

RISK ASSESSMENT

All RMVCC activities require a risk assessment. Use this form where a generic risk assessment does not already exist or is not sufficient. Insert more rows or sheets if required. Do not complete the shaded fields. Contact HSO for guidance if required. Use BLOCK capitals or type.

Unit	Royal Marines Volunteer Cadet Corps Portsmouth Division	Assessment Number	RA003	Assessment Date	1 Apr 15
Section or Department	Training	Assessment Type <i>Delete as appropriate; see Note 1</i>			
		Specific	Generic	Record of Dynamic Assessment	
Activity, Event or Process	Field and Navigation Exercises				
Assessor <i>See Note 2</i>			HSO Acceptance		
Name	G P Collar	Name	C R Spratt		
Rank	WO2 RMVCC Trg Sgt Maj	Rank & Position	Lt RMVCC Health and Safety Officer		
Signature	<i>GP Collar</i>	Signature	<i>CR Spratt</i>		

Hazards <i>Include Hazard Survey Number where applicable</i>	Who is at Risk?	Existing Control Measures <i>Specific Existing Control Measures</i>	Risk Rating <i>See Note 3</i>			Additional Control Measures <i>Each Control Measure is to be specific and managed</i>	Residual Risk Rating <i>See Note 4</i>			Management Plan		
			L	C	R		L	C	R	Owner	Target Date	Comp Date
Indiscipline • Aggravate pre-existing medical conditions • Horse play • Interference with equipment • Deviating from the training plan	Cadets	• All cadets will present parental consent form before undertaking any training • Trainees will be supervised at all times by training staff whilst undertaking training.	1	2	2	• Maintain existing controls	1	2	2			

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Organisation <ul style="list-style-type: none"> Poor planning and conduct Failure to report accidents or injuries leading to further complications (ie: concussion, head injury) 	All	<ul style="list-style-type: none"> All CFAVs are to be fully conversant with all Training Procedures, JSP 535 and this risk assessment Trainees will be supervised by course CFAVs whilst undertaking training Joining information and Instruction will be sent out to all Trainees. Activity specific parental consent and physical fitness conformation is in place and recorded Local Safe Operating Instructions are provided Equipment and clothing checks to be carried out during planning to ensure suitable for the weather forecast Any accident or injury no matter how minor will be recorded and follow up medical treatment or advice will be sort Complete safety briefings on the training, aim, equipment, planned outcome, regulations in force, local hazards and restrictions (emergency plan) Provision of maps, compasses and whistles and media when orienteering Safety vehicle suitable for the terrain, pre planned access and egress routes 	2	2	4	<ul style="list-style-type: none"> Maintain existing controls Accurate accountability lists and knowledge of where trainees are at all times Consult subject matter experts for second opinion Question cadets on injuries during debrief 	1	2	2			



**Volunteer
Cadet Corps**

Royal Naval and Royal Marines Cadets

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Competence <ul style="list-style-type: none"> Unqualified supervision Lack of local area knowledge and training regulations and training centre instructions 	All	<ul style="list-style-type: none"> The CFAV in charge of the activity shall be a qualified to the correct level for the type of terrain. These details will be checked and recorded by the event coordinator. Details of the minimum qualifications are listed in JSP 535 A training area recce conducted. Area guidebooks and training publications consulted Regulations in JSP 535 are to be followed at all times There must be at least one qualified First-Aider present and where required he/she will take the necessary action 	1	2	4	<ul style="list-style-type: none"> Maintain current controls 	1	2	4			
Capability <ul style="list-style-type: none"> Overestimation of the cadets, physical ability, qualification and experience to conduct the activity 	Cadets	<ul style="list-style-type: none"> All cadets are too assessed in a controlled environment to ascertain ability The pace of the training and terrain will be set with the cadet's ability taken into consideration. Known hazardous areas clearly marked on maps and briefed 	1	2	2	<ul style="list-style-type: none"> Maintain existing controls 	1	2	2			

