| **Athlete Details** |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Athlete Name:** | **A N Other** |  | **Sport:**  | Athletics |
|  |  |  |  |
|  |  | **Discipline:**  | Wheelchair Racing (T33) |
|  |  |  |  |
| **Training Details** |  |  |  |
| **Training Venue:** | Cardiff Metropolitan University |  | **Venue Risk Assessment completed:** | Yes / No | **Completed by:** |  | **Date:** |  |
|  |  |  |  |  |  |  |
| **Athlete Readiness to Return** |  |  |  |  |  |  |  |
| **Athlete has:** | Opted in / Opted out |  | **Covid-19 Screening completed:**  | Yes / No | **Completed by:** |  | **Date:** |  |
|  |
| **Is/has athlete (been) Shielding:** | Yes / No |  | **Is athlete in a home with others who are Vulnerable or Extremely Vulnerable?** | Yes / No |
|  |
| **Does athlete require sign off to train by medical professional?** | Yes / No |  | **Has the athlete gained medical sign off to train?** | Yes / No |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Key:** | **S** | Severity |  | **L** | Likelihood |  | **R** | Risk |  | **RR** | RAG Rating |  | HH |  | H |  | MH |  | M |  | L |  | VL |  |
|  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hazard** | **Risk level before measures****(S x L = R)** | **Existing Control Measures** | **Athlete Health Conditions** | **Athlete Functional Ability**  | **Additional Implications** | **Additional Measures** | **To be actioned by** | **By when:** | **Risk level after measures****(S x L = R)** |
| **S** | **L** | **R** | **RR** | **S** | **L** | **R** | **RR** |
| ***What is the issue relevant to Covid-19 that needs to be considered?*** |  |  |  |  | ***What does WG guidance ask/require?*** | ***Are there any underlying health conditions?*** | ***What is the functional ability of the athlete and what equipment (if any) does the athlete use to increase functional ability?*** | ***What are the implications of the athlete’s functional ability or use of equipment regarding Covid-19*** | ***What additional measures need to be put in to place to reduce the risk to the athlete linked to the Hazard.*** | ***Who will action the interventions?*** | ***For when?*** |  |  |  |  |
| Catching / Spreading Covid-19 | 5 | 3 | 15 |  | * Good hand hygiene
* Physical distancing (2m)
* Reduce contact with others
* Cleaning of surfaces, facility and equipment
* Temperature checks
* Aware of what to do is symptomatic
 | * None
 | * Independent wheelchair user
 | * Touching of wheels/tyres in contact with surfaces
 | * Provision of hand sanitiser and anti-bacteria wipes
 | HJ |  | 5 | 1 | 5 |  |
| * Require accessible toilets
 | * Sterile and separate toilet facilities available
 | CMU Centre Staff |  |
| * Touching automatic opening on doors
 | * Accessible door left open for arrival and departure
 | CMU Centre Staff |  |
| * Space required to train
 | * Only one person on the track at a time
* Stagger training times
 | Coach & DSW PM |  |
| Travelling to training | 4 | 4 | 16 |  | * 5 mile travel radius
* Location of training facility to minimise travelling
* Advise against public transport
 | * None
 | * Own accessible vehicle
 | * Accessible parking space available with enough space
* Touching the pay-and-display machine
 | * Protect car parking space and tape off to prevent people walking too close as getting in or out of car
* No requirement to pay-and-display whilst training
 | CMU Centre Staff |  | 5 | 1 | 5 |  |
| Lack of Awareness | 5 | 5 | 25 |  | * Frequent communications
* Provision of Covid-19 training for athletes & coaches
 | * None
 |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hazard** | **Risk level before measures****(S x L = R)** | **Existing Control Measures** | **Athlete Health Conditions** | **Athlete Functional Ability**  | **Additional Implications** | **Additional Measures** | **To be actioned by** | **By when:** | **Risk level after measures****(S x L = R)** |
| **S** | **L** | **R** | **RR** | **S** | **L** | **R** | **RR** |
| Receiving coaching | 5 | 4 | 20 |  | * Provision of Covid-19 training for athletes & coaches
* Using PPE (?)
 | * None
 |  |  |  |  |  |  |  |  |  |

| **Risk Assessment discussed with athlete:** | Yes / No |  | **Athlete made aware of their responsibility?** | Yes / No |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  | **Recommended phase of return to training:** | Phase 1 / Phase 2 |
|  |  |  |  |  |
| **Risk Assessment Officer:** | Nathan Stephens |  | **Role:** | Senior Performance Pathway Officer, DSW |
|  |  |  |  |  |
| **Date of Assessment:** | 01.06.20 |  | **Date of Review:** | 21 days |  |  |