment | Drop on toes | User | **1** | **1** | **1** | **Ensure all members carry the equipment suitably.** | **1** | **1** | **1** | Not necessary. |
| Vehicle – Travel to competitions | RTC, injuries, potential death | Members of the public, any members in the vehicle. | **2** | **3-5** | **6-10** | **Ensure the driver is following all road rules perfectly, without any distractions. Ensure all members in the vehicle are wearing their seatbelts correctly.** | **2** | **3** | **6** | Not necessary. |
| Crowds – General Public (Snooker Room) | Skirmishes, fights, tripping over people, impact with other people. | Anyone in the room. | **3** | **1** | **3** | **Those watching must stand sufficiently far away from the snooker tables and must keep noise levels low. (May not apply with COVID-19 restrictions)** | **2** | **1** | **2** | Any person who is disruptive or causes an altercation will be asked to leave the vicinity in order to keep the situation safe. |
| Clothing and Jewellery | Getting caught on equipment, can cause injuries and lacerations | Anyone in the snooker room. | **1** | **1** | **1** | **Ensure all people are not reckless, told not to wear loose fitting jewellery** | **1** | **1** | **1** | Not necessary |
| Existing Medical Conditions | Allergic reactions, asthma attacks, medical issue causing harm to person. | Person with medical condition | **2** | **2-3** | **4-6** | **Ensure any important medical history is collected about members and squad, especially for those traveling to tournaments, as well as collecting information on how to treat the person if medical condition acts up** | **2** | **1-2** | **2-4** | If people know how to treat the medical condition or to avoid causing it to flare up, impact causing by it will be reduced. |
| Heat | Dehydration or Exhaustion | Anyone in the room | **2** | **2** | **4** | **Ensure all players have access to a drink, and to take breaks whenever necessary** | **1** | **2** | **2** | Not necessary |

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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** | |
| 1 | All members will be briefed about proper conduct and the new COVID-19 restrictions that apply in the snooker room, being instructed on how to not cause injury to themselves or those around them, as well as how to minimize the spread of the disease. | Ross Honer – Club President | 18/09/2020 | | 19/09/2020 | All members will have been briefed about proper conduct, meaning any violation of the rules can be acted on appropriately, knowing the member was made aware of the rules and regulations of the snooker room. | |
| 2 | The floor will be taped down with black gaffer tape where necessary to ensure the floor is not likely to be tripped upon by members. | Ryan Horrigan-  Snooker Captain | 27/09/20 | | 28/09/2020 | If the floor is not considered safe, further work will be done to ensure it is safe. | |
| 3 | Any members of the society who will be driving to and from competitions will ensure that they follow road safety properly. | Any drivers | Multiple dates yet to be confirmed – will update when drivers are confirmed, as well as dates for the competitions. | | Multiple dates yet to be confirmed – will update when drivers are confirmed, as well as dates for the competitions. | At the review date, the driver will transport the squad to the competition, where they will adhere to road safety. | |
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| Responsible manager’s signature: | | | | | Responsible manager’s signature: | | |
| Print name: | | | | Date: | 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 |