

Clubs & Societies

COVID 19 Risk Assessment Form

Please send completed forms to clubs@qub.ac.uk (sporting clubs),

or societies@qub.ac.uk (societies).

Covid-19 is a new illness caused by a virus (Coronavirus) which can affect your lungs and airways. Symptoms can be mild, moderate, severe or fatal.

There are two main ways in which coronavirus can be spread:

* From contaminated surfaces i.e. when an individual touches the surface with their hands and then touches their eyes, nose or mouth;
* From contaminated respiratory droplets released by individuals who are currently infectious i.e. when someone coughs, sneezes or blows their nose.

By protecting the potential routes of entry into the body by social distancing, good personal hygiene practices and cleaning regimes, the potential for infection can be effectively controlled and minimised.

This guidance and generic Risk Assessment outlines measures for dealing with the current Covid-19 situation during the acivities of Clubs and Societies. Each Club and Society must consider their own unique circumstances and address their own activities at a local level.

Please use this template to provide details of how risk of transmission will be minimised. This information will be reviewed by the Students’ Union.

**Details of Club / Society**

|  |  |  |  |
| --- | --- | --- | --- |
| Club or Society Name |  | Date of Risk Assessment |  |
| Your name and role within the Club or Society |  | Date of Event / Activity |  |

**Details of Activity**

|  |  |
| --- | --- |
| Event / activity being assessed | Date:Time:Venue/location: What is the maximum number permitted in this location to adhere to social distancing? How many attendees are expected?Is this event / activity open to the public?Is this event / activity open to ticket holders only?Is this event a charitable fund raiser?Detailed description of activity: |
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**Step 2 – Manage potential risk**

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| **Complete the table below** to outline what you will do to minimise the risks associated with Covid 19. |

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| --- | --- | --- | --- | --- | --- |
| **Activity** What are you doing?  | **Hazards**  | **Control Measure**How are you going to minimise the risk associated with the hazard(s)? | **Severity and Likelihood Score***See guide below*.  | **Risk Rating***See guide below*.  | **Accountable/Date**Who is accountable for the control measures, and what date will these be carried out? |
| Running Club / Society activity under new COVID-19 restrictions  | Stress | Reassure all members that there is no expectation to maintain ‘business as usual’ under the circumstances, and that they should not feel obligated to run or participate in any activity which they are not comfortable with.Signpost any members with concerns to the SU Clubs and Societies team, or the Student Wellbeing Service.Communication should be provided to all members to advise them of Covid 19 arrangements specific to their activities and what measures are requested from each member to protect all members.  |  |  |  |
| Location (on campus or off campus) | Coronavirus spread | Describe what building-specific arrangements are in place (e.g. one-way entrance/exit systems,use of staircases/lifts, reduced capacity of toilet facilities.):What is the room capacity and will 2m distancing be maintained? Will handwashing facilities or hand sanitiser be available?Will cleaning materials be made available for attendees to use? (e.g. chairs and tables, equipment)  |  |  |  |
| Face-to-face meeting | Coronavirus spread | Social distancing:* Number of persons in any area to allow compliance with 2m social distance, where at all possible.
* Review all activity plans to ensure social distancing is maintained.
* Reduce face-to-face meetings where suitable.
* Where activity requires less than 2m distance, other mitigations to be put in place such as minimal time spent within 2m (less than 15 minutes), good respiratory and hand hygiene, and use of face coverings.

Track and trace:Where practicable, attendance records should be maintained to allow contact with other attendees should a positive case be determined. |  |  |  |
| Hand washing / hygiene | Coronavirus spread | All attendees required to wash hands on arrival at the venue.All members requested to wash hands prior to leaving the venue.Hand washing recommended after use of equipment, especially where equipment is shared.* Members reminded to wash their hands for 20 seconds with water and soap and to dry hands thoroughly.
* Members reminded to catch coughs and sneezes in tissues and to follow Catch It, Bin It, Kill It. Members reminded not to touch their face, eyes, nose, or mouth.
* Any cuts on skin to be covered.
 |  |  |  |
| Sharing equipment | Coronavirus spread | Remove the need for shared equipment where possible.Shared equipment must be cleaned before and after each use.Users to be reminded to wash their hands before and after using any shared equipment.All equipment must be cleaned before retuning to storage.Describe what equipment will be shared:Describe how this equipment will be cleaned: |  |  |  |
| Travel | Coronavirus spread | All non-essential travel to be minimised.Members encouraged to walk or cycle to the venue.Members advised to avoid public transport where possible. Where travelling on public transport, face covering should be worn and hands washed on entering the venue.Car sharing should be limited to members of own household.Use of hired transport such as minibuses/coaches should adhere to social distancing requirements stipulated by hire company. |  |  |  |
| Members participating in group activities | Coronavirus spread | Members should be made aware that they must self-assess their symptoms daily and ***must not*** participate in any Club / Society activities if they have any COVID-19 symptoms.Members should observe government STAY AT HOME guidance if they, or anyone in their household, has COVID-19 symptoms.Members who are assessed as vulnerable or who are shielding are recommended to assess thei own personal risk and to discuss involvement with their medical practitioner, where necessary.Any member displaying symptoms while participating in activities will be required to go home.  |  |  |  |
| Returning to sporting activities | Coronavirus spread | Ensure that committee has directly liaised with SU / Queen’s Sport and has consulted [Sport NI Return to Sport framework](http://www.sportni.net/return-to-sport/) before resuming any sporting activity.Club committee members should inform themselves of requirements/recommendations of their specific sport governing bodies in relation to Covid 19 and adhere to the guidance. A more detailed risk assessment on sports activities may be required from Queen’s Sport prior to authorisation.  |  |  |  |

**Risk Rating Guide**

**Severity and Likelihood Guide**

|  |  |
| --- | --- |
| Severity | Likelihood |
| Unlikely | Possible | Likely | Very Likely |
| Very Minor | 1 | 2 | 3 | 4 |
| Minor | 2 | 4 | 6 | 8 |
| Significant | 3 | 6 | 9 | 12 |
| Major | 4 | 8 | 12 | 16 |

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| Risk Rating |
| Score | Risk Level |
| 1-2 | Low |
| 3-6 | Medium |
| 8-9 | High |
| 12-16 | Very High |

**Please tick to confirm that relevant insurance is in place for the proposed activity** [ ]

**Step 3 – Declare that you are satisfied with the risk levels of the event / activity, and that all members of your Club/Society who are involved will undertake the control measures outlined above.**

**To be completed by at least one Club/Society executive committee member**

I am satisfied that the risk(s) identified are acceptable and that the control measures outlined above are adequate.

I have read and understood the information contained in this risk assessment and I agree to adopt the control measures and precautions as stated above.

I will ensure that all members of my Club/Society involved in this event / activity have read and understood this Risk Assessment.

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| --- | --- | --- | --- |
| **Name** | **Role within Club/Society** | **QUB Email** | **Date** |
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**For office use only:**

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| I am satisfied that the below protocols have been adhered to in the completion of this risk assessment: | [ ]  Risk Assessment form completed[ ]  Offsite Travel Form completed (if necessary)[ ]  Mystery Tour Offsite Form completed (if necessary) |

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| Received by QUBSU Clubs and Societies Staff Member: |  | Date |  |
| Assessment No. |