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

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| **Subject Of Assessment**  XX Society Meeting Off Campus | | **RA Conducted By:** | **Date Of RA:** | **RA Ref No:** |
| **List The Risk/s Involved Or Describe The Hazard**   1. Slips, trips and falls 2. Travel to venue 3. Fire 4. Overcrowding 5. Blocked Exits 6. New Venue is unsafe or unmanned 7. Venue not as advertised 8. Disagreements between event attendees 9. Attendees fall ill | | | | |
| **Who Could Be Harmed & How?**   1. Students, staff and visitors could be harmed. 2. They could be harmed due to slips / trips and falls caused by tables / chairs / equipment not being put away correctly.. | | | | |
| **List The Current Control Measures In Place**   1. Students to be vigilant when undertaking activity 2. Ensure travel arrangements are made in advance and appropriate risk assessments from coach companies are obtained (if applicable). 3. Avoid blocking pathways 4. Exits clearly marked and kept free of obstruction 5. Equipment set up by venue staff 6. Ensure pre arrival information is gathered and double checked by event organiser 7. Pre visit the venue where possible 8. Notify staff on site access / to call 999 if in emergency 9. Notify 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**   * Ensure facilities are checked before undertaking meeting * Ensure tour of facility is taken to acclimatise with your surroundings * Meet with venue staff to talk through health and safety and fire procedures * Ensure set up is done by venue staff where appropriate * Staff to remain at venue throughout the whole event remaining vigilant | | | **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:** |  | | | |