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Environment <ul style="list-style-type: none"> • Adverse weather • Change in Weather conditions • Reduced or poor visibility • Bad light or darkness 	All	<ul style="list-style-type: none"> • A Dynamic assessment will be conducted by the event coordinator on the suitability of the weather conditions before and for the duration of the training serial 	2	2	4	<ul style="list-style-type: none"> • Daily forecast is obtained for the duration of the activity. • The training area is visually inspected for quality and hazards prior to activity 	1	2	2			
Water/soil borne disease <ul style="list-style-type: none"> • Weill's Disease (Leptospirosis) • Gastro- Intestinal illness 	All	<ul style="list-style-type: none"> • All cuts and abrasions are to be covered and trainees will be briefed on water borne diseases • All cadets will shower immediately after the activity and will change into dry clothing • All cadets receive a brief on personal hygiene 	2	3	6	<ul style="list-style-type: none"> • Additional information and guidance is attached to this risk assessment 	1	3	3			
Weather <ul style="list-style-type: none"> • Wind chill, hypothermia • Heat stress, dehydration, sun burn 	All	<ul style="list-style-type: none"> • Instructors and trainees are to ensure appropriate clothing and footwear for the weather conditions and temperature is worn • All clothing and equipment must be checked for suitability prior to undertaking the event • A supply of sun block for application prior and during training. Post sun tanning lotions applied as required. Sun hats and neck covers to protect vulnerable areas • Adequate wholesome drinking water will be supplied 	2	2	4	<ul style="list-style-type: none"> • Maintain existing controls 	2	2	4			

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Location <ul style="list-style-type: none"> • Uneven terrain possible trips, falls, falling objects, from cliffs and cragg's • Water Hazards and drowning, cold shock • Injuries from vegetation, insects, brambles, poison ivy etc 	All	<ul style="list-style-type: none"> • Conduct on training area will be briefed in the safety brief. Appropriate footwear will be worn. • The selection of the training area will limit the number of water and/or falling from height hazards • No go areas in will be in force for unavoidable hazards • Students will be briefed on how to identify and avoid hazardous vegetation. Insect repellent will be issued as required 	1	2	2	<ul style="list-style-type: none"> • Staff will monitor the groups progress from pre planned vantage points to keep out of visual contact time to a minimum • Areas with hazardous vegetation and/or insects will be identified during the briefing 	1	2	2			
Injuries from equipment <ul style="list-style-type: none"> •Incorrect/ damaged equipment •Lifting, pulling carrying injury •Cooking related injuries, burns, scolds, smoke inhalation, hygiene, •Crush or impact from vehicle 	All	<ul style="list-style-type: none"> • All equipment will be checked for suitability, serviceability and correct use (ie packing of ruck sacks, tents missing parts etc) • Loads to be carried will be checked by staff, suitable equipment provided for use and training on packing lifting and carrying given • Correct manual lifting techniques are to be used when moving or storing field equipment • Training is given in a controlled environment. Staff will closely monitor these evolutions and ensure safe practice • Specific training will be given on the use of highways and briefed in the safety brief 	2	2	4	<ul style="list-style-type: none"> • Maintain existing controls • Staff will monitor the groups' progress from pre planned vantage points. Anyone having difficulty will have their load reduced accordingly • Maintain existing controls 	1	2	2			

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<p>Communications</p> <ul style="list-style-type: none"> Inability to call for help People getting lost 	All	<ul style="list-style-type: none"> Communication arrangements must be provided to maintain contact with party members and in case of an emergency Mobile phone coverage will be checked in the planning stage Information, Instruction & route plans will be given out to all persons undertaking this activity Use of hand held GPS units as a back up location aid 	1	2	2	<ul style="list-style-type: none"> Staff will monitor the group's progress from pre planned vantage points to visual contact time to a maximum. Patrols of training area by staff Prominent land marks will be nominated as fall back meeting points in the safety brief 	1	2	2			
<p>First Aid</p>	All	<ul style="list-style-type: none"> As per emergency response plan, EASP or RASP A staff member must hold a current first aid certificate A first aid kit will be available within the training group All injuries requiring first aid will be recorded in the accident book to assist in reactive safety monitoring 	1	2	2	<ul style="list-style-type: none"> The emergency plan, EASP or RASP will be fully tested and communicated to all 	1	2	2			

Provide additional or continued information below:

Wells Disease – Leptospirosis

There is a slight risk of contacting Weil's Disease from the lake water by ingestion or through open cuts. If flu like symptoms are felt within 5 or so days of immersion in lake water report to your doctor and inform him that you have been training on a lake where this disease may be present. Personnel with cuts, abrasions or sores are to have them covered by a water proof dressing. If this is not possible then personnel with open cuts, abrasions or sores are not to participate on water serials. Wash hands thoroughly before eating and drinking.

