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| **Risk Assessment** |
| **Risk Assessment for the activity of** | **River Plato FC General Risk Assessment** | **Date** | **25/09/2023** |
| **Unit/Faculty/Directorate** | **SUSU (IM)** | **Assessor** | **Sam Miles** |
| **Line Manager/Supervisor** | ***James Turner and Sam Miles*** | **Signed off** | ***sammiles*** |

| ***PART A***  |
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| **(1) Risk identification** | **(2) Risk assessment** | **(3) Risk management** |
| **Hazard** | **Potential Consequences** | **Who might be harmed****(user; those nearby; those in the vicinity; members of the public)** | **Inherent** |  | **Residual** | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** | **Control measures (use the risk hierarchy)** | **Likelihood** | **Impact** | **Score** |
| Weather | SunstrokeHyperthermia or players getting too cold | The players  | **2** | **2** | **2** | **Ensure players are aways well hydrated*** **The club will have spare bottles on stand by**

**Make full use of roll on roll off subs to ensure no one overworks themselves** **Make sure players bring appropriate kit and warming up clothes so they can remain warm during the entire time** | **2** | **2** | **2** | If anyone is affected by the heat or cold, seek immediate medical attention by calling 111 or 999 is serious.All incidents will be reported as soon as possible ensuring duty manager/health and safety officers have been informed. Follow SUSU incident report policy. |
| Alcohol consumption during socials | Members getting too intoxicated* Illness can result from this

Members painting a bad picture of the club and university due to how much they have drank | The publicThe universities reputationThe teams reputation and members | **3** | **3** | **3** | **Ensure we cut players off when they have had enough drink****Make sure the social sec has a planned out and control social planned****Remind members that we represent the club and the university** | **2** | **2** | **2** | Follow SUSU incident report policyCall emergency services as required 111/999 |
| Improper venues for socials | Not having enough room at our socialsMembers showing up to the wrong venues | The venuesMembers of the club | **3** | **3** | **3** | **Properly checking the venues before booking and organising the socials** **Ensure it’s made clear where the socials are – informing the team at matches and on all our social medias**  | **3** | **3** | **3** | Follow guidance on where to hold socials and scout them out before any official plans are made |
| Collisions/impacts between players/equipment | Concussion or other head injuriesBrusing/internal bleedingLigament/bone/muscle damage | Players or spectators | **2** | **4** | **6** | **Making players aware of the potential risks, checking that equipment is up to standard****Ensuring that the correct kit is brought****Keeping spectators from getting too close to the pitch** | **2** | **4** | **6** | Any time a potential head injury or serious collision happens we will hault the play to allow time for a proper assessment. In the unlikely event that there is a serious injury we can seek first aid, call 111 or 999. |
| Items within pockets/ jewellery on body/ improper kit | Potential cuts or bruises | Players | **3** | **2** | **3** | **Checking that players aren’t wearing any unnecessary items of clothing/jewellery****Making sure players wear the correct attire****Checking pockets for any potential hazardous items** | **3** | **1** | **3** | In the event of an injury we can provide plasters for small cuts. If necessary we can seek first aid or call 111/999 |
| Players over stretching/over exerting  | Players may overextend their body to try and reach the ball either for a tackle, to block or to pass/shoot. This may result in a pulled muscle | Players | **3** | **2** | **4** | **Make sure players do a substantial warm up including stretches****Making sure that players know they don’t need to risk injury for the sake of a result** | **3** | **1** | **3** | In the event of a pulled muscle players can be substituted, and will be allowed to rest before returning whenever they feel comfortable to do so |
| Being hit by a ball | Players or spectators may be hit with a ball going at speed, particularly when within a close proximity to the play. This may result in potential nosebleeds or concussions  | Player and Spectators | **4** | **2** | **6** | **Not ridicule players for ducking out of the way of a potential shot****Being sure that spectators keep a reasonable distance from the pitch and in particular the goal** | **4** | **2** | **6** | If a nose bleed does occur, first aid can be provided. In the event of a concussion the relevent medical attention will be provided - I.e, 111/999 can be called in extreme casesPlay will be stopped when necessary, with players being able to leave the pitch wherever they see fit  |
| Promotion of club at events | When hosting a stall it may become overcrowded, potentially leading to harm | Any persons within a close vicinity | **2** | **1** | **2** | **Try to keep a limited number of people within a close proximity** | **1** | **1** | **1** | In the event that injury or harm does occur, relevant medical help will be searched for |
| Wide Lane Pitch | Slippery conditionsUneven surfacesDry/cracked/dusty ground | Players and spectators  | **2** | **3** | **2** | Check the ground before the gamesMake sure players have the proper kit to minimise likelihood of injury In the event that the wide lane facilities aren’t up to scratch request a change of pitch, a later kick off or a rearranged fixture | **2** | **2** | **2** | If we as the players feel the pitches are not in a safe condition postpone the game and or refer to the widelane staff |
| Transport home after socials at night | Players walking home alone which leads to risk of:MuggingMember getting lost Member getting home too lateGeneral dangers of being out alone at night | The members | **2** | **2** | **2** | Keep track of players at all time on socialsIf players are too intoxicated ensure they get in an uber safelyIf members walk home ensure they are in large groups | **2** | **2** | **2** | If we lose track of players ensure they are found as soon as possible and worst case abandon the social to ensure everyone’s safety  |
| Southampton Sports equipment failing | Minor bruising, sprain, fracture, dislocation, concussion | Participants of the sports, spectators and officiators  | **3** | **2** | **3** | If the equipment is unsafe, stop using it immediately  | **3** | **2** | **3** | Use the QR code to report the broken or unsafe equipmentEnsure reception have been informed of this |
| Violent or aggressive behaviour towards  | Injured staff, both physically and mentallyDamaged reputation to the clubs, sports facilities and university | Staff, members and customers  | **3** | **2** | **3** | If serious seek assistance, however generally ensure everyone is treated with respect and controls their behaviour | **2** | **2** | **3** | Make the facility aware if anything escalates by calling security Injuries to be reported to the Southampton Sport Staff ad via the SUSU reporting system. Contact Report and Support Report + Support - University of Southampton |

