RISK ASSESSMENT FORM

Assessment No:97	Locations/ Dept Main Centre	Persons Involved in or affected by task:	
Assessment Date: 05/06/2020	Assessor's Name Matthew Crane		
Task/ Activity/ Area Assessed		Employees	х
		Visitors	Х
Ultras Gym		Contractors	
		Members of the public	Х
		Others	

What are the hazards?	Who might be harmed, and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Done
COVID-19	Staff, members, hirers contractors by becoming contaminated from equipment, touchpoints and surfaces and via droplets from	Rearrangement of equipment in the gym areas to meet the required social distances. Floor and wall signage to be fixed in agreed	Member communication advising of the new design and requirements upon reopening	MR	July 2020	~
	sneezing, coughing, sweating, and exhaling while exercising by someone who has COVID-19	locations to enforce one-way system implemented to maintain 2m social distancing. Hand Dispensers positioned at each entry/exit	COVID-19 guidelines.	MR	July/August 2020	Ongoing
		point for both users and staff. Signage to be placed at all entrances and exits re-enforcing the COVID-19 procedures. These procedures will include regular washing of	Staff training for cleaners, duty staff and receptionists to understand the COVID -19 policies and procedures and where necessary to implement such procedures.	Management	June/July 2020	٧
		hands or use of alcohol gel rub/foam on entry and on exit, maintaining 2m distancing, no towels and following one way systems.	All training provided will be documented and staff assessed on compliance	Management	July/August 2020	٧

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	Doors will be kept open during opening times to reduce touchpoint areas		
	Booking system used to reduce capacity per hour to help sustain social distancing during opening hours.		
	Open external windows and doors to allow natural air to circulate following government guidelines.		
	Following government guidance on cleaning methods. Fogging machines will be used when and where necessary to disinfectant large areas.		
	Gym staff will be regularly cleaning touchpoints throughout their shifts noting times of clean on equipment.		
	PPE clothing will be provided for gym staff to perform cleaning duties.		
	PPE items to be provided to all cleaners, including disposable head caps, face masks, gloves, apron and show covers. Each cleaner to be given their own shield.		
	Provide access to phones and email for staff to use to communicate as much as possible.		
	Monitor Government guidance and make necessary changes as the situation changes.		
Staff and members of the public may be injured if they trip over objects.	Area is well lit. Free weights are kept in a rack and are regularly tidied by staff.		

		Notices up advising members to put back equipment after use.		
Electrical Equipment	Staff and members could get shocks or burns from faulty electrical equipment. Electrical faults can also lead to fires.	Staff are encouraged to spot and report any defective equipment. Equipment is PAT tested annually and any faulty equipment repaired or removed. The equipment suppliers complete bi-annually maintenance and service checks and repair any faulty equipment.		
Manual Handling	Staff risk injuries or back pain from handling heavy/bulky objects, e.g. Tables and chairs	Staff trained in correct manual handling techniques. Manual aids are made available. Staff have completed a Level 2 Gym Instructor Course which shows how to lift heavy pieces of equipment.		
Physical Activity	Risk of injury through inadequate teaching and accident.	Qualified 1 st Aiders on-site at all times. All injured reported. Gym Instructors are fully trained. Notices state that members and their guests are reminded that it is their responsibility to ensure that their medical condition is satisfactory for the activity they wish to pursue. Limit on numbers, ensuring adequate individual space.		
Working with children		All staff trained and fully qualified. All staff successfully DBS checked.		

Action required (note any temporary action / control measures required):	Action Review Date	Action Completed (Name and title) / Date

Further actions that may require longer term consideration:		Action Review Date	Action Completed (Name and title) / Date	
Assessment Review Date (as required): 04/06/2021	Assessment R	eview Date (as required):		
New risk assessment required: Yes / No	New risk asses	ssment required: Yes / No		
Completed by (Name):	Completed by	(Name):		
ignature: Signature:				
Signature:	Date: 05/06/2	020		
Matt Crane				