RISK ASSESSMENT – COVID-19 – MOSSLEY HILL ATHLETIC FOOTBALL CLUB

| ACTIVITY: | Football Coaching – Senior Football – Rev E | | | | |
|--|---|------------------------------------|-----------|--|--|
| LOCATION: | Mossley Hill Athletic Club | 24 th September 2020 | | | |
| | | | | | |
| PERSONS AT RISK- AFFECTED BY ACTIVITY: | All staff and players | Number | Up to 100 | | |
| ANY VULNERABLE PERSONS AFFECTED BY ACTIVITY: | Non Known | Number | N/A | | |
| ACTIVITIES TO BE UNDERTAKEN | Competitive matches with opponents from different clubs | | | | |

| POTENTIAL HAZARDS | | Initial Assessment of Risk | | |
|-------------------|--|----------------------------|-----|------|
| REF. | | Low | Med | High |
| 1. | Infection and spread of virus pre-match/ post-match inside | | Х | |
| 2. | Infection and spread of the virus during game play | Χ | | |
| 3. | Infection and spread of the virus through equipment | | Х | |
| 4. | Spread of virus through lack of social distancing | | Х | |
| 5. | Spread of virus through players, officials and spectator interaction | | X | |

CONTROL MEASURES - DELIVERY

- Changing rooms are to allow no more than 8 people in each changing room at one time socially distanced. Changing rooms will be cleaned after use.
- Outer doors to changing rooms are to be kept open.
- One way system to be maintained throughout the club
- Coaches will carry high alcohol antibacterial wash for their hands at all times
- Verbal ongoing briefings with all participants prior to start of each game
- No sharing of drinks between participants
- Ensure all site players entering the coaching area are fit, healthy and symptom free (checked on every occasion verbally)
- All equipment used is to be sanitised between games and at half time
- Coaches and players are to keep a minimum distance of 2m at all times when not playing
- Subs to be paid via bank transfer
- Rope around pitch with adequate signage to keep spectators distanced from players, officials and each other.
- Upon arrival at the ground, all persons are required to scan the QR codes available and register for the FA track and trace app. Data will be kept for 21 days and then deleted.

Non Participants/ spectators/ injured players will be asked to remain 2m apart from each other at all times.

| ADDITIONAL CONTROL MEASURES - (IF APPLIC | PERSON RESPONSIBLE FOR IMPLEMENTATION | | | COMPLETION DATE | |
|--|---|--------|--|-----------------|--|
| Provide all coaches with information of hygiene practices. | I McLean/ R Wells | | | 1/8/20 | |
| Players to be provided with kit to take h week and wash themselves | M Thomas/ S Halpin/ D Booth/ Team Coaches | | | Ongoing | |
| Provision of soap and sanitisers to be re a regular basis and replenished prior to required. | M Thomas/ S Halpin/ Team Coaches | | | Ongoing | |
| Regular monitoring of Government, Dep Health and World Health Organisation a outbreak. | I McLean | | | Ongoing | |
| Monitor and spot check games to ensur compliance | I McLean | | | Ongoing | |
| Explore possibilities to access funding for permanent barrier to pitch | I McLean | | | Ongoing | |
| RESIDUAL ASSESSMENT OF OVERALL RISK | Х | MEDIUM | | High | |

Note: Re-assessment required if overall residual risk is High

| ΔΡΟΙΤΙΟΝΙΛΙ | INFORMATION: |
|-------------|----------------|
| ADDITIONAL | INFURIVIATION. |

(Notes, comments, further details, outline procedures, safe systems of work, standards, drawings, etc.)

Further advice and information at:

www.who.int

https://www.gov.uk/coronavirus

| Risk Assessment Circulation list (tick box) | | | | | | | | |
|---|------------|---------|------------|------------|-----|----|---|--|
| Steering Group | Х | Coaches | | Х | Clu | ıb | Х | |
| Other – Specify: | - Specify: | | | | | | | |
| Signature of responsible person: Date: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Assessor: | | | Signature: | | | | | |
| Date Assessed: | | | Re | view Date: | | | | |

Risk Assessment and Method Statement Acceptance Signatures

| NAME | SIGNATURE | DATE | AGE GROUP |
|-------------------------------|--|-----------|-----------|
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| I have read and fully underst | tood the above risk assessment and method st | tatement. | |