

Risk Assessment

Date:	22/05/2025
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Assessors Name:	Graeme Morgan	Reference Number:	RA10	Review Date:	22/05/2026
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Endorsed By:	Julie Pugh	Signature:	Online	Position:	Water Polo Coach	Date:	22/05/2025
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Description of assessment	Water Polo Training – Generic Risk Assessment
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Location Details	Freeman’s Quay Leisure Centre , small pool

Identified Hazards	Who may be affected	Risk Level before control measures S x L = R				Existing control measures	Additional Control measures required	To be actioned by	Completion date	Final Risk level S x L = R			
		S	L	R	RR					S	L	R	RR
Drowning (This can be primary drowning by traditional means or through secondary drowning following a submersion incident)	Swimmers participating in session Coaches / other staff and volunteers	4	5	20		- Raised risk of submersion due to “contact sport” game-play and training - Sessions are led by an appropriately qualified and experienced coach, deemed to be competent in line with NGB guidelines - All sessions with have either lifeguard cover (as at FQLC) which is in line with the PSOP for the facility, or lifeguards provided by DCA who are competent to work in that facility. Lifeguards	- Medical screening as appropriate with data sharing where risk level dictates – data sharing between coach and club secretary - Training groups to consist of similar sizes and abilities of players, appropriate to ability and physical size and strength	To be checked against best practice (Welfare Officer)		3	3	9	

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						poolside to ensure SSOW. (MHASAWR 1992) - Swimmers groups according to age and ability to prevent submersion incidents - Underwater activity (such as surface diving and initial phase from dive start) to be controlled by coach. - Water polo skills, drills and matches to be strictly controlled by coaches to prevent un-necessary submersion incidents										
Slips trips and falls	Swimmers Coaching staff and volunteers	4	4	16		- Coaching staff and volunteers to check poolside area prior to session - Equipment to be stored out of the way of walkways and high traffic areas - Pool staff to be requested to clean / squeegee floor if excess water is present - Coaches to control and monitor access and egress into the pool and changing rooms, intervening in cases of unsafe behaviour / running / throwing items etc.	Training groups to consist of similar sizes and abilities of players, appropriate to ability and physical size and strength				3	3	9			

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						Coaching and match equipment to be correctly used for intended purpose, and to be stored when out of use. Access to diving blocks to be controlled by coaching staff. Balls and goals to only be used in controlled sessions and to be put away at the end of each session or match – securely stored.										
Head Injury / Spinal Injury, Injury caused by collision	Swimmers Coaching staff should a severe fall take place	4	5	20		- Risk of injury from “contact sport” aspect or by balls thrown during training and game-play - Diving to only be undertaken by Coach / Teacher qualified to minimum of level 2 and competent in teaching of diving/starts. - Diving area (as defined by each Pool Operator) to be used. - Diving blocks only to be used by competent swimmers under direction of level 2 qualified and competent coaches/teachers - NPLQ staff are fully spinal injury trained.	- When DCA is providing staffing cover, NPLQ staff should be used where available. If not, then NRASTC staff must be used, but should be aware they are not trained in all spinal techniques – sessions to be appropriately curtailed to minimis risk. - Appropriate safety equipment to be used – head protection if required - Training groups to consist of similar sizes and abilities of players, appropriate to ability and physical size and strength. If mixed training is required, see	Staffing cover is supervised by WP Coach	Ongoing	3	3	9				

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						- Diving must have a minimum forward clearance of 7.6m - Collision from active game-play and in training. Raised risk of head and facial injury - Risk of head/facial injury from balls being thrown (as part of game or training) - Contact sport may involve face/arms etc being hit. Nosebleeds or dislocated shoulders can occur, in which case the player must get out of the pool and stop play. Medical attention may be required.	separate assessment below								
Medical conditions (such as asthma, epilepsy, diabetes)	Swimmers Coaching staff and volunteers	3	2	6		- Medical screening to take place - NPLQ / NRASTC staff providing safety cover are trained in first aid and recognition of medical conditions - Coach/parent/swimmer discussions to agree management of medical conditions where appropriate	*None at this time			2	2	4			

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Strains / Sprains	Swimmers	3	3	9		- Coaches to be aware of swimmer age and physical development/ability - Coaches to be appropriately qualified and competent in the delivery of stretches / mobilisation - To be completed in appropriate area which is safe from obstruction and with a good floor surface - Stretch and mobilisation to be directed by qualified and competent coach where required - Raised risk of strains and sprains in active game-play	- Exercises to be directed and led by a coach throughout – not to be supervised by other swimmers - When stretch is taking place, coach to monitor for effectiveness and also to eliminate unorthodox or dangerous techniques - No to be led by volunteer helpers who are not qualified and competent - Training groups to consist of similar sizes and abilities of players, appropriate to ability and physical size and strength. If mixed training is required, see separate assessment below	Lead Water Polo Coach for the session	Ongoing	2	3	6	
Dehydration	Swimmers Coaching staff and poolside volunteers	4	2	8		- Swimmers all to have water bottles as part of their standard kit - Coaches to bring water bottles - Water refills are available at all pools we use as a club for training and these are easily accessible.	None at this time			2	2	4	

