

|  |
| --- |
| **MANAGEMENT RISK ASSESSMENT** |
| **Department pavilion/ CJ SUMMER CAMP** | **Area/Task: environment between sessions**  | **Assessor/s: Sapphire**  | **Date: 27/07/2022** | **RA Ref No:**  |

|  |
| --- |
| **ASSOCIATED RISK ASSESSMENT (RA) DOCUMENTATION** |
| **Manual Handling RA Ref:** | **COSHH RA Ref:** | **DSE RA Ref:** | **Lone Working RA Ref:** | **Young Person RA Ref:** | **Fire Risk Assessment Ref:** |

|  |
| --- |
| Hazard Identification and Initial Risk Level ClassificationWithin the department, review the work area or tasks that are undertaken. Consider the **significan**t hazards in the work area or within the task or job. Observe all of the work area or how the task is undertaken. When conducting this assessment, ensure you consult personnel who work in the area or who are involved in or may be involved in the task. Allocate a risk rating and consider if the risks are adequately controlled. |

|  |
| --- |
| **IDENTIFY THE HAZARDS** |
| **1** | Slips & Trips | **✔** | **6** | Storage, space & obstructions | **✔** | **11** | Use of vehicles & buggies/driving at work |  | **16** | Fire hazards |  | **21** | Food preparation/ allergens |  | List any specific Hazards: |
| **2** | Storage at heightFalling objects |  | **7** | Use of electrical equipment |  | **12** | Working outdoors/ extremes of weather |  | **17** | Flammable materials |  | **22** | Extremes of temperature |  | **26** | children disappear during a walk between activity areas or sessions.  | **✔** |
| **3** | Inappropriate housekeeping | **✔** | **8** | Use of portable tools |  | **13** | Working at height |  | **18** | Work in confined spaces |  | **23** | Lone working |  | **27** |  |  |
| **4** | Manual handling tasks/activities |  | **9** | Fixed work equipment |  | **14** | Noise & Vibration |  | **19** | Work with hazardous substances |  | **24** | Out of hours/night working |  | **28** |  |  |
| **5** | Display screen equipment |  | **10** | Lighting levels – internal/external |  | **15** | Naked flames |  | **20** | Condition of the building/structure | **✔** | **25** | Violence or verbal abuse to staff | **✔** | **29** |  |  |

|  |
| --- |
| **EVALUATE THE RISK CONTROLS** |
| **Hazard No** | **Hazard Description** | Who could be harmed? | **Existing Control Measures** | **Is the risk adequately controlled?** | **Further action to reduce the risk** |
| **Risk****H/M/L** | **YES** | **NO** |
| 1 | slips, trips and falls  | everyone | Activities area to be kept tidy and free from obstructions, all camp lead first aid trained, first aid kits available at all times. The walkways in the building are maintained by housekeeping and maintenance throughout the day. | **M** | Y |  | children to be made aware of rules and behaviour expectations, all parents and carers to be made aware of behaviour policy and procedures. staff to ensure the walkways and activities areas are clean and clear and appropriate for use. |
| 3 | Inappropriate housekeeping | everyone | First aid kit always available, activities team to clear obstructions and tidy any mess during, before and after each activity. general housekeeping to be done every morning and evening. The walkways in the building are maintained by housekeeping and maintenance throughout the day. | **L** | Y |  | staff to bring storage for equipment if outside, all equipment to be stored safely and appropriately when not in use, staff to ensure the activity area is always appropriate for designated activity. staff to ensure the walkways and activities areas are clean and clear and appropriate for use. |
| 6 | storage, space and obstruction  | everyone  | all equipment to be stored safely and away from activities areas, all obstructions to be removed, all walkways and activities areas clear of storage. he walkways in the building are maintained by housekeeping and maintenance throughout the day. | **L** | Y |  | daily checks on storage and walkways and checks before use on the adventure playground. staff to ensure the walkways and activities areas are clean and clear and appropriate for use. |
| 20 | condition / structure of building  | everyone  | all staff check the area the activity is in eg, woodie, adventure playground,walkway etc. is appropriate and safe for the designated activity and that the building or structure is safe and undamaged. If structure eg. If the adventure playground is damaged, alternative activity must be provided. staff to phone maintenance / housekeeping if needed, and to keep all walkways appropriate for use.  | **L** | Y |  | staff to do daily checks of these areas and report any damages to the team, managers and maintenance.  |

