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| **Risk Assessment** |
| **Risk Assessment for the activity of** | Online Bridge sessions (teaching and competitions) | **Date** | 31/08/20 |
| **Club / Society / Group** | Bridge Club | **Assessor *(Name, Role and position to qualify sign off of document e.g. Coach)*** | Christine Ray, teacher |
| **Committee member (name and role)** | Gabija Poskaite, 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****(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** |  |
| 1. Unsuitable layout of workstation | Repetitive strain injury (RSI), upper limb pain and discomfort, bad working posture, visual problems | Members of the club | **5** | **2** | **10** | Add resources for correct workstation set-up. e.g. areas that should be assessed include display screen, keyboard, work chair, lighting. Workstations should be arranged to avoid awkward movements, reflections, aches and pains. Seek more guidance: Working with display screen equipment (DSE): A brief guide Leaflet INDG36(rev4) HSE books 2013 [www.hse.gov.uk/pubns/indg36.htm](http://www.hse.gov.uk/pubns/indg36.htm) | **2** | **2** | **4** |  |
| 2. Prolonged view to the screen - inadequate breaks | Eye strain, eye fatigue and headache | Members of the club | **5** | **1** | **5** | Where display screen equipment (DSE) is used for activity longer than 1hr, make sure to encourage/plan short breaks to rest eyes (e.g. tea break, 20-20-20 rule break, dummy break). Assort bridge hands, so that declarer rotates for the teaching sessions. For competitions – agree with short breaks with the opposition/organizers. | **3** | **1** | **3** |  |
| 3. Swinging on the chair | Falling off the chair could result in an injury | Members of the club | **3** | **2** | **6** | If noticed on the call that someone is swinging on the chair, address it privately. Encourage keeping the area around the sitting area out of objects which could cause injuries. | **1** | **2** | **2** |  |

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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 | Prepare resources for correct workstation set-up and signpost them on the Microsoft Teams | President / Welfare officer | 28/09/20 |  |  |
| Responsible manager’s signature:  | Responsible manager’s signature: |
| Print name: Gabija Poskaite | Date: 31/08/2020 | 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 |