

# Risk Assessment

Reference No.



## Section 1 – Initial Risk Assessment

Activity Ski and Board paddling in Bude canal				Location Bude Canal	
Having referred to the SLSGB Safety guide and evaluated the overall level of risk, please tick the appropriate box below:				Organisation/centre Bude SLSC	
High	Medium	Low	Minimal	Beach/Building Room /Location	
	v				
Hazards and Harm		Who is At Risk	How Are Risks Currently Controlled	Level of risk (high, medium, low, minimal)	Are additional Control Measures Needed (Y or N) and comments
Cuts from glass and metal		All participants.	Footwear required.	Low	No
Hypothermia		All participants but children most at risk.	<ol style="list-style-type: none"> <li>1) Wetsuits</li> <li>2) Length of session</li> <li>3) Dry clothes in club house</li> <li>4) Towels and blankets in club house</li> <li>5) Monitor participants for signs of hypothermia</li> </ol>	Low	No
Drowning		All participants but children most at risk.	<ol style="list-style-type: none"> <li>1) Boards and skis for flotation</li> <li>2) Signal if in trouble</li> <li>3) Ensure wetsuits are worn to aid buoyancy</li> <li>4) Qualified lifesaver/lifeguard present for each group of 6 participants</li> <li>5) Only enter water if conditions suitable – Analytical risk assessment before entering water</li> </ol>	Low	No
Injuries from boards		All participants but children most at risk.	<ol style="list-style-type: none"> <li>1) Instruction in safe use of equipment</li> <li>2) Correct choice of boards – foam or hard</li> </ol>	Low	No

Reference No. \_\_\_\_\_

Sunburn/Sunstroke	Everyone	1) Sunblock 2) Water to drink	Low	No
Injuries due to lifting and handling heavy equipment.	Everyone	1) Follow safe handling procedures	Low	No
Injuries due to exercise and exertion.	Everyone	1) Warmup 2) Ensuring participants stop at first sign of injury 3) Prompt first aid	Low	No
Ingestion of contaminated water	Everyone	Do not use canal after heavy rain, or visible signs of contamination or if algae warning issued.	Low	No
		<b>**Please note Analytical Risk Assessments will be completed on the day**</b>		

Please note the following Risk ratings used in this Risk Assessment and Risk Assessment Action Plan

Risk Rating		Rating Action Bands	
To establish Residual Risk Rating multiply "Likelihood" by the "Severity"			
Likelihood	Severity	Band	Action Required
1 Most Unlikely	1 Trivial Injury	1 & 2 Minimal/Trivial risk	No further action. Monitor situation.
2 Unlikely	2 Slight Injury	2, 3 & 4 Low risk	Monitor control measures for continued effectiveness.
3 Likely	3 Serious. Chronic injury	6 & 8 Medium risk	Improve or increase control measures.
4 Most Likely	4 Major injury/Death	9, 12 & 16 High risk	Stop the activity. Improve or increase controls immediately.

# Risk Assessment Action Plan

Reference No.



## Section 2 – Further Control Measures

Immediate Action Required to Reduce Risk	By whom	Revised Risk Level High, Medium, Low, Minimal
Further Action Needed to Reduce Risk	By whom	When

Once all of the above control measures have been put into place and signed off in section 2, then the risk assessment can be rewritten with all control measures transferred to section 1

Reference No.



### Section 3 – Review and Approval

Person Carrying Out Risk Assessment				Has this Risk Assessment Been Communicated to All Relevant Persons			
Name (please print) Mark Ward	Position Chief Instructor	Date of Assessment March 2015	Review Date March 2016	YES	✓	NO	
Person Responsible for Activity: Please sign to confirm you agree with the findings of the assessment and actions proposed							
Signature	Name (please print)		Position			Date	

Risk Assessment Review (Annual/Periodic)		
SLSGB Commission Representative or Line manager – I confirm that the assessment and controls remain effective and there has been no increase in risk :		
1st Review Date:	Name:	Signed:
2nd Review Date:	Name:	Signed:
3rd Review Date:	Name:	Signed:

Reference No.



## Section 4 – Record of Awareness

I can confirm that I have read and understood this risk assessment and will follow any details required within it

Name:	Signed:	Date: