## **Risk Assessment – Your Health and Safety Plan** Page 1 of 17

Risk Assessment – Your Health and	Safety Plan of Action:			Hierarchy of Risk Control Mea	sures
	assessment (remember to apply the hierarchy	of controls).	Most Effective	Elimination	Physically removing the hazard
	art of a group involved in the work. th others and use the results to make the wor	k/activity safer by design and to		Substitution	Replacing the hazard
<ul><li>produce safer ways of working.</li><li>Remember to monitor your arrang</li></ul>	ements to see if they are working and review	your assessment for any change	es (e.g.	Engineering Controls	Isolating people from the hazard
changes to people, processes, equ	ipment, the work environment or following a	n incident or near-miss).		Controls p	hanging the way eople work e of Personal tive Equipment
School/SBU/Department:	PAM/SPECS	Location(s) of Activity: (Campus, Building, Room)		Bayfordbury Obser	rvatory
Assessor Name:	Mily Riley	Assessor Role (Job Title):		Bayfordbury Educa	ation Officer
Assessment Date:	06/01/2025	Assessment Review Date: Set a review date for your asse	essment.	06/0	1/2026
Activity Title/Description:	Private events at Bayfordbury Observato and adult community groups, birthday pa	arties and proposals.	its with loca	I community groups	e.g. scouts, guides
	A short summary explaining the nature o	f the activity being assessed.			
Agreed with:	Name/Signature: Ben Burningham				
(Line Manager or Representative)	The line manager/representative providin				roach.
Checked by:	Name/Signature: David Campbell (Bayfor	rdbury Domes and Huts Lab Man	ager) DC	m	
(H&S Advisor or Lab Manager)	Mily Riley (S19 Planetarium Lab Manager				
	If necessary – refer to your SBU approval	procedures.			

## University of Hertfordshire UIH Risk Assessment – Your Health and Safety Plan Page 2 of 17

Note: further guidance for completing your risk assessment is available on the last page of this plan.

Hazard Assessment >			Ris	k Ass	essm	ent and Risk Management >	<u></u>				
IDENTIFY HAZARDS	WHO COULD E HO			k Bef ontro		EVALUATE THE RISK AND DECIDE ON CONTROLS		sk Af ontro		RECORD YOUR AND IMPLEME	
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Fire and Emergency Evacuations	Visitors UH Staff Outreach Ambassadors	Smoke inhalation Burns Death	3	5	15	<ul> <li>Bayfordbury Security Arrangements, Emergency and Lone Working Procedure as per UPR HS05, Section 8.1.</li> <li>All staff and ambassadors completed iHASCO Fire Awareness and checked by OPE Manager prior to event.</li> <li>All staff and ambassadors are aware of fire exit routes.</li> <li>Register staff involved in group visit at start to account for everyone in the building.</li> <li>Adults accompanying under 18s/ lead adult of visiting group responsibility to register other members of group.</li> <li>Safety briefing - what to do in case of a fire. All persons to evacuate through nearest available exit. External visitors are aware of which staff to report to in event of emergency.</li> <li>Specific fire safety details at start of each new activity if relevant.</li> <li>Fire Extinguishers available on site and fire exit signs clearly displayed above the appropriate doors.</li> </ul>	1	5	5		

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	WHO COULD B	E HARMED &	Ris	k Bef	ore	EVALUATE THE RISK AND DECIDE ON	Ris	sk Af	ter	RECORD YOUR	FINDINGS
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						<ul> <li>All furniture is arranged/stacked appropriately to reduce risk of falling and exits are always kept clear. Fire doors kept closed.</li> <li>Additionally: all attendees will be informed at the start of each night (orally, and with written instructions also accessible in the Patrick Moore Building) of the emergency notification procedures if staff are incapacitated in an emergency. These procedures are;</li> <li>Visitor to alert other nearby staff members or via radio. If unable to contact staff within one minute, immediately call 999 and request required emergency services.</li> <li>Visitor or other staff member then ring UH security (x5555 or 01707 285555) to let them know what has happened and that they should come to Bayfordbury.</li> <li>If required, UH security will contact 1) David Campbell or 2) Helen Goddard who will attend on-site and close down the observatory facilities.</li> <li>UH security will remain with the visitors until everyone has been able to leave the site.</li> <li>UH security will then lock-up the site after the observatory facilities have been closed down.</li> <li>Limited mobility Evacuations</li> <li>Anyone with a disability, impairment, or limited mobility, may require help during an emergency.</li> <li>Where this is the case, a plan will be put in place in advance via a Personal Emergency Evacuation Plan</li> </ul>					

