Risk Assessment Template

Risk Matrix and Rating Guidance:

The assessor shall assign values for the hazard severity **(a)** and likelihood of occurrence **(b)** (taking into account the frequency and duration of exposure) on a scale of 1 to 5, then multiply them together to give the rating band:

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| Hazard Severity (a) | Likelihood of Occurrence (b) |
|
| 1 – Trivial (e.g. discomfort, slight bruising, self-help recovery)**2 – Minor** (e.g. small cut, abrasion, basic first aid need)**3 – Moderate** (e.g. strain, sprain, incapacitation > 3 days)**4 – Serious** (e.g. fracture, hospitalisation >24 hrs, incapacitation >4 weeks)**5 – Fatal** (single or multiple) | **1 – Remote** (almost never)**2 – Unlikely** (occurs rarely)**3 – Possible** (could occur, but uncommon)**4 – Likely** (recurrent but not frequent)**5 – Very likely** (occurs frequently) |

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| **Risk Assessment Matrix** |  | **Risk Rating Bands (A x B)** |
| **(B)🡳 (A)🡲** | **Trivial** | **Minor** | **Moderate** | **Serious** | **Fatal** |  | **LOW RISK****(1 – 8)** | **MEDIUM RISK****(9 - 12)** | **HIGH RISK****(15 - 25)** |
| **Remote** | **1** | **2** | **3** | **4** | **5** |  |  |  |  |
| **Unlikely** | **2** | **4** | **6** | **8** | **10** |  | Continue, but review periodically to ensure controls remain effective | Continue, but implement additional reasonably practicable controls where possible and monitor regularly | **STOP THE ACTIVITY**Identify new controls. Activity must not proceed until risks are reduced to a low or medium level |
| **Possible** | **3** | **6** | **9** | **12** | **15** |  |
| **Likely** | **4** | **8** | **12** | **16** | **20** |  |
| **Very likely** | **5** | **10** | **15** | **20** | **25** |  |

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| Risk Assessment Record |
| Risk Assessment Title: Cleaning of group owned and shared equipment during COVID-19 | Date Produced: 16th Sept 2020 | Review Date: 30 October 2020 |
| Overview/Description of Activity: Measures to be put in place to ensure safe cleaning process for group equipment | Duration/Frequency of Activity:1 hour, daily  |
| Location of Activity:Campus venues: Sports Training Village, The Edge External venues used by our groups  | Generic or Specific Assessment: Generic – to be tailored by owner and read in conjunction with existing task risk assessments |

| # | Hazard(s) identified | Who might be affectedand how | Existing controls & measures | Severity (a) | Likelihood (b) | Risk Rating (a x b) | Additional control/action required |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | Airborne transmission of COVID-19 virus by office occupants | Any person in the area where the cleaning is taking place. | * Maximum occupancy level defined by Estates’ ventilation assessment
* If 2m separation not practical,
	+ Students must apply face coverings during the cleaning process.
 | 5 | 2 | 10 | * Students must confirm with venue staff of the most appropriate location to clean the equipment.
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| 2 | Surface transmission of COVID-19 virus | Any person using the equipment and cleaning it. | * Individuals to wash hands at nearest washroom before and after a session or use personal hand sanitiser.
* Student groups must only use the cleaning product supplied by the University to clean the equipment.
* Cleaning items must be used in accordance with directions given on the product.
* Student groups to produce a Normal Operating Procedure (NOP) that demonstrates how equipment will be cleaned appropriately and how items that cannot be cleaned will be kept secure for 72 hours..
* Student groups to check and monitor National Goverming Body (NGB) cleaning processes and apply.
* (*insert NGB*) states that (insert equipment) must be cleaned at (insert minutes/hours) intervals during training sessions/matches
* Equipment must be cleaned after every session.
* Equipment that cannot be cleaned must be left for 72 hours in a secure location before it is used again.
* Groups to following addional cleaning procedures as stated by venues they are using.
 | 5 | 2 | 10 | * SU to provide student groups with cleaning products.
* SU to stock an adequate amount of cleaning items for replenishment.
* Student groups informed of how cleaning product can be replenished.
* SU to provide an NOP template allowing groups to insert specific details related to their equipment and how to clean it.
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| Assessor signature: | Print name: | **Date:** |

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| Risk Assessment Action Plan |
| Hazard No.  | Action to be taken | By whom | Target date | Review date | Outcome at review date |
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| Responsible manager’s signature:Print name:Date: | Responsible manager’s signature:Print name:Date |

Risk Assessment Sign-On Sheet

**Sign on Sheet to acknowledge understanding of Risk Assessment:**

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| **Names and Signatures of other workers/researchers/PG/UG students***All others undertaking the process described must signify that they understand the hazards and risks.* |
| Print name: | Signature: | Date: |
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