# C:\Users\ennism\Box Sync\LUSU 2016 logo\LUSU 2016 logo\LUSU2016logo.pngGroup Risk Assessment

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| --- | --- |
| Event/Group Details | |
| Group Name |  |
| Date Of Activity |  |
| Risk Assessment Review Date |  |
| Ongoing Assessment | |
| The Risk Assessment process must be ‘on-going’ and ‘dynamic’.  In other words, professional judgements and decisions regarding safety will need to be made during the activity. If the control measures aren’t sufficient, the activity must not proceed.  All personnel involved with the running of the event must receive very clear guidance and instructions for the management of the event and be very clear about their own roles and responsibilities for each aspect of the event and carry these out under the guidance given.  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 LUSU the next day. | |

| Hazard | What are the risks & potential injuries? | Who is at risk? | What are the controls and actions?(use numbers) | Controlled Severity | Controlled Likelihood | Controlled Risk Rating | Who is responsible for the control? |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Area of Activity : Set-up** | | | | | | | |
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| Code of Practice |  | | | | | | |
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| **Area of Activity :** | | | | | | | |
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| Code of Practice |  | | | | | | |

# 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

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| --- | --- | --- | --- |
| Authorisation | | | |
| **Position** | **Print Name** | **Sign** | **Date** |
|  |  |  |  |
|  |  |  |  |

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

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| --- | --- | --- | --- |
| Communication | | | |
| **Who needs to understand this assessment?** | **How will this be communicated to them?** | **Person Responsible** | **Date** |
| Members | Briefing meeting on  **OR**  Code of Practice sent to every member on | President  Safety Officer |  |

# 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.

**Risk = Likelihood X Severity**

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| --- | --- | --- | --- | --- | --- |
| **Likelihood** |  |  | **The Severity** | | |
| Very Unlikely | 0 |  | No Action | No injury | 0 |
| Unlikely | 1 |  | First Aider | Bruising, minor cuts, grazes | 1 |
| Possible | 2 |  | Doctor | Strains, Sprains, concussion | 2 |
| Likely | 3 |  | A & E 1 | 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 | 3 |
| Very Likely | 4 |  | A & E 2 | Permanent /partial/total disablement or other reportable injury/disease | 4 |
| Certain | 5 |  | Death | Single Death or Multiple Death | 5 |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Likelihood** | **Severity** | | | | | |  | **Risk Rating** | **Score** | **Action** |
|  | Death | A&E2 | A&E1 | Nurse Unit | First Aider | No Action |  | Trivial Risk | 0 - 2 | No further action required unless incidents occur |
| **Certain** | 25 | 20 | 15 | 10 | 5 | 0 |  | Low Risk | 3 - 4 | 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. |
| **Very Likely** | 20 | 16 | 12 | 8 | 4 | 0 |  | Moderate Risk | 5 - 10 | Efforts should be made to reduce the risk over a defined period of time. |
| **Likely** | 15 | 12 | 9 | 6 | 3 | 0 |  | High Risk | 12 - 16 | 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. |
| **Possible** | 10 | 8 | 6 | 4 | 2 | 0 |  | Intolerable Risk | 20 - 25 | The activity should cease until risks have been reduced to an acceptable level. |
| **Unlikely** | 5 | 4 | 3 | 2 | 1 | 0 |  |  |  |  |
| **Very Unlikely** | 0 | 0 | 0 | 0 | 0 | 0 |  |  |  |  |