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						(PEEP). Done through the health and safety team – safety@herts.ac.uk. Any person that cannot use stairs will be escorted to a the landing at the top of the stairs in Bayfordbury. Bayfordbury Campus has one Evacusafe Standard Evacuation Chair located at the top of the stairs. These chairs will only be used by trained staff where necessary to evacuate those with mobility impairments out of the building. UH staff will brief visitors with limited mobility and ask them to sign the PEEP information sheet. For more information on the university's fire and building evacuation procedures, please see <u>here</u> .					
Walking in the dark	Visitors UH Staff Outreach Ambassadors	Slips/Trips/Fall Minor/Major Injury	3	4	12	<ul> <li>The roadway and dome pathway lights are to be switched on during group visits.</li> <li>Visitors are always accompanied by UH staff/outreach ambassadors when moving between the domes and the BSB (Bayfordbury Science Building).</li> <li>During safety briefing visitors are asked to: <ul> <li>Keep off the grass as there is unlit equipment and other trip hazards</li> <li>Not to run.</li> </ul> </li> </ul>	2	4	8		

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						Please refer to RA - Observatory - Bayfordbury Observatory site - V1.0 for further risks and controls.					
Ladder Use	Visitors UH Staff Outreach Ambassadors	Slips/Trips/Fall Minor/Major Injury	3	5	15	The demonstrator shall supervise the use of the (red) stair ladder by visitors in accordance with the ladder training given during group visits training. Children shall be additionally supervised by an adult within the group. Ladders are inspected every 6 months. Any defects are recorded and reported. Ladders should not be used when lone working. Any potential users are given directions on use. Staff told to never use any extending ladder, only step ladders if they have ladder training and visitors may only use the (red) stair ladder.	1	5	5		
Improper use of Laser Pointer	Visitors UH Staff Outreach Ambassadors	Eye Damage	2	4	8	Possession of laser pointers limited to staff who have been trained in their safe operation. Staff told they must declare if they want to use a laser pointer during events so they can be provided with training. Laser pointers may only be used if Class 1 or Class 2, and clearly labelled with the class and output power.	1	4	4		

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						Care should be taken that the laser is not aimed towards people, or towards reflective objects. Only engaging laser when pointed upwards, never at eye level.					
Use of Laboratories	Visitors UH Staff Outreach Ambassadors	Injury from hazardous materials and/or laboratory equipment and/or electrical equipment	2	4	8	<ul> <li>Standard Lab Safety practice to be followed.</li> <li>During safety briefing visitors are asked to:</li> <li>Not touch any materials or equipment in the lab unless given to them by UH staff/outreach ambassador</li> <li>No food or drink is to be consumed anywhere on site, except the dining room (S07).</li> <li>All hazardous materials to be locked away before group visit.</li> </ul>	1	4	4		
Safeguarding/Duty of care for under 18s	Visiting Children	Major/minor physical injuries, psychological/em otional harm, stress, PTSD.	3	4	12	Under no circumstances should unaccompanied children be the only audience members. Adult visitors must be present. Children under the age of 18 must be accompanied by a known-to-them adult. UH Staff and outreach ambassadors trained locally in safeguarding on a yearly basis. UH Staff and outreach ambassadors required to read and follow the updated version of Keeping children safe in education (part 1) (KCSIE)	1	4	4		

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						<ul> <li>Briefings and debriefings at the start and end of activities to ensure concerns about young people/students are raised, logged and dealt with.</li> <li>Disclosures reported to Mily Riley (DSO) or OPE Manager or Head/Deputy/Group Leader in the first instance via the record of concern form and then written up on UH safeguarding concern form, saved locally and then sent to Geri Ward, Dean of Students and Senior Safeguarding Officer (SSO).</li> <li>The SSO can be contacted on 01707284450 or via g.1.ward@herts.ac.uk.</li> <li>The necessary services i.e., Children's services, child's school will also be notified (if required).</li> </ul>					
Challenging behaviour Discrimination	Visitors	Major/minor				The adults accompanying under 18s are responsible for their behaviour. It is not the responsibility of UH staff.					
Harassment Violence	UH Staff Outreach Ambassadors	physical injuries, psychological/em otional harm, stress, PTSD.	2	4	8	Adults accompanying under 18s to child ratio increased where there are higher levels of learning, medical or personal needs and therefore higher risk of behaviour challenges.	1	4	4		

