

University of Lincoln Students' Union

Annual Risk Assessment for Activities

Activity Details	
Activity Name	Competitive and Social Swimming
Date Of risk Assessment Completion	14-05-2018
Risk Assessment Review Date	14-05-2019
Ongoing Assessment	
<p>The Risk Assessment process <u>must</u> be 'on-going' and 'dynamic'.</p> <p>In other words, professional judgements and decisions regarding safety will need to be made <u>during</u> the activity. If the control measures aren't sufficient, the activity must not proceed.</p> <p>All personnel involved with the running of the activity must receive very clear guidance and instructions for the management of the activity and be very clear about their own roles and responsibilities for each aspect of the event and carry these out under the guidance given.</p> <p>The whole team must be told that under no circumstances are they to admit liability in case of any accidents; all incidents or questions involving insurance must be referred to Lincolns Students' Union as soon as possible, no later than the working next day.</p>	

What is an Annual Risk Assessment?

An Annual Risk Assessment is a risk assessment done once a year that covers all regular society or sport activity during that year period. It is designed to cover the regular activities that your society or sport undertakes (E.g. Meetings, Training, Competitions, and Trips in the UK). Larger-scale events and activities will need to be risk assessed separately and in more detail depending on the type of event (E.g. Trips abroad or to high risk sites, Guest Speakers).

How to fill out the Annual Risk Assessment

Like the normal Risk Assessment, the Annual Risk Assessment has the same sections requiring the same inputs. However the main difference of this assessment is that the hazards should be more general. It is there to cover all general activity that you undertake as a society.

We have produced a template Annual Risk Assessment for you to use, this contains a wide selection of hazards that the majority of societies will encounter through the year. If your society does more activities with additional hazards, or the hazards are slightly different to the ones listed, you must **add these or make the necessary changes**.

Risk Rating Guide

Below is a simple guide to help risk assessors determine the risk rating of each hazard identified.

A Risk Assessment should be 'Suitable and Sufficient'. That is to say:

- ◆ It should identify the risks arising in connection with the activity.
- ◆ The level of detail included should be proportionate to the risk.
- ◆ It must consider all those who might be affected i.e. staff, students, etc.
- ◆ It should be appropriate to the activity and should identify the period of time for which it is to remain valid.

3 x 3 Risk Matrix

L I K E L I H O O D	Likely	Medium Risk	High Risk	Extreme Risk
	Unlikely	Low Risk	Medium Risk	High Risk
	Highly Unlikely	Insignificant Risk	Low Risk	Medium Risk
		Slightly Harmful	Harmful	Extremely Harmful
	CONSEQUENCES			

Risk = Likelihood X Consequences

Likelihood	Score	The consequence	Score
Highly Unlikely	1	Slightly Harmful Bruising, minor cuts, grazes, Strains, Sprains,	1
Unlikely	2	Harmful Loss of consciousness, blood loss, burns, breaks or injury resulting in Visit to A&E. Other non-permanent chemical effects. Corrosive toxic, flammable substances, mild chemical irritation of eyes or skin. Harmful, irritant substances	2
Likely	3	Extremely Harmful Permanent /partial/total disablement or other reportable injury/disease. Single Death or Multiple Death	3

Risk Rating	Action	Risk Score
Insignificant Risk	No further action required unless incidents occur	1
Low Risk	No additional controls may be needed overall, but specific hazards may be reduced. Monitoring is required to ensure controls are maintained. Review if an incident occurs or more effective controls become available.	2
Medium Risk	Efforts should be made to reduce the risk over a defined period of time.	4
High Risk	Work should not be started until the risk has been reduced. If work is in progress Urgent action should be taken to reduce or control risks.	6

Extreme Risk	The activity should cease until risks have been reduced to an acceptable level.	9
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Hazard	What are the risks & potential injuries?	Who is at risk?	Risk Rating	What are the controls and actions? (use numbers)	Residual rating	Who is responsible for the control?
Area of Activity : Pool						
Water	wet drowning, dry drowning, silent drowning terminal apnoea, hyperventilation, post immersion collapse, choking, eye irritation, consumption, induced vomiting, shock, cardiac arrest, hypothermia	All pool users	3	Lifeguard on duty, educated pool users, signage, competency tests and demonstrations, follow the RLSS UK Lifeguard guidelines. Read the pool operating procedure booklet. No prolonged periods of inactivity in the water.	low risk	President, lifeguard on duty and individual responsibility
Swimming exercise	fainting, exhaustion, dehydration, strains, cramps, stitches, asthmatic attack, torn muscles	All pool users	1	Warm up/Warm down, supplied drinks, medication i.e., disclosure of relevant medical conditions, education, formal training set plans	low risk	Own responsibility, set leader
Diving/ Tumble turning	Torn muscles, spinals, concussions, open/closed/complicated fractures, strained muscles, sprains,	All pool users	4	Teaching & education, signage, no shallow diving, lifeguard authority, competency demonstration, controlled sets, diving signals.	medium risk	Own responsibility, lifeguard on duty.
Users	Alcohol, drugs, poor health, elderly, very young, boisterous, weak swimmers, non swimmers, disabled.	All pool users	2	Observation and vigilance, restricted access, education of pool users, demonstrated competency for all swimmers.	medium risk	Own responsibility, lifeguard on duty.
Area of Activity : Pool						
Activity	Ducking, fighting, running, gymnastics, bombing, diving,	All pool users	2	Educated pool users, vigilant lifeguard present, restricted equipment, new risk assessments for specific activities, demonstrated responsibility from all pool users.	medium risk	Own responsibility,

