Yellow Submarine Adults Risk Assessment Pack 2026-27

Assessments in this pack pertain to general risks associated with supporting adults at activities. This is not an exhaustive list and is under constant review and development.

Specific individuals, activities and venues will be subject to separate assessment.

Yellow Submarine recognises that risk is part of everyday life, and reasonable risk taking can have positive implications in an individual's social and emotional development. By providing opportunities for our members to manage their own risks in a controlled environment, they will learn vital life skills.

Whilst it is impossible ever to fully eliminate risk, it is possible to minimise and prepare for risk by preventative action. The following policy provides a structured approach to the management of risk.

Staff are expected to read and familiarise themselves with the following risk assessments. They must sign below to confirm they have understood the risks and will comply with the control measures implemented.

Staff are also responsible for reading any additional relevant risk assessments (individual, activity or venue) before supporting at any given activity.

Any breach of this will result in investigative and disciplinary procedure.

Hazard
Briefing Checklist
Behaviours of Concern
Food and Eating
Food Preparation
General Public
Lost or Separated
Medical Conditions and Allergies
Medication
Money
Minibuses

Online Activities
Outdoor Learning (including campfire)
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Riskier Activities (e.g. climbing/high ropes)
Seizure Activity
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Glossary

NB. The below specifically related to ADULTS SOCIAL DAY ACTIVITES, but may be a helpful guide for all activities

The following steps are taken before, during and after activities to reduce risk of incident at sessions.

Week Prior to Activity

Email all attendees with details of confirmed sessions

Pre-activity

Distribute t-shirts/lanyards to staff/volunteers as appropriate

Welcome any new starters - photograph ID and Basic Policies

Visual assessment of venue - is it fit and safe for use?

Display information posters if possible (Safeguarding; What to do in an Emergency; First Aiders; Our Commitments; Confidentiality)

Venue housekeeping:

- Fire exits and evacuation procedure
- Location of toilets
- Potential risks (e.g. stacked chairs/unlocked cupboards and doors)

Distribute grab sheets and refer to blue folders & allocate staff/volunteers to Members:

- Talk through key risks and noteworthy members
- Signpost to risk assessments
- Ensure staff/volunteers are confident with their pairings

Identify Safeguarding Lead and First Aiders; who cannot be left unaccompanied?

Reiterate safeguarding procedure and openness to hear concern

Explain plans and outcomes for the day, identifying any potentially risky activities and risk assessments where necessary

Mobile phone policy/usage during a session

Emphasis on listening; offering choice; enthusiasm; encouragement

Debrief

Seek feedback on activities/structure; any issues and improvements?

Individual member response to day; interactions; progression; challenges etc.

Any safeguarding concerns? Reiterate that anonymous feedback can be given via online feedback forms

Discuss any training needs

Take back grab sheets and take down posters if displayed

Support offered to staff/volunteers re. any incidents/disclosures

Risk Assessment Record: Adult Activities
Hazard: Behaviours of Concern

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member/Staff and Vols: Illness, injury or death Anxiety and emotional trauma Absconding from group/flight risk **Wider risk:** Negative impact on the group as a whole (including staff/vol team) Concerns of the general public	During the initial sign-up process YS should be made aware of any behavioural concerns. Full-time staff undergo: Understanding Autism Training; Understanding Challenging Behaviour Training and Safer Handling Training Information is sought from parents/carers and protocols or management plans obtained where possible. YS may seek permission to speak to other professionals or providers to seek insight as to how best to support member. An individual risk assessment may be implemented by YS. AL to identify member with challenging behaviours during pre-brief; any known behaviours will be highlighted on grab sheets and RAs shared with staff/vols. Those with specific protocols will be paired with staff/vols familiar with their support needs and CONFIDENT in doing so. Those with complex behavioural needs may be supported on a 1:1 basis by a Personal Assistant, funded by their own budget. YS operate a no restraint policy, unless members are at immediate risk of harming themselves or others (e.g. running into a road). Staff/vols will use	Risk Assessment reviewed annually or in response to need. Staff/vols are encouraged to be proactive in their training needs. If they feel that specific training would be beneficial they should request this from their line manager.

	de-escalation techniques and bespoke support plans to keep members safe.	

