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| **Risk Assessment Number:** | **Date of Assessment:** | **Additional Information check sheet/risk assessments required.** **Substances Hazardous to Health:** **Manual Handling:** **Display Screen Equipment:** **New and Expectant Mothers:** **Young Persons: See HR Files**  | ☐☐☐☐☒ |  |
| **Task / Work Activity / Work Area Assessed:**Covid-19 | **Assessment carried out by:****Chloe Lang****Centre Manager** |
|  |
|  | Worst Case Outcome |  | Likelihood |  | Risk Rating(Outcome x Likelihood) |  |
| 5 | 4 | 3 | 2 | 1 | 5 | 4 | 3 | 2 | 1 | High | Medium | Low |
| Fatality | SevereInjury | Lost timeInjury | MinorInjury | No Injury | Certain | Very likely | Likely | Unlikely | Remote | 13-25 | 5-12 | 1-4 |
|  |
| To accept that we cannot guarantee that 1m social distancing will always be followed and in place , this will especially be the case the younger the children are. To put as many measures in place as possible to support 1m social distancing. |
| **Persons affected by the Activity** | **Identified Hazards** | **Control Measures Already in Place**  | **Outcome** | **Likelihood** | **Risk Rating** | **Further action required?**Yes/No |
| Staff, Children, Parents | Children and Parents arriving on site(Possible cross contamination) | * 1-way system in place to avoid cross over
* Tuck shop to be reduced and kept behind reception.
* Gymnasts should come in their gear to prevent changing clothes on site.
* Parents to use a drop off and collect system – drop off at reception to pick up at main room door. Can only drop off 10 minutes before session. Parents are not to wait inside the gym whilst training is taking place. Coaches will sign gymnasts out after sessions. Viewing areas are closed.
* One-way system in place within the building.
* Full clean every day and interim clean twice a night – see cleaning schedule.
* Children to wash their hands-on arrival.
* Children to use sanitizer pump after warming up and before leaving.
* Recreational and junior squad classes will not rotate around equipment. Coaches will move to different trampolines.
* Children will not be allowed to train if any of their family members are in self isolation or showing symptoms.
* Parents and coaches are reminded that anyone at home who is deemed vulnerable (new and expectant mother, elderly) should not attend any sessions until further notice
 | 3 | 3 | 9 | Y |
| Staff, Children Parents | Droplets or virus being live on equipment (high touch area) | * All equipment will be cleaned in accordance with the cleaning schedule though out the night.
* Frame pads will be cleaned after each session.
* Every handle will be cleaned, and doors kept open where possible, so no one needs to use handles – push pads to open the doors in the gym
* Conditioning equipment will not be used unless it is under supervision and is sanitized before and after use.
* Recreational bouncers not to use the pit.
* Red mats to be put into the pit for squad to use – to be cleaned daily.
* Participants to sanitize hands before using the rig.
* The same coach to use the rig.
 | 3 | 3 | 9 | Y |
| Staff, Children Parents | Leaving the Gym – Covid-19 exposureRoad safety | * Line children up with correct distance and take them all to the door, children to sanitize hands before leaving using pump provided.
* Children who are not collected at said time will be moved to an isolated area so not to cross contaminate with newcomers. Parents to be advised if this is regular their child will be unable to attend sessions.
* Parents to be advised on leaving times and to be aware of children when driving on the car park.
 | 3 | 3 | 9 | Y |
| Staff, Children Parents | Sneezing, Coughing  | * Good hygiene practice in place
* Tissues available
* Hand wash / sanitizing stations available for use
* Peddle bins for tissues to be emptied and cleaned daily.
* Cough and sneeze into the crook of their elbow and use a separate bathroom if possible
 | 3 | 3 | 9 | Y |
| Staff, Children Parents | Identification of potential infection:* Cough
* Fever
* Shortness of breath
* Sore Throat
 | * Isolation area available to accommodate person/s (meeting room) Parents to collect from this door.
* PPE will be provided so a coach can stay with child until parent/carers arrive.
* Parent/carers advised to get child tested, must inform of the outcome if positive.
* If test is positive session participants will be advised to self-isolate for 14 days.
* No participation by any child/staff member should any family member in the household be self-isolating.
 | 3 | 3 | 9 | Y |
| Staff, Children | Toilets Droplets or virus being live in bathrooms | * Toilet to be cleaned in accordance with cleaning schedule. To be signed when completed
* One at a time in bathrooms.
* Peddle bins to be provided for hand towels.
* Bathrooms to be separated into group 1 and group 2.
 | 3 | 3 | 9 | N |
| Staff, Children Parents | Returning from a category 1 country  | **Category 1 Countries** Travelers should self-isolate, even if asymptomatic, and use the 111 online coronavirus service to find out what to do next. Go home or to your destination and then self-isolate.**Category 2 Countries**Travelers do not need to undertake any special measures, but if they develop symptoms, they should self-isolate and call NHS 111.To be reviewed in accordance with government guidelines. | 3 | 3 | 9 | N |
| Staff, Children | Fire | * Fire procedures to remain the same.
* Social distance where possible not a necessity in evacuation.

Coaches to encourage social distancing when at assembly point.  | 4 | 2 | 8 | N |

|  |  |
| --- | --- |
| **Further Control Measures** | **Further Control Measures Follow up** |
| **Allocated to** (name) | **Target date** | **Date completed** |
| Mark one-way system – indoor / outdoor, Isolation room | Chloe Lang |  |  |
| Cleaning Schedule | Chloe Lang |  |  |
| Provide information to parents about drop off and collection times.  | Karen |  |  |
| Ensure tissues are provided, sanitizer stocked – Stock Checklist check levels each night. | Chloe Lang/ Gill Hurst |  |  |
| **Risk Assessment Reviews** |
| Suggested Review Date (either after significant changes, actions completed, or annually): |  |
| Risk Assessment Reviewed by (name):  |  | Risk Assessment Reviewed by (name): |  |
| Date:  |  | Date:  |  |
| Comments:  |  | Comments:  |  |
| Next Suggested Review Date:  |  | Next Suggested Review Date: |  |
| Risk Assessment Reviewed by (name):  |  | Risk Assessment Reviewed by (name): |  |
| Date:  |  | Date:  |  |
| Comments:  |  | Comments:  |  |
| Next Suggested Review Date:  |  | Next Suggested Review Date: |  |