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| ***PART B – Action Plan*** |
| **Risk Assessment Action Plan** |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | **Review date** | **Outcome at review date** |
|  | Individual risk assessments for specific events - I.e socials – that doesn’t fall under the generic risk assessment | Relevant members of the committee – with captains having to ensure this is complete |  |  |  |
|  | Covered above.  |  |  |  |  |
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| Responsible manager’s signature:James Turner | Responsible manager’s signature:Sam Miles |
| Print name:JAMES TURNER | Date: 25/09/23 | Print name:Sam Miles | Date: 08/10/2023 |

**Assessment Guidance**

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| 1. Eliminate
 | Remove the hazard wherever possible which negates the need for further controls | If this is not possible then explain why |  |
| 1. Substitute
 | Replace the hazard with one less hazardous | If not possible then explain why |
| 1. Physical controls
 | Examples: enclosure, fume cupboard, glove box | Likely to still require admin controls as well |
| 1. Admin controls
 | Examples: training, supervision, signage |  |
| 1. Personal protection
 | Examples: respirators, safety specs, gloves | Last resort as it only protects the individual |

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| **LIKELIHOOD** | 5 | 5 | 10 | 15 | 20 | 25 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 1 | 1 | 2 | 3 | 4 | 5 |
|  | 1 | 2 | 3 | 4 | 5 |
| **IMPACT** |

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| Impact | Health & Safety |
| 1 | Trivial - insignificant | Very minor injuries e.g. slight bruising |
| 2 | Minor | Injuries or illness e.g. small cut or abrasion which require basic first aid treatment even in self-administered.  |
| 3 | Moderate | Injuries or illness e.g. strain or sprain requiring first aid or medical support.  |
| 4 | Major  | Injuries or illness e.g. broken bone requiring medical support >24 hours and time off work >4 weeks. |
| 5 | Severe – extremely significant | Fatality or multiple serious injuries or illness requiring hospital admission or significant time off work.  |

Risk process

1. Identify the impact and likelihood using the tables above.
2. Identify the risk rating by multiplying the Impact by the likelihood using the coloured matrix.
3. If the risk is amber or red – identify control measures to reduce the risk to as low as is reasonably practicable.
4. If the residual risk is green, additional controls are not necessary.
5. If the residual risk is amber the activity can continue but you must identify and implement further controls to reduce the risk to as low as reasonably practicable.
6. If the residual risk is red do not continue with the activity until additional controls have been implemented and the risk is reduced.
7. Control measures should follow the risk hierarchy, where appropriate as per the pyramid above.
8. The cost of implementing control measures can be taken into account but should be proportional to the risk i.e. a control to reduce low risk may not need to be carried out if the cost is high but a control to manage high risk means that even at high cost the control would be necessary.

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| Likelihood |
| 1 | Rare e.g. 1 in 100,000 chance or higher |
| 2 | Unlikely e.g. 1 in 10,000 chance or higher |
| 3 | Possible e.g. 1 in 1,000 chance or higher |
| 4 | Likely e.g. 1 in 100 chance or higher |
| 5 | Very Likely e.g. 1 in 10 chance or higher |