

ROLLING ROCK

PHASELS WOOD SCOUT CAMP RISK ASSESSMENT SHEET

1. ACTIVITY/AREA

ROLLING ROCK

Frequency of use

DAILY

2. PERSONNEL INVOLVED(instructors, visitors, campers, schools)

Number of people involved **0 – 18**

3. POTENTIAL HAZARDS(equipment, structures, fall, others etc)

- 1) **FALLING**
- 2) **ENTRAPMENT**
- 3) **EQUIPMENT**
- 4) **GROUPS OF CHILDREN**
- 5) **ELECTRIC SHOCK**
- 6)
- 7)
- 8)

4. ASSESSMENT OF RISK

- 1) **LOW**
- 2) **MEDIUM**
- 3) **LOW**
- 4) **LOW**
- 5) **LOW**
- 6)
- 7)
- 8)

5. LIST MEASURES TAKEN TO CONTROL HAZARDS

- 1) **CRASH MATS IN PLACE AT ALL TIMES**
- 2) **CHECK SENSORS ARE IN WORKING ORDER**
- 3) **CHECK DAILY AND CORRECT TRAINING IN USE**
- 4) **KEEP ALL GROUPS AWAY FROM MATS ETC**
- 5) **ENSURE CABLES ARE SAFELY STORED**
- 6)
- 7)
- 8)

DATE **09/03/08**

REF.NO

ROCKRISK

COMPLETED BY – **D.STACK – DEPUTY WARDEN**