	pushing-in, shouting, flippers, balls, masks, hoops and inflatables					lifeguard on duty.
Session taker/ Lifeguard	Badly positioned, horseplay, chatting, telephone calls, leaving poolside, unqualified, does not know Emergency Action Plan/Normal Operating Procedures.	All pool users	1	Demonstrated competency as a responsible authority figure.	low risk	President, lifeguard/session taker
Physical	slippery floor, abrupt depth change, outlet covers, glare on water, steps, handrails, floating equipment, sharp tiles, poolside equipment.	All pool users	3	Educated pool users, signage, vigilance, comply with safety legislation.	medium risk	Own risk.
Chemical contamination of water	Chemical burn, sickness, vomiting, poisoning, unconsciousness, allergic reactions, skin irritations, poor water clarity, eye irritation, asphyxiation.	All pool users and building visitors.	3	Regular chemical checks, observation of water clarity, education of the normal operating procedure manual. Contact with pool manager.	low risk	Duty Manager, lifeguard on duty
Area of Activity : Pool						
Fire	Burns, scalds, death, smoke inhalation, eye/skin smoke irritation, leading building structure failures	All building users and surrounding areas.	3	Educated Emergency Action Plan for everyone using the facility. Prompt recognition of fire escapes, extinguishers and alarms.	low risk	Duty Manager, lifeguard on duty
Pool Temperature (too hot/too cold)	Dehydration, chest pain, excessive fatigue, vision loss, hypothermia, shock, burns, skin irritation,	All pool users	6	Temperature test, if deemed to high/ too low do not swim (low boundaries is 19oc and below, upper boundaries is 36oc +	1	Duty manager, 1 st person on poolside

	hyperventilation, cardiac arrest, exhaustion, cramps, strains, death					
Chlorine Levels (too high)	Skin irritation, vision problems, chest pain, affixation, inhalation of dangerous fumes, poisoning, breathing problems, vomiting, faintness, dehydration, lack of oxygen, tonsillitis	All pool users	5	Monitor chlorine levels daily (3-4 times) if deemed too high do not swim	1	Duty manager
Deep Water Pressure	Hearing loss, burst eardrum, nausea, sickness, pain, headaches, migraines, ear infections, burst blood vessels, loss of consciousness	All Pool Users	3	Lifeguard and session taker supervision. Educate pool user on dangers of high water pressure	1	Lifeguard/ session taker/ all pool users
Area of Activity : Town						
Intoxication	Vomiting, trips, falls, fractures, fighting, violence, choking, bleeding, concussions, unconsciousness, asphyxiation, unwanted pregnancies, verbal psychological harm, reduced sight, dizziness.	Those intoxicated and those who surround them.	4	Wingman/woman system, look out for your buddy. Responsible drinking and general awareness for others.	medium risk	Each individual for themselves.
Getting lost	Vomiting, trips, falls, fractures, fighting, violence, choking, bleeding, concussions, unconsciousness, asphyxiation, unwanted pregnancies, verbal	Those intoxicated and those who surround them.	4	Wingman/woman system, look out for your buddy. Responsible drinking and general awareness for others.	medium risk	Each individual for themselves.

	psychological harm, reduced sight, dizziness.					
Fighting	Psychological harm, fractures, bleeding, loss of consciousness, asphyxiation, choking, physical harm.	All members	4	Limitation of alcohol, strict warnings from senior members and formal consequences.	2	Senior member, but mainly individual responsibility.
Falling in the Brayford	Drowning, hypothermia, (all those stated in 'water' hazard from above) swan attacks, trapping, sticky mud, plants and weed.	All members	2	Allocate socials to specific venues, limit alcohol assumption, remain away from water edge and within boundaries.	2	Individual responsibility.
Area of Activity : Transport						
Driving	Fatigue, concussion, death, spinal, burns, cuts, bruises, smoke inhalation, collision, shock, cardiac arrest, bleeding.	All members in the vehicle, pedestrians other motor users.	3	Caffeine, co-driver, motorway experience, declared driving license, insured driver, consultation of highway code, prohibited alcohol, consulted medical requirements, no negative influencing medication. Responsible passenger behaviour. Respect for the law.	2	Driver, all vehicle users.
Walking/Biking to swimming including usage of trains.	Collisions, attacks, slips, falls, cuts, bruises, head injuries. Hypothermia, exhaustion. Aggravation.	All pedestrians.	2	Walk in groups, high visibility, appropriate clothing, vigilance, planned route, educated members, highway code knowledge.	2	Committee and individual responsibility.