### Risk Assessment – Your Health and Safety Plan Page 8 of 17

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						<ul> <li>Briefings at the start of activities on behavioural expectations.</li> <li>Security can be called to attend if necessary (01707 285555). In an emergency, call 999.</li> <li>Where behaviour challenges pose a safety risk to themselves or other young people/students and staff, those involved will be sent home.</li> <li>All serious behaviour incidents reported to Mily Riley or OPE Manager. Recommendations made on protocol going forward. Follow up if necessary.</li> </ul>					
Lost Person	Visitors	Major/minor injuries, stress, PTSD, slips, trips and falls, stranger danger, death.	2	5	10	<ul> <li>Regular headcounts on activities by adults accompanying under 18s.</li> <li>UH staff walking at the front and back of the group when travelling from the BSB to the telescope domes.</li> <li>During safety briefing visitors are informed: <ul> <li>In the BSB the meeting point is the dining room (S07)</li> <li>At the telescopes, all visitors are shown the meeting point for if an alarm sound or if someone gets lost (the circle at the centre of the domes)</li> </ul> </li> </ul>	1	5	5		

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						Government recommended ratios of adult (this includes UH staff AND adults accompanying under 18s) to children will be adhered to and most of the time, exceeded: <b>4-8 years. 1 adult to 6 children</b> <b>9-12 years. 1 adult to 8 children</b> <b>13-18+. 1 adult to 10 children/students</b>					
Adverse weather conditions	Visitors UH Staff Outreach Ambassadors	Heat exhaustion, trips, falls, ill health effects, death	3	5	15	In extreme wet, wind or cold and extreme hot weather, i.e. where weather conditions are such that there may be risk to staff or students' health or safety, events will be cancelled. Please refer to RA - Observatory - Bayfordbury Observatory site - V1.0 for further risks and controls. Weather forecast should be checked regularly leading up to and during the event for any adverse change in the forecast that would cause a hazardous scenario. All advised to wear warm weather clothing during winter month private visits. During safety briefing visitors told: If they are feeling cold at the observatory to tell a member of staff who will escort them to the PMB (Patrick Moore Building).	1	5	5		

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Lift Use	Visitors UH Staff Outreach Ambassadors	Major/minor injuries, stress, PTSD, slips, trips and falls, death.	2	5	10	Only one person able to use the lift at a time. If there is a wheelchair user they must use the lift alone. If assistant is required to move the wheelchair user and operate the lift they must operate the lift from the outside and not enter the lift. In the event of fire EVAC chair must be used, training arranged by OPE Manager. The group visit leader will ideally have EVAC chair training.	1	5	5		
Manual Handling	UH Staff Outreach Ambassadors	Injuries from Lifting/Handling	2	4	8	All staff must have completed iHASCO manual handling training and follow specific RA advice for other activities that involve manual handling, e.g. small inflatable planetarium.	1	4	4		
Accidents / Slips / Trips / Falls / Stairs	Visitors UH Staff Outreach Ambassadors	III health effects, minor/major injuries – fractures, bruises, strains, cuts, death	2	5	10	All staff must complete iHasco health and safety and send certificate to OPE Manager. Emphasis is place on the person to ensure general housekeeping practices are maintained. If any infrastructure issues refer to UH Estates.	1	5	5		

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						No trailing cables, any temporary lines, e.g., extension leads etc, to be put in cable covers or taped/matted down.					
						Please refer to RA - Observatory - Bayfordbury Observatory site - V1.0 for further risks and controls.					
						For equipment inside of telescope domes additional risks, please refer to <u>RA - Observatory - Telescopes</u> <u>domes - V1.0.docx</u>					
						Primary aged children should be reminded to not touch anything before entering domes. Teachers and other staff of the attending groups are informed of their responsibility for maintain student adherence to the above.					
						In the event of a medical emergency, call 999 to request ambulance first then university emergency number contacted: 01707 285555.					
						<ul> <li>First aid kits can be found:</li> <li>Bayfordbury Science Building (BSB): <ul> <li>In the cupboard to the left of the foyer entrance</li> <li>At the back on the right of room S20 in the BSB</li> </ul> </li> </ul>					

