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| **Risk Assessment** |
| **Risk Assessment for the activity of** | **(University of Southampton Islamic Society) Escape room Risk assessment** | **Date** | **3/02/2023** |
| **Unit/Faculty/Directorate** | **SUSU [University of Southampton Islamic Society]** | **Assessor** | **Areesha Hassan** |
| **Line Manager/Supervisor** | ***Ibrahim Ishaq Yahaya*** | **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** |
| Slips and trips  | Twisted joints and bruises | Adults attending event | **3** | **3** | **9** | Areas are well lit and the event is supervised by staff Rooms are monitored audibly and visually from a control room.Report any trip hazards to facilities teams/venue staff asap. If cannot be removed mark off with hazard signs  | **1** | **3** | **3** | * Seek medical attention from venue staff if in need
* Contact emergency services if needed

All incidents are to be reported on the as soon as possible. |
| Being locked in the room and unable to get out after the session is completed  | Stress and panic  | Adults attending event. | **1** | **2** | **2** | Entrance and exit doors remain unlocked during the games. Internal room also have buttons inside to allow the door to be unlocked so adults can leave anytime they wish. | **1** | **2** | **2** | * Seek medical attention from venue staff if in need
* Contact emergency services if needed

All incidents are to be reported on the as soon as possible. |
| Insufficient Fire Safety awareness | If a fire alarm is triggered, people may not know where to go- Crushing, falls, burns and smoke inhalation arising from induced panic, reduced space in buildings and external walkways, obstructed fire exits, build-up of flammable materials i.e. waste cardboard/boxes. | Members | **2** | **5** | **10** | * ensure that members know where the nearest fire exist are and the meeting place is outside, should it be needed

Build-up of rubbish is to be kept to a minimum. Excess build up is to be removed promptly and deposited in the designated areas. | **1** | **5** | **5** | * All incidents are to be reported as soon as possible ensuring the duty manager/health and safety officer have been informed.
* Call emergency services and University Security:
* Emergency contact number for Campus Security:
* Tel: +44 (0)23 8059 3311

(Ext:3311). |
| Medical emergency  | Members may sustain injury /become unwell pre-existing medical conditions Sickness Distress | Members | **3** | **5** | **15** | * Advise participants; to bring their personal medication
* Contact emergency services as required 111/999

Reception/Venue staff for first aid support | **2** | **5** | **10** | * 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) |
| Inadequate space- overcrowding, not inclusive to all members | Physical injury, distress, exclusion  | Event organisers and attendees | 1 | 3 | 3 | * Ensure space meets needs of members e.g. considering location & accessibility of space
* Committee to consult members on needs and make reasonable adjustments where possible
 | 1 | 3 | 3 | * Seek medical attention if problem arises

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| Manual handling  | Players risk injuries or back pain from handling heavy objects. | Adults attending the event  | **2** | **3** | **6** | Players are advised during briefing that they should NOT move or lift any heavy objects, nor force anything.  Staff monitor the game via CCTV and warn players about possible health & safety risks. Heavy items bolted to the floor or marked appropriately to discourage players from lifting/ moving them.  All objects relevant to the game are easy to move/lift | **1** | **3** | **3** | * Seek medical attention if problem arises
* Incidents are to be reported on the as soon as possible ensuring the venue staff have been informed.
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| Lighting | Players could suffer injuries, visual discomfort or seizures triggered by flashing lights in some of the escape units | Adults attending the event | **1** | **3** | **3** | Committee to consult members on needs and make reasonable adjustments where possible  | **1** | **3** | **3** | * Seek medical attention if problem arises
* Incidents are to be reported on the as soon as possible ensuring the venue staff have been informed.
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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 | Ensure all control measures are implemented | Areesha Hassan | 03/03/2023 | 03/03/2023 | Minimise all risk to the bare minimum |
| 2 | Committee to read and share SUSU Expect Respect Policy  | Relevant committee members – president to ensure complete. | done | done | Follow guidelines. |
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| Responsible manager’s signature:  | Responsible manager’s signature: Ibrahim |
| Print name: Areesha Hassan  | Date: 03/03/2023 | Print name: Ibrahim Ishaq Yahaya | Date 03/03/2023 |

**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 |

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