



Risk assessment form (H&S)

Name of assessor(s)	Carly Kew	Group / Establishment:	Great Wood / SSE Outdoors
Date	January 2024		

What is the workplace / activity / equipment / conditions (delete as appropriate) being assessed	How was the assessment done? e.g. desktop exercise, site visit, in consultation with employees, managers, safety representatives?	Next review date:
		January 2025
Shelter building, wood collecting, Environmental art – These activities are either done off-site or materials are collected off-site and then brought back to complete sessions. Areas to use are set out in agreement with Forestry England.	Site visit, in consultation & agreement with instructors, GWT and FE	Mobile reception / nearest landline
		Poor-varied Main office

Who could be harmed, and how?	What is already being done to control the risks?	*Risk Rating Severity x Likelihood			What further action is recommended to reduce risks further?	Action by whom?	Date action due	Date action done
		S	L	S x L				
Instructors & participants Slips, trips & falls	<ul style="list-style-type: none"> Safety activity brief given for all Constant monitoring of participants throughout session Potential hazards pointed out, branches, logs, uneven ground etc Walking expected always Correct footwear to be worn 	2	2	4				
Instructors & participants Collecting elements off-site	<ul style="list-style-type: none"> Safety activity brief given to all participants Crossing road/ various vehicles using forestry tracks Slips, trips, falls, branches, logs pointed out Instructed on what to and what not to collect Small bundles Correct method for carrying large objects, whilst walking demonstrated to all Stay as a group 	2	2	4				

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		S	L	S x L				
	<ul style="list-style-type: none"> Constant monitoring of participants Regular head counts 							
Instructors & participants Building shelters, falling branches	<ul style="list-style-type: none"> Safety activity brief given to all participants Participants not to be inside structure whilst more materials being added Staff may assist if needed Constant monitoring of all participants Take down all shelters at the end of each session 	2	2	4				
Instructors & participants Walking into or having branches flicked into eyes	<ul style="list-style-type: none"> Safety activity brief given to all participants Explained to all how this may happen and how to avoid it Area checked for lower branches prior to session, removed if necessary Walking throughout the session 	3	1	3				
Instructor & participants Bitten by snake	<ul style="list-style-type: none"> Safety activity brief given to all participants Constant monitoring throughout session Participants briefed on habitat of the area being used Time of year considered Don't try to touch or pick up snakes Instruct participants to inform adult/instructor if they see or find a snake 	4	1	4				
Instructor & participants Extreme weather	<ul style="list-style-type: none"> Weather forecast to be checked prior to departure Cancel session if weather becomes too severe Monitor bad conditions throughout the session 	2	2	4				

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		S	L	S x L				
Instructors & participants Other insects & animals	<ul style="list-style-type: none"> Safety brief given to all participants Brief participants about ticks & wood ants Explain to avoid disturbing nests of wood ants, tread carefully Long sleeves & trousers to be worn to minimise ticks attaching Check for ticks on return to camp Increased amounts of insects are found in summer months 	2	2	4				
Instructors & participants splinters	<ul style="list-style-type: none"> Safety brief given to all participants Participants briefed how to carry wooden objects carefully Participants instructed not to slide hands along wooden objects or ropes Extra care to be taken in wet conditions 	2	2	4				

* [Click here](#) for guidance in calculating Risk Rating. Rate the **severity** of the potential harm (between 1-5, where 5 is fatal) and the **likelihood** of the harm occurring (again 1-5 where 5 is very likely). Guidance is at [HS 004](#).

Please now pass this assessment to your manager for approval				
Name of assessor's manager:	Ack Moore	Date:		Manager's comments
Signature:				