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:  | CLAIR PARK | Venue Contact Name & Contact Details: | START & FINISH POINT: DOLPHIN LEISURE CENTRE PASTURE HILL ROAD HAYWARDS HEATH RH16 1LY |
| --- | --- | --- | --- |
| Address: (Include postcode) | THE RUN VENUE IS AT: CLAIR PARK PERRYMOUNT ROAD HAYWARDS HEATH WEST SUSSEX RH16 3DN |
| Group: | MID SUSSEX TRIATHLON CLUB | Location of first-aider: | DOLPHIN LEISURE CENTRE (MEETING POINT FOR RUN) |
| Date:  | THURSDAY EVENINGS  | Location of Defibrillator  | RECEPTION - DOLPHIN LEISURE CENTRE (MEETING POINT FOR RUN) |
| Time: | 7.30PM – 8.30PM | Location of telephone: | • COACH HAS MOBILE • CLAIR HALL (ADJACENT TO PARK) • DOLPHIN LEISURE CENTRE |
| Participants:  | Number:  | 5-12  | Location of toilets:  | DOLPHIN LEISURE CENTRE (MEETING POINT FOR RUN) |
| Age:  | ADULTS (18-65)  | Location of changing rooms: | DOLPHIN LEISURE CENTRE (MEETING POINT FOR RUN) |
| Ability:  | MIXED – FROM NOVICE TRIATHLETES TO EXPERIENCED TRIATHLETES  | Location of first-aid kit:  | RECEPTION - DOLPHIN LEISURE CENTRE (MEETING POINT FOR RUN) |
| Lead coach name:  | NEIL GILES – 07725 656950  | Stocked and maintained:  | Yes No |
| Venue documents read and understood (please ✔ appropriate box): | Normal operating procedures: Yes No | Additional notes: | The session will take place in a public park and is therefore not a managed venue and has no facilities of its own. |
| Health and safety policy: Yes No |  |  |
| Emergency action plan (EAP): Yes No |  |  |

| Name of person conducting risk assessment:  | Signed:  | Date: |
| --- | --- | --- |
| Steve McMenamin |  | 02/02/2022 |

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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| LONE RUNNING  | RUNNERS  | Likelihood: MEDIUM Impact: LOW | X No  Yes If yes, who: | • All athletes to be in sight of Coach at all times • Athletes briefed to run with similar abilities • New runners to be have a nominated buddy • Group advised to keep to designated route as briefed • All participants recommended to carry mobile phone | LEAD COACH  | Likelihood: LOW Impact: LOW | 02/02/2022 |
| GETTING LOST  | RUNNERS  | Likelihood: LOW Impact: LOW | X No  Yes If yes, who: | • All athletes to be in sight of Coach at all times • Athletes briefed to run with similar abilities • New runners to be have a nominated buddy • Group advised to keep to designated route as briefed • Re-group location identified in session briefing • All participants recommended to carry mobile phone | LEAD COACH  | Likelihood: LOW Impact: LOW | 02/02/2022 |
| SLIPS, TRIPS AND FALLS | RUNNERS  | Likelihood: LOW Impact: MEDIUM | X No  Yes If yes, who: | • Group advised of risks in briefing • All participants recommended to carry mobile phone | LEAD COACH  | Likelihood: LOW Impact: MEDIUM | 02/02/2022 |
| BROKEN PATH DUE TO TREE ROUTE GROWTH | RUNNERS  | Likelihood: MEDIUM Impact: MEDIUM | X No  Yes If yes, who: | • Group advised of the condition of the path as part of briefing • Specific areas or concern pointed out • Use cones to make particularly bad areas visible | LEAD COACH  | Likelihood: LOW Impact: LOW | 02/02/2022 |

| **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** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| CROSSING ROADS  | RUNNERS / COACH | Likelihood: LOW Impact: HIGH | X No  Yes If yes, who: | • Use traffic aids (safe crossing points) at all times • Slow, stop and walk across roads • Group to wear hi-vis clothing (mandatory) | LEAD COACH  | Likelihood: LOW Impact: MEDIUM | 02/02/2022 |
| OTHER ROAD USERS – VEHICLES & BICYCLES | RUNNERS / COACH | Likelihood: LOW Impact: HIGH | X No  Yes If yes, who: | • Use traffic aids (safe crossing points) at all times • Slow, Stop and walk across roads • Group to wear hi-vis clothing (mandatory) | LEAD COACH  | Likelihood: LOW Impact: HIGH | 02/02/2022 |
| POOR WEATHER  | RUNNERS / COACH /  | Likelihood: MEDIUM Impact: HIGH | X No  Yes If yes, who: | • Weather forecast taken into account prior to session • Cancel session if high winds or icy conditions are forecast | LEAD COACH  | Likelihood: LOW Impact: HIGH | 02/02/2022 |
| POOR LIGHT LEVELS | RUNNERS / COACH / OTHER PARK USERS | Likelihood: MEDIUM Impact: MEDIUM | X No  Yes If yes, who: | • Group made aware of light levels as part of briefing • Run course to use the best-lit areas only • Group to remain in sight of coach at all times | LEAD COACH  | Likelihood: MEDIUM Impact: LOW | 02/02/202202/02/2022 |
| OTHER PARK USERS – DOG WALKERS, RUNNERS, GENERAL PUBLIC, CYCLISTS, CHILDREN PLAYING | RUNNERS / COACH / OTHER PARK USERS | Likelihood: HIGH Impact: LOW | X No  Yes If yes, who: | • Group made aware of other park users in briefing • Respect other park users and keep to one side of the path • Use the grass verge when required • Lead runners to alert others  | LEAD COACH  | Likelihood: HIGH Impact: LOW |  |
|  |  | 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:** | **Residual Risk:** After resolution | **Dates** **Reviewed** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Likelihood: Impact: |  No  Yes If yes, who: |  |  | Likelihood: Impact: |  |
|  |  | Likelihood: Impact: |  No  Yes If yes, who: |  |  | Likelihood: Impact: |  |

Add more pages as required

**Insert Diagram(s) of layout of venue with key safety elements marked (this page is intended to be shared between Risk Assessment and EAP):**

THE DOLPHIN LEISURE CENTRE