Risk Assessment Record: Adult Activities
Hazard: Food and Eating

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member/Staff and Vols: Choking Allergy/intolerance Dehydration/ hunger	During the initial sign up process YS should be made aware of any issues surrounding food or eating. Individuals/Parents/carers asked not to send any food that contains nuts. AL will remind staff and volunteers not to bring food containing nuts to activities. If a member brings products containing nuts to a session, the AL may ask that the product is not be opened/consumed at the session. AL to identify those with issues surrounding eating (e.g. choke risk; allergies; intolerances; Prader Willi Syndrome, PICA) during pre-brief. YS staff/vols to be made aware if member under their supervision have any risk associated with food; any issues surrounding food or eating will be highlighted on grab sheets. Allergy notices are held in activity files; First Aiders to be identified. When food is provided by YS, this will always be nut free. Staff/vols will serve food to promote portion control. Some members may need prompts to drink enough or support opening packages. These members are to be identified and offered additional support at mealtimes.	Risk Assessment reviewed annually or in response to need.

	If member doesn't have sufficient food/fluids then YS will provide and inform parents/carers where necessary. If this is a persistent problem then Safeguarding Lead to be notified. If an individual chooses not to eat, then alternatives should be offered (where possible) and negotiations take place. Under no circumstance should anyone be forced to eat meals. If this is a frequent occurrence then Safeguarding Lead to be made aware and support mechanisms implemented. Some members may feel more comfortable eating separately from the main group; staff/vols will facilitate this. If members wish to buy food, they will be supported by YS staff/vols if required. Staff and volunteers must ensure they eat and have enough fluids at sessions. If a member has not, ensure that parents/carers are informed at pick up.	

Risk Assessment Record: Adult Activities

Hazard: Food Preparation

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member/Staff and Vols: Burns, cuts and nicks Trips and slips Food poisoning/illness	Prior to starting any food preparation AL to check that all members of the group are fit and able to take part in the activity. All AL to complete '*Safe Food Handling Level 2*' training. If cooking during the session AL must brief staff/vols on how to reduce risk whilst using the kitchen. First Aiders, location of first aid kit and fire blanket to be identified. Members with food allergies to be identified and alternatives offered Staff/vols should explain to members how to stay safe when using the kitchen and its appliances. It is recommended that where possible, members carry out food preparation whilst sitting down at a table or similar. Members may not use any kitchen unsupervised and the number of people in a kitchen at any time must be limited. **Oven and Hob**	Risk Assessment reviewed annually or in response to need. Where possible, staff and volunteers who enjoy cooking and are competent in the kitchen should lead cookery activities.

	Pans should not be left on the hob unattended; pan handles are not to hang over the edge of the cooker If cooking items which present a higher risk, e.g. deep fried items, a separate risk assessment is to be implemented and shared. The oven/hob should be turned off immediately after use. Ensure that the kitchen is not overcrowded when opening the oven or using the hob. **Knives and utensils** Members should be involved in preparation of fruit and vegetables. If sharp knives are going to be used, then the following steps must be followed: • Members are not permitted to use knives unsupervised • Safe cutting techniques must be demonstrated • Hand on hand support to be offered if required Knives must not be left in sinks or on surfaces. They should be placed directly in the dishwasher after use, or washed immediately and put away. Knives used by the café (Oxford) are stored in a locked cupboard when Social Clubs are in session. AL must check the cupboard has been locked. If a member has a history of self-harm, an individual RA will be implemented. **Spillages**	

	Any spillages should be cleaned up immediately, using blue roll. A wet floor sign should be displayed and warnings issued. **Cleaning** Hot water signs to be displayed. Members should be encouraged to support with cleaning and washing up where appropriate. Where possible, disposable wipes to be used, as opposed to cloths. Safe, non-corrosive cleaning products to be used and stored safely. **Boiling water** Support/supervision may be necessary when members are preparing hot drinks.	

Risk Assessment Record: Adult Activities
Hazard: General Public

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member/Staff and Vols: Abuse: physical or verbal from the general public Abduction Anxiety and emotional trauma **Wider risk:** Negative impact on the group as a whole	YS believes that activities should take place in community venues and exposure to mainstream environments is crucial to development and challenging perceptions of disability. Members are supported on a minimum 1:5 basis and never left unsupported [please refer to how we reduce the risk of '*An adult becoming lost or separated from the group'*]. If staff/vols deem a member to be at risk from members of the general public, they will remove them from the situation immediately. If members are at immediate risk staff will call 101/999 depending on the nature of the situation. Members and staff/vols alike will be given the space to talk about the issue afterwards and appropriate support offered. Under no circumstances are staff/vols to engage in negative interactions with the public; their primary concerns are the wellbeing of members and their own safety.	Risk Assessment reviewed annually or in response to need.

