



Risk Assessment Form



		LIKELIHOOD				
		VERY UNLIKELY	UNLIKELY	LIKELY	HIGH LIKELY	ALMOST CERTAIN
SEVERITY	NEGLIGIBLE	LOW	LOW	LOW	LOW	LOW
	MINOR	LOW	LOW	LOW	MEDIUM	MEDIUM
	SERIOUS	LOW	MEDIUM	MEDIUM	MEDIUM	HIGH
	SEVERE	LOW	MEDIUM	MEDIUM	HIGH	HIGH
	VERY SEVERE	MEDIUM	MEDIUM	HIGH	HIGH	HIGH

Risk Assessment for (Activity/Process/Operation) **Education woodland based sessions - fire lighting and management A17.2**


Service	Country Parks	Team / Section	Country Parks		
Assessment Date	30/11/2022	Review Date	30/11/2023	Reference Number	A17.2

What are the hazards <i>(i.e. what can cause harm)</i>	Who might be harmed and how? <i>(e.g. employees, pupils, members of the public, etc. and the significant risk(s))?</i>	What existing control measures are in place to reduce / prevent the risk? <i>(i.e. what are you already doing?)</i>	Considering existing controls, what is the current risk level <i>(i.e. high, medium or low – use the matrix above)</i>	Further Action to be taken to control the risk? <i>(i.e. only record action/additional controls measures you are going to implement)</i>	Assigned to	Completed by whom & when
Camp fire	Any participant Heat Falling in fire, getting too close to fire, burns, clothing catching fire, smoke inhalation	Competent leaders Fire in designated area. Fire kept small. Water available to extinguish fire. Clean water available in a fire bucket to cool burns Spade and gauntlets carried. Burns kit carried Fire blanket carried Safe extinguishment of the fire	M			

<p>Fire Lighting with flint and steel</p>	<p>Any participant. Sparks leading burns</p>	<p>Activity carried out in designated area away from others. Floor clear and safe (not trip hazards/flamabe materials). Demonstration and safety talk before equipment handed out. Checks for loose clothing /hair near sparks Vigilant checks on behaviour and Handling of flint and steel Participants progress to lighting cotton wool on ranger instruction Equipment counted in and out Ratio 1:3</p>	<p>M</p>			
<p>Managing fire with children present</p>	<p>Any participant Falling in fire, getting too close to fire, burns, clothing catching fire, smoke inhalation</p>	<p>Fire pit area built to Forest School recommendations – fire in inner circle, seating circle acts as physical barrier, children to walk around seating circle, instructions given re: behaviour and safety and monitored at all times. Staff to carry mobile phone/radio Weather conditions monitored re adverse weather, eg high winds. Clothing checked – no loose cords/ribbons/hair/flammable materials. Competent leaders Water a Adult supervision at all times. Fire area walked around not across Loose clothing/hair secured. Means of extinguishing fire - water/blanket available. Gauntlets/gloves for managing fire – only designated staff</p>	<p>M</p>			

		manage fire as per fire risk assessment. available to extinguish fire Clean water available to cool burns, gauntlets to be carries				
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Name of Assessor	T Jones J Hughes	Signature	T Jones J Hughes
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Name of Manager responsible for activity / process	Marcus Ferguson	Signature	
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Risk Assessment Review Log

Only use this log to confirm that there have been no changes to the current assessment; otherwise an updated risk assessment must be done

Initial Review Date			
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Next Review Date	12 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	24 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	36 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	48 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Risk Assessment(s) for (Activity/Process/Operation)	
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This form can be used to record and demonstrate that the above risk assessment(s) has been provided to relevant employees (as below) to inform them of the risk assessment findings (i.e. the hazards, risks, and control measures associated with their work).

Name of Persons involved in the Activity/ Process/ Operation	Signature	Date