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						<ul> <li>Patrick Moore Building (PMB): <ul> <li>On the desk on the right in the entrance</li> <li>On the cupboard on the left as you enter Y10 (PMB main room)</li> </ul> </li> <li>If a member of UH staff requires first aid, normal procedure should be followed, and their line manager should be notified.</li> <li>Visitors will be required to have a first aider, so in the first instance they should perform the first aid if required.</li> <li>Defibrillator is in the cupboard to left of the entrance to the BSB.</li> <li>Any First Aid kit contents that are used will be written down and Bayfordbury staff informed of use (they should notify first aiders if they are not one).</li> </ul>					
Illnesses/Medical conditions/Allergies	Visitors	Major/minor injuries, ill health, infection, allergic reactions, choking, medical emergencies, death	2	5	10	Relevant responsible adults must have access to visitors' allergy information, medical conditions, and emergency contacts at all times. This information should be stored electronically and readily available during the event.	1	5	5		

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						Individuals with known medical conditions must carry their necessary medications at all times, ensuring quick access in case of an emergency.					
						Prior to any activities, comprehensive briefings and debriefings will be conducted at the start and end of each session. This ensures that all staff and ambassadors are fully aware of any participants' medical needs and can respond effectively if necessary.					
						Before conducting activities involving allergens, such as flour, it is mandatory to know the allergens of all participating visitors. Visitors will be informed well in advance about potential allergens that will be used in activities. This advance notice allows visitors to provide information about their allergies, enabling us to offer suitable alternatives if needed.					
						For events where visitors are allowed to bring food onto the site, such as birthday parties, clear communication will be maintained. Organizers and attendees will be explicitly informed that they are solely responsible for managing allergen risks associated with the food they bring. They will be encouraged to inform all attendees about the ingredients in the food to ensure the safety of all participants.					

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IDENTIFY HAZARDS	WHO COULD BE HARMED & HOW		Risk Before Controls			EVALUATE THE RISK AND DECIDE ON CONTROLS		Risk After Controls		RECORD YOUR FINDINGS AND IMPLEMENT THEM		
Hazards associated with the activity/task/Event? What are the significant hazards with the potential to cause harm? Review the activity, location & people involved. Check equipment or manufacturer Instructions. Check UH, Sector or HSE guidance.	Who could be harmed? Who is at risk from harm: Students, Staff, Visitors and/or Contractors?	How could they be harmed? Types of injury: Major or Minor Injuries from Lifting/Handling, Slips/Trips/Falls or III Health Effects.	Likelihood	Consequence	Risk Rating	What controls are currently in place and what further action is necessary to reduce the risk? What is already in place to reduce the likelihood of harm and/or impact of harm occurring? What further actions or additional controls are required to reduce the remaining risk?	Likelihood	Consequence	Risk Rating:	Remaining Actions – Actions by Who and by When?	Actions Completed Completed (Y/N)	
Misbehaviour or improper use of equipment, including telescopes in daytime	Visitors UH Staff Outreach Ambassadors	Minor or Major Injuries	2	4	8	Emphasis is place on the person operating equipment to ensure general workplace behaviours is maintained. The adults accompanying under 18s are responsible for their behaviour. It is not the responsibility of UH staff. All students and staff are subject to following Health & Safety and Code of Conduct regulations. Telescope domes must not be opened during daytime visits as this can cause damage to equipment. Use of solar-filtered telescopes and sun spotters in the day time must refer to the following RAS: <u>RA-</u> <u>Observatory - Sunspotter - V1.0.docx</u> and <u>RA-</u> <u>Observatory - Visual use of solar telescopes - V1.0.docx</u>	1	4	4			
						Trained staff must set up sun spotters and solar- filtered telescopes and guide visitors on how to view safely without touching the equipment.						

