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

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| **Subject Of Assessment**  XX Club Training Session | | **RA Conducted By:** | **Date Of RA:** | **RA Ref No:** |
| **List The Risk/s Involved Or Describe The Hazard**   1. Slips, trips and falls 2. Getting hurt when transporting to and from the venue 3. Sprains 4. Pulled muscles 5. Over exertion 6. Dehydration 7. Fire 8. Injuries from wearing inappropriate clothing | | | | |
| **Who Could Be Harmed & How?**   1. Students, staff and visitors could be harmed. 2. They could be harmed by undertaking inappropriate skills for their experience, | | | | |
| **List The Current Control Measures In Place**   1. Qualified instructors supervising classes at all times. 2. When particularly difficult moves are attempted members pair up and spot each other. 3. All students are taught correct technique. 4. All students are taught the safe and correct way to do moves. 5. Equipment secured in place by instructors and are checked before use 6. Adequately warm up and cool down in every class 7. Make sure it’s made clear how important it is to listen to committee and instructors. 8. Reassure all members that they are amazing and will progress and everyone learns at different paces. 9. Members to be reminded to take breaks and training to be supervised. 10. Members to be reminded to bring water bottles. 11. Fire exits to be used and committee to ensure exits are not blocked. 12. Members to be reminded that they must wear appropriate clothing and to not be allowed to train if they are dressed in unsafe attire. | | | | |
| **Current Risk Level MEDIUM** | | | | |
| **List The Actions Required To Reduce The Risk**   1. Always have first aiders are at each session. 2. Check all participants are paid members of the club before each session. 3. Check that all members have activities insurance. 4. All participants will be warmed up and prepared before any activity, to avoid injury. 5. Participants will be given adequate water and rest breaks to dehydration and exhaustion. | | | **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:** |  | | | |