Risk Assessment Record: Adult Activities

Hazard: Lost or Separated from the Group

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risks to members: Injury (e.g. slip, trip or fall) Suffering a seizure whilst unsupported Abuse: physical or verbal from the general public Abduction Anxiety and emotional trauma **Wider risk:** Negative impact on the group as a whole	During the initial sign up process any risk of absconding should be identified. AL to give clear briefing prior to activity, highlighting any potential flight risk/members known to wander. Staff/vols to be signposted to individual risk assessments. Meeting points and times specified by AL. All staff/vols to carry fully charged mobile phones at all times. AL will have a YS mobile containing contact details of all members families. AL to brief site/venue staff where appropriate, notifying them of members additional needs. Grab sheets, which contain an overview of member needs, are highlighted and given to the staff/vols responsible for supporting members during pre-brief. These will note those known to abscond/flight risks. Members are signed in at the beginning of each session, AL will then use this list as a register, to count members in and out of buildings/from minibuses etc.	Risk Assessment reviewed annually or in response to need.

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Impact relationship with family Damage to reputation of charity Staff/volunteer anxiety and stress	Members are supported on a ratio of 1:5 (unless specified); staff/vol is responsible for knowing whereabouts of nominated members. Members are introduced to allocated staff/vol and told what to do in the event they should become separated. NB. This is often site-specific. Regular headcounts to be undertaken. Well-structured groupings, responding to need/interests. If reallocation of members is necessary, all staff/vols to be made aware. A register of all members present to be held by AL. Activity files include all DOB, emergency contacts and known medical details. Members are encouraged to wear YS hats/wristbands (with emergency contact number) or YS t-shirt to make them more easily identifiable in crowds.	

Risk Assessment Record: Adult Activities

Hazard: Medical Conditions and Allergies

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Illness, injury or death Anxiety and emotional trauma **Wider risk:** Negative impact on the group as a whole Impact relationship with family Damage to reputation of charity	During the initial sign up process YS should be made aware of any pre-existing medical conditions or allergies. Information is sought from individuals/parents/carers, protocols obtained from GP (where appropriate), and clinical risk assessments completed by YS. Any known medical conditions or allergies will be highlighted on grab sheets. Where specific protocols are in place, full-time staff are trained by the Community Nursing team. If no specific protocol is in place then staff are to refer to the generic seizure protocol or generic allergy protocol. All staff and volunteers undergo Induction and Medical Awareness Training. Members/parents/carers are asked to keep YS up to date with changing needs. Members/parents/carers are prompted to update profile forms annually, via email, post or phone.	Risk Assessment reviewed annually or in response to need.

	When partaking in an activity which may trigger a seizure or medical episode, advice is sought from parents/carers prior to booking. YS reserve the right to not offer members an activity if they have concerns about their wellbeing. If someone arrives at a session clearly unwell then YS may make the decision to send them home; similarly, if an individual's health deteriorates at a session, they may be sent home. If members arrive at a session without their PRN/emergency medication (e.g. Buccal Midazolam) they will be sent home or their parent/carer asked to collect the medication asap. AL to identify individuals with known medical conditions or allergies during pre-brief. This will also be noted on the sign-in sheet; an allergy notice and list of those with epilepsy/seizure activity is held in activity files. Those with specific protocols in place are grouped with staff who have undergone training. Where trained staff are unavailable, regrettably members will not be offered a place on activity.	

Risk Assessment Record: Adult Activities
Hazard: Medication

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to members: Forgotten medication Overdose Refusal Missed dose Misuse of medication Medication used by wrong member Illness, injury or death **Wider risk:** Impact relationship with family	Medication, both regular and PRN must be signed in and out of each session, using the appropriate form. Independent members can look after their own medication, unless it is a CONTROLLED drug, in which case it will be stored appropriately by the AL. Where appropriate, medication will be carried by the AL. AL and other key staff complete Medication Administration training. Whilst on residential holiday, medication is stored in a lockable box. It is administered and recorded by the member or designated holiday leader/other appointed person. If AL has any concerns about medication brought to a session they must seek advice from parents/carers or Safeguarding Lead. Members may be sent home if they have the incorrect medication, or have forgotten rescue medication. AL must brief staff/vol team on members who require medication at sessions. For those who bring medication on a regular basis this is highlighted on the sign-in sheet.	Risk Assessment reviewed annually or in response to need.

