Boys' Brigade Activities

Risk Assessment



Leaders are encouraged to undertake a simple risk assessment for BB activities and before embarking on a trip or visit or undertaking a camp or holiday. This form should be used for this purpose. Risk assessments need not be complex but should be comprehensive. Regular activities and frequent visits to local venues such as a swimming pool may not need a risk assessment every time. However, it is essential not to become complacent. An assessment of the risks of such visits should be made at regular intervals.

When completing the risk assessment, consider: what are the hazards; who might be affected by them; what safety measures need to be in place to reduce risks to an acceptable level; who will take responsibility for particular actions; what steps will be taken in an emergency? Once <u>ALL</u> control measures are in place for a specific hazard/risk please put a tick in the box to confirm this.

| Company/Battalion/District: | Age Group/Section: | |
|-----------------------------|------------------------------|--|
| Venue / Meeting Space: | No of children/young people: | |
| Date of activity: | No of leaders: | |

| | Hazard / Risk Identified What's the hazard and the risk of harm? | Control Measures What measures will you put in place to reduce the hazard/risk identified? | Control Measures in Place | Leader Responsible |
|----|--|--|---------------------------------|-----------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

| 4. | | | | | | | | | |
|--|-----------------------------------|-------|---|-------------------------|--|--|--|--|--|
| 5. | | | | | | | | | |
| 6. | Emergency or First Aid Provision. | | For minor injuries the First Aid and if necessary call emergent PPE equipment (face mask, all hand sanitiser) to be located with the control of the | | | | | | |
| Review: This risk assessment should be reviewed on completion of the activity and updated for future use and reviewed regularly where a frequent activity. | | | | | | | | | |
| | | | | | | | | | |
| Approved by Company Role: Captain Date: | | Role: | Approved by Leader/Officer in Charge of age group | Name: Role: Date: | | | | | |

Please note: Approval for activities being run by Battalion/Districts should be by a minimum of two Officer Bearers (Secretary, President, Treasurer, Vice-President).

If an accident occurs during the activity please remember to log the details in your accident book. Where professional medical attention is required you MUST complete an Accident Report Form and submit to BB Headquarters.