Heat Exhaustion

Symptoms:

- Dizziness, restlessness and headache.
- Rapid pulse and usually, but not always, excessive sweating.
- Skin initially clammy and cool to the touch becoming dry and flushed in appearance as heat exhaustion develops.
- Raised temperature
- Twitching and cramp
- Reduced level of consciousness and, eventually, coma.

Treatment:

- Rest patient in a cool place.
- Drink plenty of water
- Initiate cooling - best achieved through evaporative loss: wet and fan the skin or via thin layer of clothing.
- Inform HQ and obtain medical assistance.
- Personnel

Hypothermia

Symptoms:

- | | |
|--|------------------------|
| • Pale skin, "goosebumps" complains of feeling cold | core temperature 37° C |
| • Sporadic shivering suppressed by voluntary movements | |
| • Gross shivering in bouts leading to uncontrollable shivering. | 36°C |
| • Mental confusion, loss of will | 35°C |
| • Loss of memory, impaired speech, reduced sensation, reduced motor performance. | 34°C |
| • Hallucinations, delusions, clouding of consciousness, shivering impaired. | 33°C |
| • Irregularities of heart rhythm, grossly impaired motor performance. | 32°C |
| • Shivering ceases. | 31°C |
| • Loss of consciousness - no response to pain. | 30°C |
| • Death. | 27°C |

Treatment:

- Prevent further heat loss.
- Handle with care, lay patient down and provide wind proof cover or windbreak.
- Re-warm patient, add additional layers of clothing, place in sleeping bag or survival bag or both.
- Contact HQ and obtain medical assistance.
- If patient conscious give warm drink.
- Monitor patient continuously until medical assistance arrives.
- Transport to medical facility as soon as possible.

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Provide additional or continued information below:

Resuscitation

To be effective resuscitation must be started immediately; even whilst the patient is in the water otherwise damage or death may occur within a few minutes. The saving of life during a medical emergency depends on the accurate assessment of a first aider and proper usage of the ABC of resuscitation A = Air Way B = Breathing C = Circulation

References

- JSP 535
- JSP 375
- Management of Health and Safety Regulations 1999

HSO Assessment Review

See Notes 2 and 5

Review Date	1 Apr 15	HSO Comments	EASPs and RASPs may refer to this RA but must conduct and show a specific RA if there are prevailing conditions or hazards not covered herein.
Name	C R Spratt		
Rank	Lt RMVCC		
Signature	<i>C R Spratt</i>		

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Notes:

1. If using a 'Generic' risk assessment, Assessors and the HSO are to satisfy themselves that the assessment is valid for the task and that all significant hazards have been identified and assessed. If additional hazards are identified they are to be recorded and attached to the Generic assessment.
2. Assessors are to note that they are responsible for production of the risk assessment and that they are signing to indicate that the risk assessment is suitable and sufficient and they consider the risks to be acceptable:

Risk Matrix <i>Likelihood x Consequence = Risk Rating</i>			Low	Medium	High
			Minor injury or illness	Serious injury or illness	Fatalities, major injury or illness
			1	2	3
High	Common, regular or frequent occurrence	3	3	6	9
Medium	Occasional occurrence	2	2	4	6
Low	Rare or improbable occurrence	1	1	2	3

3. When recording the Risk Rating ensure that both the Likelihood and Consequence scores are included:

High	Improve control measures; consider stopping the activity or event; approval from Commanding Officer required before this activity or event takes place.
Medium	Review control measures and improve if reasonably practicable to do so, consider alternative ways of working.
Low	Maintain control measures and review if there are any changes.

4. Record the residual Risk Rating to demonstrate that the risk has been reduced to an acceptable level.
5. Risk Assessments are to be reviewed:
 - Annually.
 - If there is reason to doubt the effectiveness of the assessment.
 - Following an accident or near miss.
 - Following significant changes to the task, process, procedure or responsibilities.
 - Following the introduction of more vulnerable personnel.
 - If "Generic" prior to the activity taking place to ensure no specific matters have arisen that require an amendment to or update of the generic risk assessment.