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Damage to reputation of charity	Full-time staff are trained in individual protocols for members who use rescue medication. If a dose is missed or refused then parents/carers must be contacted and advice sought from GP. Any misuse of medication is to be reported to AL immediately and parents/carers contacted; Safeguarding Lead to be made aware; advice to be sought from GP or dial 999. An incident report must be completed. In the unlikely event that a member takes the wrong medication then emergency medical attention must be sought, parents/carers contacted, and Safeguarding Lead made aware. An incident report must be completed. Medication is to be handed back to parents/carers and signed out at the end of the session/holiday.	

Risk Assessment Record: Adult Activities
Hazard: Money

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Financial abuse Loss Anxiety and emotional trauma **Wider Risks:** Allegations made against staff	At the time of booking, AL offers guidance about whether spending money is required and suggests an appropriate amount. Individual risk assessments are in place for members known to struggle with money/purchasing items. Staff/vols to be signposted to these during briefing. AL or allocated staff member/vol to look after cash if requested by member/parent/carer. Members to keep money on their person if appropriate. Whilst on residential holiday, money being looked after by staff is stored in a lockable box. It is distributed by the designated holiday leader or other appointed person. Nominated staff/vol to support at till and offer guidance when spending money (if required). Receipts to be obtained when purchasing goods. If money goes missing or is lost during session, incident report/investigation to be completed.	Risk Assessment reviewed annually or in response to need.

	YS staff/vols must avoid lending own money; if member needs to borrow money AL (or holiday leader) will use YS debit card/petty cash.	

Risk Assessment Record: Adult Activities

Hazard: Minibuses

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to Member/Staff and Vols: Vehicle breakdown Injury or death sustained in a traffic accident Driver distracted by passenger, resulting in an incident Negative interactions between young people Anxiety caused by travelling in the minibus	***Drivers*** Only drivers aged over 21 who have held their licence for two years or more are eligible to drive minibuses. All drivers must submit copies of their driving licence and complete the online minibus test. New drivers must test drive vehicles to ensure they are competent/confident, before transporting members. Drivers must be aware of location, directions and parking arrangements before departure. ***Vehicles*** Yellow Submarine is responsible for ensuring that minibuses are serviced and MOT'd as required. Insurance details; contact numbers; policy details and vehicle specifications are held in booklets located in glove compartment. A first aid kit and emergency roadside kit is located in each minibus. For travel abroad, additional items are kept in the minibus as per national law.	Risk Assessment reviewed annually or in response to need. Where possible the AL should not be the driver. The AL should sit in the back of the bus to help support positive interactions. For larger trips coaches will be hired. As many staff/vols as possible/appropriate to complete the Oxfordshire County Council minibus test and obtain a permit.

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Travel sickness Lone working - Member at risk of abuse/staff member at risk of allegation **Wider risk:** Negative impact on the group as a whole Impact relationship with family Damage to reputation of charity Staff/volunteer anxiety and stress	Water and snacks are to be carried in the vehicle for long journeys. Wipes/disposal bags and hand sanitiser are to be available in case of sickness. Sat-Navs are available for use and must be appropriately mounted on the windscreen. If preferable YS mobile phones can be used if there is a charging cable and windscreen mount. ***Passengers*** Each minibus will have at least one designated First Aider who will be identified at the start of the journey. A clear briefing will be given by the AL to the staff/vol team before the journey, highlighting any medical needs or potential issues affecting members whilst travelling. Members should be reminded of their responsibilities whilst travelling: keep seatbelts fastened; do not distract the driver; do not touch the doors or locks. Staff and volunteers are responsible for ensuring that all passengers' seatbelts are fastened – the ultimate responsibility for this lies with the driver.	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	The law states: '*Anyone 14 and over not wearing a seat belt, is responsible for themselves*.' However, whilst attending YS activity, if a member were to refuse to wear a seatbelt, they would not be permitted to travel in the vehicle and their parent/carer contacted. A step is provided to help people access the vehicle; staff/vol support is offered where necessary. A staff member/volunteer must sit near the door to aid exiting the vehicle. Members who display challenging behaviour or are at risk of having a seizure must not sit directly behind or immediately next to the driver. Staff to allocate seats where necessary. Those with sensory issues are encouraged to bring ear defenders. Members are allowed to use iPads etc. during travel. However, conversation, games and sharing music should be actively encouraged. Individual risk assessments are in place for those who struggle with minibus travel and alternative arrangements made where possible (e.g. meet at venue). Members are permitted to sit in the front passenger seats – this is at the discretion of the AL and must be agreed by the driver.	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	Travel Where possible the meeting point for members should be separate to the minibuses; safety must be considered when collecting/dropping passengers off. Members and parents/carers must be made aware of travel time and meeting points in advance. Staff may only transport members in their cars if they hold business insurance.	