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Entrapment / Entanglement	Swimmers	2	5	10		- NPLQ trained staff (or NRASTC) on duty for safety cover – both qualifications cover entrapment and entanglement - All pools used by DCA are adapted to minimise these risks - Moveable floor at FQLC only to be moved when pool is completely empty of swimmers and by trained staff only. - Swimmers to wear water polo head protection where required and for matches - Goals only to be put in by pool staff or under the direction of a coach.	None at this time			2	2	4	
Associated Specific Task – fitting and removing water polo goals and associated equipment	Coaches Volunteer Helpers	4	3	12		- Goals only be fitted by Leisure Centre Staff or DCA Coaches. Club Volunteer Helpers can do so under supervision - Goals to be checked on each use for defects. If issues are found, use spare goals if	None at this time			2	2	4	

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(falls / collision with poolside / trips and slipping / falling into water)						available and report damage to the pool operator - NPLQ and NRASTC staff are trained to deal with injuries that may come from goals and other training equipment. - Goals to be stored when out of use – either on trollies or away from the poolside.										
Associated Specific Task – use of audio visual training equipment and electronic scoreboards and timers	Coaches Volunteer Helpers	2	5	10		- Coaches to move equipment which is on appropriate trolley - Only to be used away from water and with appropriate electric cut out / trip switches - Not to be used directly on poolside	None at this time				1	5	5			
Associated Specific Task – use of pool training equipment (floats, balls etc) Risks of slips / trips and falls	Swimmers Coaches Volunteer Helpers	4	2	8		- Coaches to ensure training equipment is appropriately stored when not in use - Swimmers to ensure their own personal equipment is tidy and also serviceable	Training groups to consist of similar sizes and abilities of players, appropriate to ability and physical size and strength. If mixed training is required, see separate assessment below				2	2	4			

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Safeguarding Risks – Children and Vulnerable Adults	Any Club Member	2	4	8		- Coaches to be DBS checked and have participated in safeguarding training - Club has Mental Health First Aid capacity available - Club has an experienced and extremely knowledgeable Welfare Officer to oversee Safeguarding Risks - Club has access to independent Safeguarding advice through Swim England - Club has access to Safeguarding support if required from the Local Authority - Club has several coaches and committee members trained in disability awareness and disability swimming. - Club Policies to be aligned to Swim England Wave Power documentation – latest revision 2023.	- Specific / personal risk assessments to be created as and when needed to ensure safety of all club members - Committee Members to attend training regarding Equality Act 2010 if required - Coaches and Committee members to be aware of hidden disabilities and specific learning needs. - See below for mixed age group training			2	3	6	

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Mixed age group training (adults and youngsters) – size differential creating injury / submersion incidents	Club members participating in training sessions	4	4	16		- Mixed squad training only to take place under the guidance of Water Polo coaches and to be closely monitored at all times. - Lifeguard / NRASTC provision for all sessions to give additional monitoring and first aid provision should this be needed. - Coaches to be aware of swimmer age and physical development/ability	- Appropriate safety equipment to be used – head protection if required - If any doubt as to ability or stamina of participants, session must stop until this can be established - If mixed group training is taking place, coach to remind all participants at start of session of the specific risks associated with this			2	3	6	
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Risk Assessment

1–4 LOW	5–9 MEDIUM	10–15 HIGH	16–25 VERY HIGH
Continue with existing control, however monitor for changes. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires attention to reduce the rating as well as regular ongoing monitoring. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires immediate attention to bring the risk down to an acceptable level. Implement the control measures required, within the timescales given in the risk assessment and continue to review working practices to reduce the probability of an accident to the lowest possible level.	Stop immediately – the risk is too high. Take immediate action to reduce the risk to the lowest level possible.

Guidance Notes

SEVERITY	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
	LIKELIHOOD					

LIKELIHOOD	
5	Almost Certain – Very High Risk
4	Probable – High Risk
3	50/50 – Medium Risk
2	Improbable – Low Risk
1	Almost impossible – Low Risk

SEVERITY	
5	Fatality – Very High Risk
4	Severe incapacity – High Risk
3	Absent 3 weeks – Medium Risk
2	Absent less than 1 day – Low Risk
1	Insignificant – Low Risk

Risk Assessment

Additional comments:

- 1. This risk assessment needs to be discussed with employees before they operate the plant/equipment to ensure compliance with all control measures through their understanding
- 2. Employees/volunteers are to sign an acknowledgement sheet for their understanding of this risk assessment
- 3. The risk assessment is to be reviewed on an annual basis, or sooner if changes are made to the plant or working practices, or after an accident/near miss
- 4. This risk assessment must be approved by the nominated person for health and safety before being issued as a live document

Assessor 1 name:		Signature:		Date:	
Assessor 2 name:		Signature:		Date:	

Risk Assessment

I, the undersigned, have been fully briefed on this risk assessment and other control measures in place to reduce the risk of injury to the lowest possible level. I fully understand my duties as an employee, to follow the control measures in this risk assessment and the method statement.

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