



## MARCHES FAMILY NETWORK RISK ASSESSMENT FORM



<b>Assessment No: 2</b>  <b>Assessment Date:</b> 15/03/2021  <b>Reassessed Date:</b> 26/09/2023	<b>Location/Venue:</b> Oaker Wood  <b>Assessor's Name:</b> Megan Chambers	<b>Persons involved in/affected by task:</b>  Employees Young People Contractors	<b>Individual assessments required (Person's Initials)/Additional assessments required:</b>  <b>See also General Oaker Wood risk assessment</b>  <b>Reasons for individual/additional assessments:</b>
<b>Task/Activity/Area Assessed:</b>  <b>Woodland Krypton Activity</b>			

Hazards Identified	Current Control Measures in Place	Likelihood (with current control measures in place)	Severity of Injury	Assessed Band	Action Required? Y/N
<b>Spiders Web Activity</b>	CYP with balance difficulties will be recommended to take the easier options on the course.  CYP who are a ligature risk will not participate in the activity	1	1	Minimal	No
<b>Tube Challenge</b>	CYP and staff reminded to go careful when running on uneven ground and when carrying objects that may obscure vision of the ground.	1	2	Minimal	No

	Staff and CYP reminded to use the tubes for their purpose only.				
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Risk Rating			Rating Action Bands		
Likelihood	X	Severity of Injury	=	Assessed Band	Control Measures
Most Unlikely (1)		No Injuries (1)		Minimal Risk (1 or 2)	Maintain existing measures
Unlikely (2)		Minor Injuries (2)		Low Risk (3 or 4)	Review control measures
Likely (3)		Serious Injuries (3)		Medium Risk (6 or 8)	Improve control measures
Very Likely (4)		Fatality (4)		High Risk (9, 12 or 16)	Improve control measures immediately and consider stopping task/activity or using venue until the risk is reduced
<b>To establish the risk rating multiply 'Likelihood' by 'Severity of Injury'</b>					

Action Required:	Action Completed (Name and Date):	Review Date:
<b>Completed by (Name):</b> Megan Chambers	<b>Signature:</b> <i>Megan Chambers</i> 26.9.23	
<b>Reviewed by (Name):</b> Rae Chambers	<b>Signature:</b> <i>Rae Chambers</i> 27.9.23	