Area of Activity : Combat Zone (Paintballing)						
Traveling	Whiplash Travel sickness Broken bone Other Injuries Death	Everyone	Low	We use licensed taxi's recommended by the SU. Paintball equipment is put in the boot and members are expected to behave responsibly while traveling so as to not distract the driver. A member of the committee rides in each taxi so as to help avoid or deal with any problems that may occur on the drive.	3	Drivers and Committee members.
Minor injuries	Bruising Scrape Scratches Minor cuts	Everyone	Medium	Bruising is almost unavoidable when playing paintball however all participants are well aware of the expected risks. Other minor injuries are less common however may still occur if a player is to trip or fall. Suitable protective gear is provided by combat zone to avoid and reduce these injuries and a first aid kit is on hand at HQ if it is needed.	3	Combat Zone Staff
Medium injuries	Broken bone Twisted ankle Concussion	Everyone	Medium	Due to the nature of playing paintball in a forest the ground is never flat or completely cleared. Therefore, although unlikely, a player may fall badly and cause a more serious injury to themselves. The ground is normally cleared and obstacle free and participants are aware of the risk before playing. Combat zone staff are equipped to deal with such injuries if they occurred. Ensure all participants are aware of the risk and they are all wearing the appropriate protective equipment.	4	Combat zone staff & Committee members
Major Injuries	Death Loss of sight	Beginners	Medium	All participants are clearly instructed to never take off their mask after leaving the headquarters. They are also instructed to never take an armed paintball gun into the headquarters. Failure to follow these instructions could result in the individual being removed from the playing area, sent home or even banned from the site. Aside from combat zones regulations, as a society we will not tolerate any member breaking these rules as they not only put themselves in danger they may cause threat to others as well.	3	Combat Zone staff Committee Members Participants
Area of Activity : Hospital (Blood Drives)						

Needle Insertion	Slight Scaring, Bleeding, Panic Attack, Fainting, Vomiting, Convulsions	Everyone	Medium	If anyone has a fear of needles/giving blood they will not be allowed to partake in the blood drive. Those who aren't must sign a declaration form stating they are not, alongside other legal declarations. Qualified doctors and nurses are always on sight and are prepared for any eventuality. Should the donor feel any of these symptoms it is their responsibility to inform the nurse/doctor straight away.	Low Risk	Nurses Doctors The Donor
Giving Blood	Panic Attack, Fainting, Vomiting, Convulsions, Dizziness, Agitation, Sweating, Pallor, Cold feeling, Sense of Weakness, Nausea	Everyone	Medium	Qualified doctors and nurses are always on sight and are prepared for any eventuality. Should the donor feel any of these symptoms it is their responsibility to inform the nurse/doctor straight away. From here the nurse/doctor will carry out their own assessments and decide whether to continue with the donation.	Low Risk	Nurses Doctors The Donor
Area of Activity : Team Meals						
Allergic Reactions	Tingling or itching in the mouth. Hives, itching or eczema. Swelling of the lips, face, tongue and throat or other parts of the body. Wheezing, nasal congestion or trouble breathing. Abdominal pain, diarrhoea, nausea or vomiting. Dizziness, light-headedness or fainting.	People with food allergies	Low	All menu choices are prepared in advance, members will be asked of any allergies beforehand and the severity of their allergies in order to take any appropriate actions such as removing items from the menu.	Low Risk	All attendants and the Restaurant Staff
Intoxication	Vomiting, trips, falls, fractures, fighting, violence, choking, bleeding, concussions, unconsciousness, asphyxiation, unwanted pregnancies, verbal	Those intoxicated and those who surround them.	Medium	Wingman/woman system, look out for your buddy. Responsible drinking and general awareness for others.	Low Risk	Each individual

	psychological harm, reduced sight, dizziness.					
Trips, falls, bumps.	Minor cuts and bruises, possible sprained ankles. Worst case scenario, bone fractures/breaks.	Everyone	Low Risk	Look out for other team members, point out hazards such as slippery flooring or	Low Risk	Each Individual, Restaurant Management

Sign Off

The undersigned believe this assessment to cover all significant risks associated with the above activity and accept their responsibilities for ensuring associated controls are in place

Authorisation			
Position	Print Name	Sign	Date
President	Thomas Vaughan	T. Vaughan	14/05/18
Vice-President	Emily Hateley	E. Hateley	14/05/18
Sports Development Assistant	Amber Newton	A. Newton	02/07/2018
Activities Manager	Lorna Cruickshank		7 November 2018

Please detail how this risk assessment will be communicated to all parties who must comply:

Communication			
Who needs to understand this assessment?	How will this be communicated to them?	Person Responsible	Date
Members	Briefing at first session. Copy sent out to all members upon joining the team and for all prospective members trialling for the team.	All Committee	13/05/18