Risk Assessment Record: Short Breaks Activities

Hazard: Online Engagement

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to YP/Members/ Staff and Vols: Negative/inappropriate interactions between young people & Members Sharing of private information Engagement with inappropriate content e.g. 'fake news', explicit content Risk of exposure to online abuse and/or exploitation	Yellow Submarine is aware that access to the internet and engaging with social media is part of everyday life – and that members may engage with online activities differently which impacts their vulnerability. Is important for staff to remain aware of updates and online trends in order to best support members. All staff/vols will act in accordance with Yellow Submarine's e-safety policy to keep themselves and members safe. Reporting any concerns they have to Yellow Submarine's safeguarding lead. All staff and sign a code of conduct when starting their role at Yellow Submarine which outlines roles, boundaries and expectations. Yellow Submarine's online communication with members will be as open and transparent as possible; in most instances this will mean communicating in the public domain e.g. posting activities on Facebook, Instagram etc. Yellow Submarine recognises that members may interact with one another outside of Yellow Submarine's online activities and may use social media and other apps to keep in touch with one another outside of sessions; members who do not meet at sessions may meet virtually.	All Yellow Submarine full-time staff have specific Yellow Submarine Facebook profiles to maintain boundaries. As per the e-safety policy, these should be open to scrutiny with passwords shared. Social media guidelines are shared with all staff and volunteers during induction and are expected to be adhered to.

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Anxiety caused by online interactions Staff at risk of allegation **Wider risk:** Negative impact on the group as a whole Impact relationship with family Damage to reputation of charity Staff/volunteer anxiety and stress	In order to support appropriate interactions, Yellow Submarine model appropriate online interactions, share information on how to stay safe online and moderate public comments that are made on Yellow Submarine's profiles. When using applications like live streams staff can address comments made by members directly. Members are encouraged to share concerns with staff and staff will follow safeguarding procedures if necessary. Yellow Submarine uses social media as a forum where members can find help and support e.g. helplines and resources as well as signposting to other activities. When requested/as appropriate, Yellow Submarine will share information directly with families in order to help keep members safe online. Yellow Submarine recognises that the organisational profiles (e.g. Facebook, Twitter, etc.) are open to the public and have a wide following making them open to abuse. In order to keep staff, members and the organisation's reputation safe Yellow Submarine can moderate comments and manage followers – blocking anyone that posts inappropriately and reporting any issues.	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	When sharing public content e.g. live streams, photos, videos, staff members are aware of maintaining boundaries and privacy, as well as ensuring that permission is in place to share the content e.g. appropriate photo permission. When Yellow Submarine share live content, members are encouraged to leave comments and share photos/videos – this can be moderated by Yellow Submarine and addressed accordingly. When using Zoom to host online sessions the following procedures are in place – o Zoom meetings will only be hosted by full-time members of staff o Details of the session taking place can be shared on social media or via email to let members know what is happening o Members/families will have to contact Yellow Submarine directly for access to the session o Yellow Submarine will only share the meeting link to members, staff/vols known to the charity	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	○ The meeting will require a password; this will be shared when attendees are verified along with the meeting link/ID ○ The host will check all settings are correct in account and meeting setup ○ The host will familiarise themselves with how to mute, turn off video for, and permanently remove participants ○ During the session the 'waiting room' will be enabled so that the host can manage who attends ○ Disable file sharing and screen sharing or make this so that it is only functional for the host ○ Private messaging between attendees will be disabled, public chat will still be available ○ Participants cannot re-enter the meeting once they have been removed	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	○ When signing up to participate members will be made aware whether the meeting will be shared publicly e.g., live streamed on social media. If the event is 'Zoom-bombed': ○ Host to identify the attendee that's behaving inappropriately and remove from meeting ○ If it takes more than 30 seconds to remove the hacker, or there are too many to be removed, they will close the meeting ○ Set up new meeting; share the new details with attendees ○ If the event is hacked again, stop the event and message all attendees to say the event will be rescheduled.	

