| **Risk Assessment** | | | | |
| --- | --- | --- | --- | --- |
| **Risk Assessment for the activity of** | **Weekly documentary screening** | | **Date** | **17/10/22** |
| **Club or Society** | **Wildlife Society** |  |  | |
| **Name of Committee member completing form** | ***Kira Newbon*** | **Signed off** | ***Beany Ashley-Norman*** | |

| ***PART A*** | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **(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** |
| Obstructions | Slips, trips and falls;  Risk of Minor Injuries: Grazes, cuts and bruising.  Major injury: Fractures | Students, committee members | **3** | **2** | **6** | **Most likely at the beginning or end of the event. Students will be advised not to enter/leave the room all at once. Number of attendees will be limited so rooms are not overcrowded. At least 2 committee members will attend to oversee the event and ensure everyone’s safety.** | **1** | **2** | **4** | In the case of an emergency, contact 111 or 999.  Report any incidents to SUSU. |
| Food allergies | Risk of allergic reaction to ingredients in food. | Attendees, students, staff | **3** | **4** | **12** | **If any food is served students will be advised of any allergens and provided with the ingredients. Hand sanitiser provided.** | **1** | **4** | **4** | In the case of an emergency, contact 111 or 999.  Report any incidents to SUSU. |
| Flashing lights | Seizures, leading to injury | Students or committee with photosensitive epilepsy | **3** | **4** | **12** | **Inform students if there are flashing lights in the documentary to be shown before the event starts online and in person.** | **1** | **4** | **4** | Committee members trained in basic first aid.  In the case of an emergency, contact 111 or 999.  Report any incidents to SUSU. |
| Fire | Panic leading to injury, minor to major burns, death | Students or committee | **1** | **5** | **5** | **Ensure fire exits are not blocked. Check for fire extinguishers. Do not use damaged electrical equipment.** | **1** | **2** | **2** | In the case of an emergency, contact 111 or 999.  Report any incidents to SUSU. |
| Close contact with others, food consumption | Transmission of COVID-19 | Students or committee | **2** | **3** | **6** | **Advise students/committee not to attend if they have symptoms of COVID-19.** | **1** | **3** | **3** |  |
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| ***PART B – Action Plan*** | | | | | | | |
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| **Risk Assessment Action Plan** | | | | | | | |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | | **Review date** | **Outcome at review date** | |
| 1 | Advise students of risk of allergic reactions and possibility of flashing lights prior to event starting. | committee attending |  | |  |  | |
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|  |  |  |  | |  |  | |
| Responsible committee member signature: Kira Newbon | | | | | Responsible committee member signature: | | |
| Print name: Kira Newbon | | | | Date:17/10/22 | Print name: Beanie Ashley-Norman | | Date 17/10/22 |

**Assessment Guidance**

| 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 |

| **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** | | | | |

| 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. |



| 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 |