



Risk Assessment Form

This form should be completed with a list of hazards that affect the session, and should be written from a coaching perspective, not a venue management perspective. For each risk assessment there should be associated Emergency Action plan to be used in case a risk occurs.

Venue:		Challenging Events Head Office		Venue Contact Name & Contact Details:	Kelly Wickens
Address: (Include postcode)		Unit 4 The Sidings Hound Road Southampton SO31 5QA			07841164265
Group:		Hedge End Triathlon Club		Location of first-aider:	CE HQ
Date:		18 th Apr 2021		Location of Defibrillator	Country Park- 20min walk
Time:		0800		Location of telephone:	Mobile use
Participants:	Number:	Up to 12 persons (2 x Groups of 6)		Location of toilets:	CE HQ
	Age:	18-60		Location of changing rooms:	N\A Participants to come changed
	Ability:	Intermediate		Location of first-aid kit:	CE HQ
Lead coach name:		Kelly Wickens		Stocked and maintained:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Venue documents read and understood (please ✓ appropriate box):		Normal operating procedures: x <input type="checkbox"/> Yes <input type="checkbox"/> No		Additional notes: Basic FA Kit	
		Health and safety policy: x <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Emergency action plan (EAP): x <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of person conducting risk assessment:		Signed:		Date:	
Tom Dickinson		THDICKINSON		13 th Apr 2021	

Risk Assessment Form

Location & Description of Hazard:	People at Risk:	Level of Risk (High/Medium/Low):	Advice Required: (from whom)	Action(s) to Mitigate/ Remove Risk:	Person responsible for resolution:	Residual Risk: After resolution	Dates Reviewed
Trips/ Falls /Slips	All	Likelihood: Impact: Medium	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who:	Covered in initial safety Brief	TD	Likelihood: Impact: low	21 st Apr 2021
Falling off bike	All	Likelihood: Impact: Medium	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who: Coaching Team	Coaching Technique via coaches during initial brief	TD	Likelihood: Impact: low	21 st Apr 2021
Injury running	All	Likelihood: Impact: Medium	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who:	Warm up delivered by coaches+ Correct transition Technique	TD	Likelihood: Impact: low	21 st Apr 2021
Pulled Muscles	All	Likelihood: Impact: Low	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, who:	Warm up delivered by coaches	TD	Likelihood: Impact: Low	21 st Apr 2021
Collision with Racking	All	Likelihood: Impact: Low	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who:	Warning of racking area and through flow of participant traffic	TD	Likelihood: Impact:	21 st Apr 2021
Weather	All	Likelihood: Impact: Low	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who: TD	Weather forecast and subsequent advice	TD	Likelihood: Impact:	21 st Apr 2021

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COVID	all	Likelihood: Impact: Medium	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who: TD	Social Distancing maintained at all times. Masks to be worn when 2m Social distancing cannot be maintained When Indoors masks masks worn	TD	Likelihood: Impact: Low	21 st Apr 2021
Collision with Cars	all	Likelihood: Impact: Low	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, who:	Briefed- Moving cars may be around normal highway code must be obeyed	TD	Likelihood: Impact:	21 st Apr 2021