Risk Assessment Record: Short Breaks Activities
Hazard: Outdoor Learning

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to YP/Staff and Vols: Becoming lost or separated from the group Injury using equipment and tools (e.g. saws/axes/secateurs) Drowning Infection/stomach upset Burns or scalds Scratches/stings/trips and falls	AL leader to give a full briefing to staff/vol team about potential risks and planned outcomes for the day. Specific activities (e.g. trap building) may require a separate risk assessment to be shared in pre-brief. Staff given designated roles (e.g. fire marshal). Members are briefed on how to remain safe in the woods and boundaries identified [please refer to how we reduce the risk of '*becoming lost or separated from the group*']. Sites used for forest days are staffed. All staff and volunteers to carry fully charged mobile phones; radios (walkie-talkies) may be issued dependent on activity. ***Equipment and tools*** Specialist tools (e.g. axes) are supplied by qualified Forest School Teachers and site staff. Trained professionals must demonstrate how to use equipment safely. YS staff/vols are not to use equipment unless adequate training is provided; members use equipment under supervision.	Risk Assessment reviewed annually or in response to need. Where possible, YS will have external staff who are Forest School qualified, or who have outdoor skills experience.

	PPE to be used if appropriate ***Streams and boggy ground*** Members are advised to wear suitable clothing; YS has a supply of spare wellington boots, waterproof trousers, jackets and gloves if required. Members to be supervised at all times, particularly near water. Caution advised on wet or boggy ground. Everybody who comes in contact with streams or bogs must wash their hands thoroughly afterwards. ***Campfire*** The campfire must be overseen by a competent member of staff. This individual must remain near the campfire at all times - IT MUST NOT BE LEFT UNATTENDED. Fire resistant stove gloves are supplied for use by the fire marshal. Campfires are only to take place in designated areas. A large bucket/pan of water is to be on hand at all times, alongside a first aid kit. All members are to be briefed on staying safe near the fire: • Sit down • Stay a designated distance away, unless invited to approach the fire to toast a marshmallow or similar	

	• Stay low when near the fire • No running allowed within the fire circle *Any person not adhering to these rules will be moved away from the campfire.* If using long sticks or toasting forks, staff/vols must demonstrate safe use. All foods to be cooked thoroughly and checked for doneness. Members/staff/vols to wash hands before handling/eating food. AL to ensure supply of wet-wipes and sanitiser. The responsible member of staff must ensure that the fire is out before leaving the site. ***Woodland Environment*** YS staff to check site for hazards before using e.g., branches at risk of falling/large patches of nettles. Members to be shown bramble and nettles, warned of scratches and stings and asked to avoid touching these plants. [When walking] Staff/volunteer at front must notify group of low hanging branches/obstructions.	

	Toilets The sites that we use have plumbed toilets and hand washing sinks are available.	

Risk Assessment Record: Adult Activities
Hazard: Overnight Stays

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to members: Abuse – physical, sexual, financial, neglect Injury Anxiety **Risk to Staff and Vols:** Allegations Injury Anxiety	Before a holiday members/parents/carers complete a booking form which includes information about evening routine, including sleep pattern/medication/personal care. Every holiday has a designated leader (not always an Activity Leader) who is responsible for overseeing the trip and wellbeing of members/staff and volunteers. Each holiday has its specific risks, which will be assessed separately and shared with the staff/volunteer team. Prior to the holiday, all staff/vols attending are clearly briefed on the needs of the members. At the start of the holiday there is a 'house/camp meeting', where ground rules are established, including: • Privacy/knocking on doors • Expectations with regards to bedtime/waking time/bathing or showering • Kindness and supportiveness • Sharing worries or concerns with staff/vols	Risk Assessment reviewed annually or in response to need. Where possible YS will visit new holiday destinations prior to using them.

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	Those with nocturnal epilepsy will be individually risk assessed and safety measures implemented. Those known to have seizures will be individually risk assessed with regards to bathing/showering. Staff to be aware of '*Medication*', '*Money*' and '*Personal Care and Toileting'* risk assessments. Medication and spending money is logged/signed for at drop off and collection. Usually members will share a room or dorm with members of the same sex. If couples holiday together they may share a bedroom, unless there are concerns around consent etc. This will be discussed in advance and risk assessed if necessary. Members names/pictures are on bedroom doors/bunk beds. Staff/vols are in rooms nearby and members aware where to find them, or get in contact Lights are left on in communal areas at night time if required. At night time staff are responsible for checking all doors and windows. Door keys are kept in a designated location (site dependent).	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	Posters are displayed with health and safety information, including details of Safeguarding Lead and what to do in an emergency. Hot water, hot surfaces and fire exit signs are displayed. Staff are expected to make themselves familiar with the location of first aid kits; fire extinguishers; fire exits; fire blankets. Members are encouraged to bring something familiar from home (e.g. teddy) A folder containing the following is held by the holiday leader: • Booking forms • Profiles • Needs summaries • Emergency contacts • Risk assessments and protocols • Details of the nearest Accident and Emergency and Minor Injury Unit • Post codes and travel times to all destinations • Medication administrations records • Petty cash log Members are encouraged to keep in touch with their parents; full-time staff have work mobiles for this purpose if members do not have their own	

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
	phones. Holiday leader is responsible for keeping in touch with families and sharing pictures. At the end of the holiday staff will hand over to parents/carers; including any accident or incident forms Members are asked to give feedback at the end of the holiday.	

