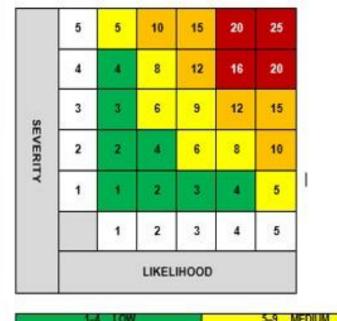
This Risk Assessment uses the following Risk Level Matrix:



LIKELIHOOD							
5	Almost Certain – Occurs frequently						
4	Very Likely – Has occurred and will again						
3	Likely – Possible but not common						
2	Unlikely – Rarely Occurs						
1	Very Unlikely – Hasn't occurred before						

	SEVERITY	
5	Catastrophic	
4	Significant	
3	Moderate	
2	Low	
1	Negligible	

1-4 LOW	5-9 MEDIUM	10-15 HIGH	16–25 VERY HIGH
Continue with existing control, however monitor for changes. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires attention to reduce the rating as well as regular ongoing monitoring. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires immediate attention to bring the risk down to an acceptable level. Implement the control measures required, within the timescales given in the risk assessment and continue to review working practices to reduce the probability of an accident to the lowest possible level.	Stop immediately – the risk is too high. Take immediate action to reduce the risk to the lowest level possible.

This Risk Assessment uses the following Mitigation Scores matrix:

GREEN (2) All necessary levels of preventions are in place to carry out duties

AMBER (1) Some levels of preventions are not sufficient enough to carry out duties. Carry out remedial actions prior to continuing with duties RED (0) Levels of preventions are insufficient to carry out duties. STOP WORK – do not carry out duties until remedial actions are in place

Date:	12 Aug 2020		Site Skuna Stadi		Skuna Stadium					
Carried out by:	P Gregory		Position:	Chairman/ Covid officer		Checked By:	J. Kinney		Date:	13 August 2020
Description of Assessme	ent:	Friendlies / Compe	etitive Training Match	nes Protocol	/ Competitive Matches		•			
Persons Affected:		All players and key staff, and any other persons who may enter the ground								
Brief Outline:		2020 V.3 Pre-Season Friend	dly/Competitive Train	ing Matches	Policy & Guidance – Return to First Tea Protocol, Medical Guidance and FAQ' covid-19-guidance-on-phased-return-of	s : 29.07.20	on/elite	-snort-return-to-train	ing-quidance	e-stage-two

Identified Hazards	Risk Level before control measures S x L = R			control measures		control measures			Mitigation Score Completed (2) In Progress (1)	Additional Control measures required	Completion date	F	inal F S x	lisk le L = R	
	S	L	R	RR		Not In Place (0)			S	L	R	RR			
Travel	5	3	15	Н	It is recommended that personal vehicles are used	(2)			5	1	5	М			
					Players must travel to ground individually.	(2)									
					Questionnaire completed prior to arrival by all players and staff.	(2)									
					Clean car regularly with wipes, with specific consideration to door handles, gearbox & steering wheel.	(2)									
					 Disposable gloves should be worn at petrol pumps after which hands should be washed using soap and water or sanitised using appropriate hand gel. 	(2)									

Identified Hazards	Risk Level before control measures S x L = R		control measures S x L = R				control measures S x L = R			ures	Recommended Actions	Mitigation Score Completed (2) In Progress (1)	Additional Control measures required	Completion date	F	inal R S x	lisk le L = R	
	S	L	R	RR				S	L	R	RR							
Entrance	5	3	15	H	One-way system is in place, where possible	(1)	Only in place in certain parts of the ground, therefore face coverings will be worn indoors, and social distancing maintained as much as possible.	01.08.20	5	1	5	М						
					IR temperature checks in place	(2)	• Yes											
					All should wash their hands both on arrival and leaving. (Sufficient gels/handwashing facilities available).	(2)												
					Players should maintain social distancing recommendations and not engage in physical contact of any sort	(2)												
Changing, Showering, Toilets	5	3	15	Н	 Sufficient kit provided. (Two sets). Toilets kept in good condition, clean and handwashing after using them. 	(2)		01.08.20	5	1	5	M						
					 Areas cleaned as frequently as possible, and preferably several times per day. Longer-acting cleaning agents applied at appropriate intervals on the advice of the manufacturer. 	(2)												
					 Changing rooms allocated to players and staff prior to their arrival on site, to ensure social distancing, showers not to be used 	(2)												
					Hand sanitiser units at each changing room entrance to maintain hygiene standards	(2)												

Identified Hazards	Risk Level before control measures S x L = R				control measures S x L = R			control measures S x L = R Completed (2) In Progress (1)				Recommended Actions	Completed (2)	Additional Control measures required	Completion date	F		al Risk level S x L = R			
	S	L	R	RR		Not In Place (0)			S	L	R	RR									
Medical/ Treatment Room	S 5				 Surfaces/couches should be cleaned using an appropriate agent between assessments Couches at least six feet apart. Appropriate PPE should be worn by medical staff performing face-to-face duties with players such as providing treatment or strappings, taking blood tests or other specimens (separate recommendations for CPR): CPR PPE should consist of: Fluid Resistant Surgical Masks (Type 2R); Eye Protection (goggles or visor) when conducting an examination of a player's mouth, head or ear, nose and throat areas; Gloves; and Apron. In instances where it is not practical to wear gloves and/or apron, the practitioner should adhere to strict hand hygiene procedures before and after patients There is no requirement to change eye protection and face masks between assessments, unless they are soiled, or the mask becomes damp. It is recommended that doctors restrict medical examination to those which are essential. For example, ENT assessments may be unnecessary, and treatment may be provided on history alone. Donning and doffing areas for PPE should be arranged at training grounds. Doffing areas should have a sink where possible. PPE equipment should be cleaned using an appropriate agent or disposed of following use in a clinical bin, and 				S 5	1	R 5	RR									
					 bin emptied no longer than every 14 days Use of medical equip should be minimalised to as low as reasonably practical, limited to injury and illness management & only by instruction by the club doctor. Oxygen, Entonox and nebulisers may be delivered using the PPE ascribed above 	(2)															

Identified Hazards	Risk Level before control measures S x L = R			ures	Recommended Actions	Mitigation Score Completed (2) In Progress (1)	Additional Control measures required	Completion date	Final Risk level S x L = R					
	S	L	R	RR		Not In Place (0)			S	L	R	RR		
Testing	5	3	15	H	No Player or member of Staff is permitted to attend the Ground until they have completed the questionnaire and had a temperature reading. This will apply to both teams.	(2)			5	1	5	M		
Friendlies / Competitive Training	5	3	15	Н	 Any players or key staff have signed the Club's Covid- 19 Policy and have returned a negative CAT test 	(2)			5	1	5	М		
Matches					 Social distancing measures (2m) maintained prior to, during (for all non-playing individuals) and after the match 	(2)								
					Face coverings to be worn indoors and where distance cannot be maintained	(2)								
					Avoidance if close personal contact (handshakes and embraces) spitting, chewing gum and use of snus	(2)								
					Teams to warm-up/warm-down outdoors, when possible	(2)								
					Players and staff to travel in own vehicles	(2)								