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| **Risk Assessment** | | | | |
| **Risk Assessment for the activity of** | **APNA 2022** | | **Date** | **16/2/22** |
| **Unit/Faculty/Directorate** | **India Society** | **Assessor** | **Rudraansh Kotra** | |
| **Line Manager/Supervisor** | ***Hiran Kannan*** | **Signed off** | ***Hiran Kannan*** | |

| ***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** |
| COVID-19 | Touch points and surface cleaning | . committee members  .susu staff .students at the event | **3** | **3** | **9** | Sanitise and wipe any surfaces to minimise the risk infection transmission | **2** | **3** | **6** | We shall regularly check the government guidelines and act accordingly if there are any chances made. |
| COVID-19 | Increase in case numbers | . committee members  .susu staff .students at the event | **3** | **3** | **9** | When planning large number events on campus and outside we will make sure members have their proof of vaccinations. We will encourage students to continue their testing, anyone tested positive we shall request them to stay away and isolate | **2** | **3** | **6** |  |
| COVID-19 | Face masks + hand sanitation | . committee members  .susu staff .students at the event | **3** | **3** | **9** | Whilst the government rules say it is not mandatory to wear face masks, if our members want to, we will allow it at APNA. The students themselves will be responsible to bring their own facemasks and hand sanitisers. We plan to have sanitisers at our event venues where possible so the individuals can use it. | **2** | **3** | **6** |  |
| Alcohol intoxication & substance abuse | Nausea, vomiting, hallucination etc | The student who has consumed the substance and potentially those around them | **2** | **4** | **8** | Whilst we India Soc do not tolerate substance abuse at any of our events, this point is mainly targeted at large gathering events like our club nights. We will isolate the individual, make sure they are being looked after, away from crowd & monitor their conditions. If they are in a worsening state, we will appropriately call 999 for emergency. | **2** | **3** | **6** |  |
| Road traffic accident/ Walking between places. | Vehicle’s collision -causing serious injury | Event organisers, event attendees, Members of the public | **4** | **3** | **12** | * People will be made aware of venues for the event,   We will make it clear that each attender to the venue is at their **own responsibility**.   * We society members will be available to direct people between venues. | **2** | **2** | **4** | * Venues for APNA are all at local vicinity to one another. * All incidents are to be reported on the as soon as possible ensuring the duty manager/health and safety officer have been informed.   Follow [SUSU incident report policy](https://www.susu.org/groups/admin/howto/protectionaccident) |
| Allergies | Allergic reactions to food and drink. | Event organisers, event attendees. | **2** | **5** | **10** | * Attendees responsible for own welfare in such instances. | **1** | **5** | **5** | Call Emergency Services/alert bar staff. |
| Slips, trips and falls | Injuries from falling, bruises, fractures | * Event organisers   Attendees |  |  |  | * Floors to be kept clear and dry. Visual checks to be maintained throughout the event.   Committee to report any trip hazards to facilities teams/venue staff asap. |  |  |  | * Seek medical attention) from venue staff or emergency services (999) if in need.   All incidents are to be reported on the as soon as possible ensuring the duty manager/health and safety officer have been informed. Follow [SUSU incident report policy](https://www.susu.org/groups/admin/howto/protectionaccident) |

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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** | |
|  | As far as COVID is concerned, we will give the freedom and space for our committee members if they want to wear masks, or be socially distanced at our events. We will provide hand sanitisers. We will encourage students to Wear face coverings when moving around inside buildings or in crowded spaces. We will also tell them to practise good personal and hand hygiene skills. We will encourage them to get regularly tested for covid. If they haven’t yet had their vaccine jabs, we will encourage them to think about it and have it if they want to come to our large gathering events |  |  | |  |  | |
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| Responsible manager’s signature: Rudraansh Kotra | | | | | Responsible manager’s signature: Hiran Kannan | | |
| Print name: Rudraansh Kotra | | | | Date: 16/2/22 | Print name: Hiran Kannan | | Date 16/2/22 |

**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 |