Risk Assessment Record: Adult Activities

Hazard: Personal Care and Toileting

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Abuse – physical or sexual Anxiety and emotional trauma Loss of dignity **Wider risk:** Allegations made against staff	During the initial assessment, any personal care needs to be identified by parents/carers. This may include: using the toilet; changing or dressing when swimming; bathing or showering (during residential trips) or support required when menstruating (referred to as SWM). Any personal care needs highlighted on grab sheets, using sensitive language. Only YS staff are to complete personal care, volunteers must seek assistance. This must be reiterated by AL in the shift brief. Only staff who feel comfortable/competent completing personal care should do so and members allocated accordingly. In the unlikely event that this is not possible, staff should call the Safeguarding Lead to seek advice. The member's needs must remain the priority and their dignity maintained during this time. They should be taken to a private space and offered reassurance. Where possible, personal care is to be completed by someone of the same gender. When this is not possible, it is accepted that cross gender care may be given – providing all procedures to reduce risk are adhered to.	Risk Assessment reviewed annually or in response to need.

	Those known to have incidences of diurnal enuresis (day time wetting) are encouraged to bring spare clothing. If personal care is required, the member of staff completing the care must notify another, so their whereabouts are known. If the individual completing personal care is supporting other members, they must be handed over to another. Disabled (unisex) toilets should be used when available. Village changing should be used where possible, as opposed to single sex changing rooms. Wipes, gloves (vinyl rather than Latex) and antibacterial gel must be available and used as required. Members (where possible) should give consent for personal care to be given. Members should be encouraged to be as self-sufficient as possible. Reminders are to be offered to individuals about appropriate behaviour in changing rooms etc. Whilst completing personal care, upmost privacy should be offered. Doors may be left slightly ajar, providing the member is screened.	

	Letting the members know what is happening is good practice; explain what is happening and how you are supporting them – whilst being aware that privacy/dignity is paramount. If the personal care offered is noteworthy or unusual for the individual, a full handover to be given to parents/carers. This must also be shared with the Safeguarding Lead.	

Risk Assessment Record: Adult Activities

Hazard: Riskier activities (e.g. climbing/high ropes)

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Accident/injury or death Suffering a seizure Anxiety and emotional trauma	During the initial assessment, any medical conditions (e.g. Atlantoaxial Instability or Adrenaline Deficiency) which may be affected by physical activity or the increased level of risk associated, to be identified by parents/carers. When a trip involves a higher risk activity, discussion is to be had with families prior to booking. If the risk is deemed too high, then YS may not offer member a place on the activity. An additional activity specific risk assessment may be implemented by YS. AL to seek advice from the venue and ask for copies of their own risk assessments. These should be held in the activity file. Where these are lengthy, AL should highlight salient points and key information be shared during pre-brief. AL must ensure that any consent forms required by the venue are completed by parents/carers. YS must adhere to health and safety guidelines specified by the venue e.g. height restrictions. First Aiders and first aid point at venue to be identified.	Risk Assessment reviewed annually or in response to need.

	Specific activities such as climbing; sailing or zip wiring must be overseen by trained coaches/instructors. Coaches/instructors must not be left unsupervised with members. YS encourage members to challenge themselves and participate in new experiences, but respect an individual's choice not to engage in an activity. This may necessitate reallocation of staff/vols/YP which the AL is responsible for overseeing. Staff/volunteers should only participate in activities they feel comfortable with; this should be taken into account when allocating pairings.	

Risk Assessment Record: Adult Activities
Hazard: Seizure Activity

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to members: Injury/death whilst suffering a seizure Loss of dignity	Please refer to Generic Seizure Protocol for details of how to keep members safe whilst experiencing a seizure. During the initial sign up process YS should be made aware of any seizure activity or diagnosis of epilepsy. Information is sought from parents/carers, protocols obtained from GP (where appropriate) and clinical risk assessments completed by YS. All staff and volunteers undergo Induction and Medical Awareness Training, which includes seizure awareness. If members arrive at a session without their PRN medication (e.g. Buccal Midazolam) they will be sent home, or their parent/carer asked to collect the medication asap. A list of those with epilepsy/seizure activity is held in the activity files. AL to identify YP with known seizure activity during pre-brief. This will also be noted on the sign-in sheet and grab sheets. Those with specific protocols in place are grouped with staff who have undergone training.	Risk Assessment reviewed annually or in response to need.

