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| **Risk Assessment** | | | | |
| **Risk Assessment for the activity of** | **University of Southampton Paediatric Society Risk Assessment**  *Planning meetings, Social, Fundraising, Demonstrations, Awareness Stall/stand* | | **Date**  12/12/22 | **Last review date** |
| **Unit/Faculty/Directorate** | **University of Southampton Paediatric Society** | **Assessor** | **Committee Member completing review** | |
| **Line Manager/Supervisor** | *Alistair Bevan* | **Signed off** | ***VP Activities/Sport or Activities Coordinator*** | |

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| ***PART A*** | | | | | | | | | | |
| **(1) Risk identification** | | | **(2) Risk assessment** | | | | **(3) Risk management** | | | |
| **Hazard** | **Potential Consequences** | **Who might be harmed** | **Inherent** | | |  | **Residual** | | | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** | **Control measures (use the risk hierarchy)** | **Likelihood** | **Impact** | **Score** |  | |
| **Meetings & Socials** | | | | | | | | | | |
| Activities involving electrical equipment e.g. laptops/ computers | Risk of eye strain, injury, electric shock | Event organisers and attendees | 2 | 4 | 8 | * Ensure regular breaks (ideally every 20mins) when using screens * Ensure screen is set up to avoid glare, is at eye height where possible * Ensure no liquids are placed near electrical equipment * Ensure all leads are secured with cable ties/mats etc | 1 | 4 | 4 | * Request support and advice from SUSU IT/Tech teams e.g. via activities team * For external venues pre-check equipment and last PAT testing dates * Seek medical attention as required | |
| Socials/Meetings- 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 * Members/Committee to carry out first aid if necessary and only if qualified and confident to do so * Contact emergency services as required 111/999 * Contact SUSU Reception/Venue staff for first aid support | **2** | **5** | **15** | * 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) | |
| Handling & Storing Money- Charity fundraiser | * Theft * Individuals being mugged/robbed   Loss/misplacement leading to financial loss | Members, Participants, Charity | 3 | 4 | 12 | Southampton RAG procedures will be followed:   * Charity Event form completed, and RAG approval will be given * All food hygiene certificates and event risk assessment to be approved by activities team * Sealed collection buckets with charity banner to be requested and collected from SUSU activities/RAG office at an agreed time (office hours, Mon-Fri 9-5) * Agree time for return of funds and buckets to activities team who will deposit funds and make payment to the charity. * Collection buckets to remain sealed and to not be left unattended * Collectors will prioritise own safety, advised to not confront any potential thief. If confronted will give up the funds. * Nominated person will be tasked with storing cash in nominated location when SUSU office not open. * Avoid giving cash to committee member if they will be travelling by foot alone (request taxis where possible/travel by car. Ensure cash is not visible/advertised when out in public) | 2 | 3 | 6 | In the event of theft committee members will:   * Highlight the incident to any community police officers in the area/report to 111 * Report to SUSU Duty manager and [Complete a SUSU incident report](https://www.susu.org/groups/admin/howto/protectionaccident) | |
| Overcrowding at Stall | Reduced space in walkways and entrances.  Risk of Students panicking because of tight spaces / confinement. Crushing against fixed structures from pushing and shoving. Aggressive behaviour. | Members, visitors | **2** | **3** | **6** | * A maximum of 3 representatives to be at the stall at any one time * Request that orderly ques are formed * Ensure all items are stored under tables and monitor area in front of stall to ensure this is clear * Ensure that organisers /volunteers do not block walkways when engaging with attendees * Follow instructions given by support staff/staff on directions and entry and exit points   Do not move tables if this has been placed for you by staff. | **1** | **3** | **3** | * Seek medical attention if problem arises * Seek support from facilities staff | |
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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 | Individual risk assessments for individual events with higher risk levels and anything not covered by generic assessment. This includes:   * Activities involving electrical equipment e.g. laptops/ computers * Socials/Meetings- Medical emergency * Handling & Storing Money- Charity fundraiser * Overcrowding at Stall (bunfight) | Relevant committee members – president to ensure complete. | 09/2023 | | 09/2023 |  | |
| 2 | Committee to read and share SUSU Expect Respect Policy | Relevant committee members – president to ensure complete. | 09/2023 | | 09/2023 |  | |
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| Responsible manager’s signature: | | | | | Responsible manager’s signature: | | |
| Print name: Alistair Bevan | | | | Date: 12/12/2022 | Print name: Victoria Wong | | Date:  13/12/2022 |

**Assessment Guidance**

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| * Eliminate | | | | | Remove the hazard wherever possible which negates the need for further controls | | | | If this is not possible then explain why |  |
| * Substitute | | | | | Replace the hazard with one less hazardous | | | | If not possible then explain why |
| * Physical controls | | | | | Examples: enclosure, fume cupboard, glove box | | | | Likely to still require admin controls as well |
| * Admin controls | | | | | Examples: training, supervision, signage | | | |  |
| * 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** | | | | | |

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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. |

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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 |