|  |
| --- |
| **EVALUATE THE RISK CONTROLS** |
| **Hazard No** | **Hazard Description** | Who could be harmed? | **Existing Control Measures** | **Is the risk adequately controlled?** | **Further action to reduce the risk** |
| **Risk****H/M/L** | **YES** | **NO** |
| 25 | Violence or verbal abuse to staff | staff  | all camp staff to be aware of behaviour policy and procedures, all staff to be aware of who management are in case of an incident, camp lead aware of incident reporting procedures, all parents informed of behaviour policy and procedure  | **L** | Y |  | A manager can escalate if a child/parent is unresponsive, violent, aggressive or abusive. |
| 26 | children disappear during a walk between activity areas or sessions.  | everyone | all activities / pavilion staff to be aware of wrist band procedures to identify where children are meant to be and what group they are meant to be with, all appropriate staff to have radios at all times, all managers aware of lost/missing child policies and procedures (see pick up/drop off risk assessment for lost/missing children) parents phone numbers are always available in the event of a missing child. | **L** | Y |  | managers to escalate if needed, safeguarding officers to be called, or duty managers and senior managers on site.  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |
| --- |
| **Risk Matrix** – calculate the level of risk (High/Medium/Low), using the likelihood and severity risk matrix |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |
| --- | --- |
|  | **SEVERITY** |
|  |  | **Nil** **1** | **Minor****2** | **3-day****3** | **Major****4** | **Fatal****5** |
| **LIKELIHOOD**  | **Very likely – 5** | **5** | **10** | **15** | **20** | **25** |
| **Probably - 4** | **4** | **8** | **12** | **16** | **20** |
| **Possible – 3** | **3** | **6** | **9** | **12** | **15** |
| **Remote – 2** | **2** | **4** | **6** | **8** | **10** |
| **Improbable – 1** | **1** | **2** | **3** | **4** | **5** |

 |

|  |  |
| --- | --- |
| **LEVEL OF RISK** |  **ACTION AND TIMESCALE**  |
| **High** | You should not start work until the risk has been reduced. You may have to set aside considerable resources to reduce the risk. If the risk involves work in progress, you should take urgent action. If it is not possible to reduce the risk even with unlimited resources, you must stop all work. |
| **Medium** | You must try to reduce the risk, but should carefully measure the cost of prevention. You should use measures to reduce the risk within a defined time period. If the medium risk is associated with extremely harmful consequences, you may need to carry out another assessment to identify more precisely the likelihood of harm. This will help you decide whether you need to use improved control measures. |
| **Low** | You don’t need to take action at this time. Monitoring is necessary to make sure that the controls are still effective and being used by those involved. |

 |

|  |
| --- |
| **RISK ASSESSMENT ACTION PLAN** |
| **Following the completion of the Management Risk Assessment, the points detailed have been identified as requiring action by the person/s detailed below** |
| **Hazard No** | Action Plan Point | Action to be completed by: | Target Date | Completion Date | Comments |
| **1** | staff to check equipment daily to ensure it is safe and fit for use, children to be made aware of rules and behaviour expectations, all parents and carers to be made aware of behaviour policy and procedures. | all activities staff  | daily | daily  |  |
| **3** | staff to bring storage for equipment if outside, all equipment to be stored safely and appropriately when not in use, staff to ensure activity area is always appropriate for designated activity | all activities staff  | daily  | daily  |  |
| **6** | daily checks on storage and walkways and checks before use on the adventure playground. | all activities staff  | daily  | daily  |  |
| **20** | staff to do daily checks of these areas and report any damages to the team, managers and maintenance. | all activities staff  | daily  | daily  |  |
| **25** | A manager can escalate if a child/parent is unresponsive, violent, aggressive or abusive. | all activities staff  | daily  | daily  |  |
| **26** | managers to escalate if needed, safeguarding officers to be called, or duty managers and senior managers on site. | all activities staff  | daily | daily |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| **SPECIFIC RISK ASSESSMENTS** |
| **The Management Risk Assessment has identified the need for the following specific risk assessments to be completed** |
|  | **YES** | **NO** | Responsibility | Target Date | Completion Date | Specific risk assessment reference number |
| **Fire risk assessment** |  | **✔** |  |  |  |  |
| **Manual handling risk assessment** |  | **✔** |  |  |  |  |
| **Display screen equipment** |  | **✔** |  |  |  |  |
| **Lone working** |  | **✔** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

|  |
| --- |
| Initial Assessment |
| Signature of Assessor/sName: Sapphire Date: 27/07/22  | Signature of Assessor/sName: Date**:**  | Signature of Head of Department/ManagerName: Date:  |

|  |
| --- |
| **RISK ASSESSMENT DISTRIBUTION** |
| **Senior Manager** | **Head of Department** | **Facilities Manager** | **H&S Champion** | **Employees** | **Contractor/s** |
| Copy to:Tej Walia | Copy to:Georgina Tyson/ Jazz Gallimore-Cox | Copy to: | Copy to: | Copy to:Yas BrownJames Miller Sapphire Gallimore activities assistants  | Copy to: |

|  |
| --- |
| **RISK ASSESSMENT REVIEW** |
| **Review Date** | **Name** | **Signature** | **Review Date** | **Name** | **Signature** |
|  |  |  |  |  |  |