	Where trained staff are unavailable, regrettably members will not be offered a place on activity. When travelling in the minibus, those known to have seizure activity must not be seated behind or immediately next to the driver's seat, as per *'Minibuses' Risk Assessment*. Dependent on individual need, members who suffer seizure activity may be supported 1:1 whilst swimming. If on an overnight stay, individual plans will be implemented around sleeping and bathing routines. Staff/vols to supervise members carefully when completing a task which could result in injury (e.g. using a knife/riding a push bike). 1:1 support implemented during risky activities if appropriate/necessary. An incident report must be completed and shared with parents/carers should anyone experience a seizure whilst in YS care.	

Risk Assessment Record: Adult Activities
Hazard: Swimming

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Sexual/physical abuse whilst changing Risk of drowning or injury Inappropriate behaviour in pool **Wider risk** General public becoming frustrated with YS swimmers	During briefing the AL must identify those members who have individual risk assessments in place relating to swimming or sexualised behaviours. During briefing the AL must also identify those members who are known non-swimmers. Members/staff/vols must not swim if they are ill or injured. Appropriate staffing levels must be in place – otherwise swimming must be cancelled. Village Changing to be used where possible - please refer to '*Personal care/toileting*' risk assessment for guidelines surrounding support with changing. Staff and volunteers must have an awareness of which changing rooms members are in and remain nearby/within earshot Staff/vols to speak to members about safe behaviour in the pool, this may include: personal space; physical contact; ducking and diving; staying within depth; letting staff/vols know if they need to leave the pool or use the toilet.	Risk Assessment reviewed annually or in response to need.

	Physical contact between staff/vols and members to be kept to a minimum in the pool, unless required for safety reasons. Members and staff/vols must be mindful of other swimmers using the pool and behave respectfully. Members to be counted in and out of the pool and regular headcounts undertaken. Pool safety guidelines to be adhered to. At least one member of YS staff/vol to remain poolside. Members with epilepsy/additional health needs to have 1:1 support whilst in the pool. Non-swimmers to remain within their depth. Leisure centres to provide an adequate number of qualified lifeguards – otherwise swimming must be cancelled. Members are not to use giant inflatables unless they are known to be competent swimmers.	

Risk Assessment Record: Adult Activities

Hazard: Weather

Who might be harmed and how?	Procedures in place to reduce risk	Is there more we can do to manage this risk?
Risk to member: Dehydration Sunburn Ill health Slips, trips and falls	AL to be mindful of forecast and plans to be revised if adverse weather is expected. AL to highlight any risks associated with the weather (i.e. extreme temperatures or snow) during the pre-brief. Members with allergies to sun cream to be identified. This will be noted on the grab sheets, sign-in sheet and allergy notice. If members arrive at a session unsuitably dressed, YS will do everything in their power to support them; this may mean lending them or purchasing items – sending them home would be a last resort. Sun cream (sensitive/high SPF), gloves (vinyl rather than latex) and wipes to be available and used as required. Members are asked to bring refillable drinks bottles to activities. Frequent drink breaks to be offered/encouraged. Extra water to be kept in the minibus or brought to activities by YS.	Risk Assessment reviewed annually or in response to need.

	Members to be observed closely. If exhibiting signs of overexertion (sweating, shortness of breath etc.), members to be advised to rest/hydrate/use inhaler if applicable. Staff/vols to support those with mobility issues if it is slippery underfoot. Activities may be cancelled if YS feels it is unsafe to operate or for members/staff/vols to travel to sessions.	

Glossary of terms and abbreviations

YS	Yellow Submarine Charity
AL	Activity Leader, full-time staff member responsible for the leading of the session. This staff member has undergone generalist/specialist safeguarding training, First Aid and Medication Awareness training. They have full DBS clearance.
YP	Young people, aged 11-18 with additional needs
Staff	Staff employed on a full/part time paid basis. These staff members have received generalist/specialist safeguarding training, First Aid and Medication Awareness training. They all have full DBS clearance. This term also encompasses sessional staff, unless the term 'full time' precedes it.
Vol/s	Persons who give their time voluntarily to YS, who have undergone the Yellow Submarine recruitment process
Safeguarding Lead	Kate Sankey, the person who has responsibility for ensuring Yellow Submarine's safeguarding policy is adhered to and young people are kept safe
Members	Adults (aged 18 or above) with additional needs who access Yellow Submarine