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| **MANAGEMENT RISK ASSESSMENT** |
| **Department pavilion / CJ SUMMER CAMP** | **Area/Task:PICK UP/DROP OFF/TOILET BREAKS** | **Assessor/s: Sapphire**  | **Date: 25/07/2022** | **RA Ref No:**  |

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| **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:** |

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| 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. |

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| **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 not being signed in or out | **✔** |
| **3** | Inappropriate housekeeping  | **✔** | **8** | Use of portable tools |  | **13** | Working at height |  | **18** | Work in confined spaces |  | **23** | Lone working |  | **27** | missing/lost children | **✔** |
| **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** |  |  |

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| **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 & falls  | everyone  | drop off and pick up times to be allotted timings to minimise risk over a prolonged period of time. Activities area and drop off/pick up area to be kept tidy and free from obstructions, all camp lead first aid trained, first aid kits available at all times. building and area around to be maintained appropriately throughout use. | **M** | Y |  | adults to accompany children to and from activities areas, toilets and to observe safety measures during drop off and pick up times. |
| 3 | inappropriate housekeeping  | everyone  | first aid kit always available, activities team to clear obstructions and tidy any mess during, before and after each activity and keep all walkways clear at all times. general housekeeping to be done every morning and evening. housekeepers clean toilet areas throughout the day. | **L** | Y |  |  all equipment to be stored safely and appropriately when not in use, staff to ensure the activity area is always appropriate for designated activity and drop off / pick up spaces are kept clean and tidy at all times. all activities staff to be checking toilet areas after use to ensure appropriate for use and to inform housekeeping or maintenance if it is not.  |
| 6 | storage, space & obstructions  | 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. staff to ensure the area is appropriate for pick up and drop off. | **L** | Y |  | daily checks on storage and walkways and checks on drop off/ pick up areas before and after use. staff to check toilet areas after use to ensure appropriate use. |
| 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. |

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| **Risk****H/M/L** | **YES** | **NO** |
| 26 | children not being signed in or out  | everyone  | all activities staff to have radios, all managers to be able to be contacted via radio at all times, all children should be old enough to know their names so able to check on system parents numbers at reception, if childs not signed out staff to call parents to collect and managers/safeguarding lead will supervise children til collection. | **M** | Y |  | all staff to do regular register checks, all children to be supervised during drop off/ pick up. all staff and parents are aware of pick up/ drop off procedures and policies.  |
| 27 | missing/lost children  | everyone  | all activities staff to have radios, all managers to be able to be contacted via radio at all times, all children should be old enough to know their names so able to check on system parents numbers at reception, if child is missing from another group, staff to contact via radios to all staff, child to be brought to reception to wait with safeguarding lead, if child lost from camp group, staff to radio all staff and managers and parent to be called, safeguarding lead will look for child, if safeguarding lead is unavailable child to be with duty managers or senior managers.  | **H** | Y |  | If a lost child is found, the safeguarding officer will call police and social services after 6 hours of parents no show/ uncontactable.  if child missing and unable to find/contact - safeguarding officer to send out search party and contact police.  |
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| **Risk Matrix** – calculate the level of risk (High/Medium/Low), using the likelihood and severity risk matrix |

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|  | **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** |

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| **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. |

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| **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** | adults to accompany children to and from activities areas, toilets and to observe safety measures during drop off and pick up times. | all activities staff  | daily  | daily  |  |
| **3** |  all equipment to be stored safely and appropriately when not in use, staff to ensure the activity area is always appropriate for designated activity and drop off / pick up spaces are kept clean and tidy at all times. all activities staff to be checking toilet areas after use to ensure appropriate for use and to inform housekeeping or maintenance if it is not.  | all activities staff  | daily | daily  |  |
| **6** | daily checks on storage and walkways and checks on drop off/ pick up areas before and after use. staff to check toilet areas after use to ensure appropriate use. | 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** | all staff to do regular register checks, all children to be supervised during drop off/ pick up. all staff and parents are aware of pick up/ drop off procedures and policies.  | all activities staff  | daily  | daily |  |
| **27** | If a lost child is found, the safeguarding officer will call police and social services after 6 hours of parents no show/ uncontactable.  if child missing and unable to find/contact - safeguarding officer to send out search party and contact police.  | all activities staff  | daily  | daily |  |
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| **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** |  | **✔** |  |  |  |  |
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| Initial Assessment |
| Signature of Assessor/sName: sapphire Date: 25/07/22  | Signature of Assessor/sName: Date**:**  | Signature of Head of Department/ManagerName: Date:  |

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| **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 MillerSapphire GallimoreActivities assistants  | Copy to: |

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