

## Risk Assessment Form

This form should be completed with a list of hazards that affect the session, and should be written from a coaching perspective, not a venue management perspective. For each risk assessment there should be associated Emergency Action plan to be used in case a risk occurs.

Venue:		Victoria Park, Haywards Heath			Mid Sussex County Council	
Address: (Include postcode)		South Rd, Haywards Heath RH16 4HT		Venue Contact Name & Contact Details:	Tel: 01444 477379 email: bookings@midsussex.gov.uk	
	Group:	Mid Sussex Tri Club		Location of first-aider:	Coach or participant	
	Date:	Thursday Evenings		Location of Defibrillator	None	
Time:		19:30		Location of telephone:	Mobile phone (coach responsible for having one)	
Participants:	Number:	5 - 15		Location of toilets:	No open public toilets in the park at the session times	
	Age:	18 - 70		Location of changing rooms:	None at venue, arrive and leave changed.	
	Ability:	Novice to Age Group		Location of first-aid kit:	Coach to supply	
Lead coach name:		Barry Davids		Stocked and maintained:	⊠Yes □ No	
Venue documents read and understood		Normal operating procedures:		Additional notes:		
(please ✓ appropriate box):		Health and safety policy:				
Emerger ⊠ Yes		Emergency action plan (EAP):	0			
Name of person conducting risk assessment:			Signed:		Date:	
Barry Davids						

## Risk Assessment Form

Location & Description of Hazard:	People at Risk:	Level of Risk (High/Medium /Low):	Advice Required: (from whom)	Action(s) to Mitigate/ Remove Risk:	Person responsible for resolution:	Residual Risk: After resolution	Dates Reviewed
<b>Environment:</b> Sessions in winter will be dark and cold. Lighting in the park is generally good but no guarantees a bulb has not blown. There are a couple of dark sections in the bottom corner to be aware of. Slip risk in the wet	Athletes	Likelihood: Medium Impact: Medium	□ No ⊠ Yes If yes, who: Coach	Check park lights prior to the session. Any blown then assess darkness and consider adjusting the session to avoid section if necessary Advise athletes to wear suitable running clothing for cold/wet weather. Advise care running in the wet in case of slipping. Especially down hills and round sharp bends	Coach	Likelihood: Medium Impact: Medium	05/11/2016
<b>Organisation:</b> Ensure all athletes know where to meet, know where the park exits are and meeting points if necessary. Make sure route is known around park and awareness of other park users	Athletes	Likelihood: Medium Impact: Low	<ul> <li>□ No</li> <li>⊠ Yes</li> <li>If yes, who:</li> <li>Coach</li> </ul>	Advertise meeting points before session. Advise necessary safety points in the session briefing at the beginning	Coach	Likelihood: Low Impact: Low	05/11/2016
Participants: Various abilities Physical or learning disabilities Underlying medical conditions, illness or injury	Athletes	Likelihood: Medium Impact: High	<ul> <li>□ No</li> <li>⊠ Yes</li> <li>If yes, who:</li> <li>Coach / athlete</li> </ul>	Check with athletes at the start of each session for ability and for any issues. Advise to sit out if feeling illness / injuries / fatigue. Modify session for individuals if necessary	Coach	Likelihood: Medium Impact: Medium	05/112016

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Location: Parking is largely on a busy road so care when accessing the park	Athletes Coaches	Likelihood: Medium Impact: Low	□ No ⊠ Yes If yes, who: Coach	Advise care prior to session	Coach	Likelihood: Low Impact: Low	05/11/2016
Human Resources: No venue staff. All resources to be supplied by club. Either coach or participant to	Athletes Coach	Likelihood: Medium Impact:High	⊠ No □ Yes If yes, who:	Coach or participant to cover first aid requirements	Club	Likelihood: Medium Impact:Medium	05/11/2016
General Public: Park is used by general public who may use same paths and walk dogs etc	Athletes	Likelihood: High Impact: Low	□No ⊠ Yes If yes, who: Coach	Make athletes aware of other users. Advise that as athletes they do not have right of way	Coach	Likelihood: Low Impact: Low	05/11/2016
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	

Location & Description of Hazard:	People at Risk:	Level of Risk (High/Medium /Low):	Advice Required: (from whom)	Action(s) to Mitigate/ Remove Risk:	Person responsible for resolution:	<b>Residual Risk:</b> After resolution	Dates Reviewed
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	
		Likelihood: Impact:	□ No □ Yes If yes, who:			Likelihood: Impact:	

Add more pages as required

