**Anglia Ruskin Students’ Union Risk Assessment Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Subject Of Assessment**  XX Society Event In SU Space | | **RA Conducted By:** | **Date Of RA:** | **RA Ref No:** |
| **List The Risk/s Involved Or Describe The Hazard**   1. Slips, trips and falls – uneven, slippery floor, wires, chairs 2. Fire 3. Overcrowding 4. Blocked exits 5. Faulty Electrical Equipment (Microwave, Kettle / Hot Water Tap) 6. Disagreements between event attendees or unwelcome event attendees 7. Attendees fall ill | | | | |
| **Who Could Be Harmed & How?**   1. Students, staff and visitors could be harmed. 2. They could be harmed due to chairs / tables / equipment not being fit for purpose or put away appropriately. | | | | |
| **List The Current Control Measures In Place**   1. Venue is checked daily by university staff. 2. Fire procedures clearly viable in space. 3. Maximum capacity identified and communicated. 4. Exits clearly marked and kept free of obstruction 5. Notify SU immediately of any fault and students told not to use 6. Security 24/7 on site access / to call 999 if in emergency 7. Security 24/7 on site access / to call 999 if in emergency / event leaders can where possible be first aid trained | | | | |
| **Current Risk Level MEDIUM** | | | | |
| **List The Actions Required To Reduce The Risk**   * To ensure students are aware of health and safety policies of the university and fire protocol * Check exits throughout event for blockages * Ensure equipment is used only by those trained to use it * Students aware of Security Office and their availability * Meeting organisers to fill out guest speaker forms if there are any external attendees | | | **Date Actioned**  On - Going  On - Going  On - Going  On - Going  On - Going | **Actioned By**  Committee  Committee  Committee  Committee  Committee |
| **Revised Risk Level LOW** | | | | |
| **RA Verified By** | | | | **Date Verified:** |
| **Risk Assessment Issued To The Following;** | | | | **Date. Issued:** |
| **Risk Assessment Review Date:** |  | | | |
| **Risk Assessment Reviewed By:** |  | | | |