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| **Risk Assessment** |
| **Risk Assessment for the activity of** | **Open rehearsal for brass band** | **Date****19/1/24** | **Last review****n/a** |
| **Unit/Faculty/Directorate** | **SUSU SUBB** | **Assessor** | **Alice Bell** |
| **Line Manager/Supervisor** | ***VP Activities/Sport or Activities Coordinator*** | **Signed off** |  |

| ***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** |  |
| **Open rehearsal** |
| Moving tables/chairs | * Muscle strains and sprain, bruises etc
* Dropping on/hitting others nearby
 | Those moving and those in the vicinity | **4** | **3** | **12** | * **Large/heavy things to be moved by more than 1 person- seek support from SUSU facilities/venue staff as needed**
* **Request tools to support with move of heavy objects- SUSU Facilities/venue. E.g. hand truck, dolly, skates**
* **Making sure people aren’t too close before moving**
* **Making sure anyone with any pre-existing conditions isn’t doing any unnecessary lifting and they are comfortable**
 | **3** | **1** | **3** | Seek Medical attention as needed. E.g. SUSU Reception, Venue, 111, 999All incidents are to be reported on the as soon as possible ensuring the duty manager/health and safety officer have been informed.Follow [SUSU incident report policy](https://www.susu.org/groups/admin/howto/protectionaccident) |
| Dropping or hitting instruments | * Damage to instruments
* Injury to surrounding people
* Damage to space being used
 | Those in the vicinity | **4** | **2** | **8** | * **Make sure everyone is spaced out as much as possible so people can move around as much as possible**
* **Larger instruments/instruments that move a lot (trombones) are given extra space**
* **Instruments to be put in case or safely out of the way when not in use**
* **Nothing to be kept on the floor unless essential**
 |  |  |  | Committee to ensure room booking is adequate with enough space to accommodate larger instruments. Request room changes as needed  |
| Moving/setting up instruments and stands | * Back/muscle strain from lifting items that are too heavy
* Trapping fingers in stands or other items
* Damaging equipment
* Dropping equipment on feet/another person
* Falling moving equipment on stairs
 | Those setting up and members nearby or assisting. | **5** | **4** | **20** | * **Any heavy items lifted by multiple people**
* **Use lifts where possible for heavy items, where not possible extreme caution to be used and additional members should be on hand to assist**
* **Request tools to support with move of heavy objects- SUSU Facilities/venue. E.g. hand truck, dolly, skates**
* **Teach members how to correctly carry equipment and how to safely set up specific items and don’t allow untrained members to assist**
* **Those carrying things be accompanied by someone able to clear a pathway open door**
* Committee to ensure adequate time for set up and pack down is planned for /allocated when bookings are made
 | **2** | **3** | **6** | Committee to ensure tech team recruited/trained to move and set instruments |
| Food | - Those with food allergies having a reaction - Food poisoning - Choking | Those eating | **3** | **5** | **15** | * **Any Home made items to be avoided by those with allergies and should be made by those with appropriate food hygiene training**
* **Only order/buy food at establishments with appropriate food hygiene rating Food to only be provided/eaten when other activities are stopped**
 | **1** | **5** | **5** |  |
| Consistent (intentional) loud noise | * Hearing damage
 | Those regularly in the rehearsal | **5** | **3** | **15** | * **Recommend earphones are used by affected members**
* **Position musicians appropriately so direct exposure is minimised**
* **Mutes/screens utilised if/where appropriate**

**Avoid use of small confined spaces** | **4** | **1** | **4** |  |
| Unfamiliar space – steps and raised flooring | * Trips and falls causing injury.
 | Performers/anyone new to the space | **5** | **3** | **15** | * **All members to be shown the space before starting and steps to be pointed out, with players positioned so they are unlikely to fall**

**If any raised areas/steps are not clearly marked, make venue caretaker aware and mark out where possible** | **2** | **3** | **6** |  |

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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** |
| 1 | Individual risk assessments for individual events with higher risk levels and anything not covered by generic assessment. This includes:-Tours-High risk socials (eg trampolining)-Tech heavy events | Relevant committee members – president to ensure complete. | 30 days prior to event requiring risk assesment |  |  |
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| Responsible manager’s signature: | Responsible manager’s signature: A close-up of a signature  Description automatically generated |
| Print name: Alice Bell | Date: 19/01/24 | Print name: Fiona Sunderland | Date 19/01/24 |

**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 |