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Hazard Assessment >				Risk Assessment and Risk Management >									
IDENTIFY HAZARDS	WHO COULD BE HARMED & HOW		Risk Before Controls			EVALUATE THE RISK AND DECIDE ON CONTROLS		Risk After Controls		RECORD YOUR FINDINGS AND IMPLEMENT THEM			
Hazards associated with the activity/task/Event? What are the significant hazards with the potential to cause harm? Review the activity, location & people involved. Check equipment or manufacturer Instructions. Check UH, Sector or HSE guidance.	Who could be harmed? Who is at risk from harm: Students, Staff, Visitors and/or Contractors?	How could they be harmed? Types of injury: Major or Minor Injuries from Lifting/Handling, Slips/Trips/Falls or III Health Effects.	Likelihood	Consequence	Risk Rating	What controls are currently in place and what further action is necessary to reduce the risk? What is already in place to reduce the likelihood of harm and/or impact of harm occurring? What further actions or additional controls are required to reduce the remaining risk?	Likelihood	Consequence	Risk Rating:	<b>Remaining Actions –</b> Actions by <b>Who</b> and by <b>When</b> ?	Actions Completed Completed (Y/N)		
						No other telescopes must be used during daytime hours as this can damage equipment.							
Improper use of stationary	Visitors	Minor Injuries	2	3	6	Young people provided with child-friendly scissors with blunt tips. Participants supervised while using scissors and instruct them on safe handling. Visitors are provided clear guidance on using stationary safely. Sharp or potentially dangerous items are stored securely.	1	3	3				
Accidental ingestion of materials	Visitors	Major of Minor Injuries from Choking	2	4	8	Ensure that small objects are handled under supervision. Clearly instruct participants not to put small components in their mouths. Keep small components out of reach of children who are not actively participating.	1	4	4				

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#### **Guidance Pages:**

Risk Assessment Guidance (here you will find useful tools to help you assess your risks and produce your health and safety plan):

				Consequence (Severi	ty)		
		1 Negligible/ Insignificant	2 Minor Impact/Injury	3 Moderate Impact/Injury	4 Major Impact/Injury	5 Severe Impact/Fatality	
	Risk Matrix	Minimal to no harm or impact/no absences.	Minor injury or ill health. Basic first-aid/no absences.	Injury or ill health requiring first- aid support or medical treatment. Short-term impact/absences.	Major injury or ill health requiring immediate attention, emergency services or transport to A&E. Long-term impact/absences (over 7 days).	Severe (life changing) injuries or fatalities. Multiple casualties. Emergency Services Required.	
	<b>5 Certain</b> This will happen imminently.	Medium 5	High 10	High 15	Very High 20	Very High 25	
	<ul> <li>4 Very Likely</li> <li>It's highly likely this <u>will</u> happen at some point.</li> <li>Has happened before in this location or elsewhere within UH – known incidents within the sector or industry.</li> </ul>	Low 4	Medium 8	High 12	High 16	Very High 20	
Likelihood	<ul> <li>3 Likely</li> <li>Will probably happen at some time.</li> <li>Known incidents within the sector or within industry.</li> </ul>	Low 3	Medium 6	Medium 9	High 12	High 15	
Li	<ul> <li>2 Unlikely</li> <li>This would be unlikely to happen but it's possible under certain circumstances.</li> <li>Rare incidents within the sector or within industry.</li> </ul>	Low 2	Low 4	Medium 6	Medium 8	High 10	
	<ol> <li>1 Remote (Rare)</li> <li>This would be improbable or rare.</li> <li>Incidents are unknown within the sector or within industry.</li> </ol>	Low 1	Low 2	Low 3	Low 4	Medium 5	

**Risk Matrix** – table adapted from IOSH and Nebosh training resources.

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#### **Guidance Pages:**

Risk Assessment Guidance (here you will find useful tools to help you assess your risks and produce your health and safety plan):

#### **Risk Level and Action Guide:**

Risk Level		Suggested Action(s) to Manage Risk
Low	1-4	No further risk controls should be required. Continue to monitor the work/activity. Observe that existing controls are being maintained/followed. Review if there are any changes in the level of risk e.g. following an incident or from a change of equipment/process.
Medium	5-9	Aim to reduce the risk where reasonably practicable (balancing the need to reduce the risk with the level of cost, time and effort required to achieve this). Continue to monitor the work/activity. Observe that existing controls are being maintained/followed. Review if there are any changes in the level of risk e.g. following an incident or from a change of equipment/process.
High	10-16	You must consider ways to reduce the risk further and/or change the work/activity so it can be done in a safer way. If the risk remains high, you will need to consider using the best available resources to achieve this. Continue to monitor the work/activity. Observe that existing controls are being maintained/followed. Review if there are any changes in the level of risk e.g. following an incident or from a change of equipment/process.
Very High	20-25	The work/activity must not start or continue until the risk has been reduced e.g. changing the work/activity so it can be done in a safer way. If it is not possible to reduce the risk, even with the best available resources, the work/activity must be prohibited.