## RISK ASSESSMENT FOR UCC ALUMNI EVENTS AND ACTIVITIES

## organised by Chapters, Representatives, Clubs, Groups and other Volunteers

## Volunteer-Led UCC Alumni Events – Risk Assessment

A risk assessment must be submitted to the Advancement Office in advance of all events and activities organised by volunteers.

Please email a completed copy to [alumni@ucc.ie](mailto:alumni@ucc.ie)

## EVENT DETAILS

Alumni Chapter/Club/Group/Association/International Representative Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event/Activity Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Detailed Description of Event/Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose of Event/Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event/Activity Location/Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event/Activity Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Event/Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_ End Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Number of Attendees: \_\_\_\_\_\_\_\_\_\_

Fundraising (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Method: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVENT ORGANISERS

**Event Manager / Coordinator**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Event Safety Coordinator**  
Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Committee Organiser**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Committee Organiser**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Committee Organiser**  
Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Committee Organiser**  
Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the event is being run by another party or company, provide details here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CONTINGENCY

Contingency plan in event of weather or other unforeseen circumstances:

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## EMERGENCY PROCEDURES AND WELFARE REQUIREMENTS

Emergency procedure at location (including assembly point and method for accounting for all personnel):

Emergency Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Services/Ambulance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Assistance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Police: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fire Brigade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## VENUE Will this event/activity be held in a commercial venue such as a hotel, restaurant, bar, cinema, theatre, etc.? · If yes, have you confirmed that the venue has public liability insurance? · If this event will not be held in a commercial venue, please provide all requested details below.

ADDITIONAL DETAILS  
If applicable, please complete the following details. If not applicable for this event, indicate N/A.  
  
First Aid Facilities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Name and number of First aider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
First aid box location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Welfare arrangements (bathrooms/food/showers): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Segregation of Activity (Barriers/Stewards): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Transport To/From Event (Name, Email & Telephone of Transport Provider): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Waste Management (Extra Bins/Waste Disposal Method/Etc): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Traffic Management Plan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Power Access Required (other than domestic plug): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Extra Security Requirement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Any Additional Constructions (Tents/Stands/Etc): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Table 1 – Risk Impact (Consequence) [5-step scale]  
Risk owners assess the severity of each risk using a five-point scale, with insignificant risk impacts rated 1 and severe risk impacts rated 5. (An example of a health and safety rating is provided opposite.) The risk categories to consider   
and identify when organising events and activities are:

· Health and Safety / Risk of Injury  
· Medical Assistance Requirements  
· Food and Beverage Safety  
· Crowd Management  
· Aggressive Behaviour  
· Reputation  
· Financial Management  
· Contractual, Legal and Insurance Requirements  
· Communications (Contingency Planning, Cancellation Planning)  
· Transport and Traffic Management (if applicable)  
· Event Equipment (if applicable)  
· Children Attending or Participating (if applicable)

E.g. Taking health and safety as an example of a risk category, impact is a measure of how serious an injury or health effect could be (see below).  
Risk Impact (Consequence) Score:

|  |  |
| --- | --- |
| RATING | |
| **Severe** (5) | Fatality or multiple fatalities |
| **Major** (4) | Major injury, resulting in disability |
| **Moderate** (3) | Injury requires doctor or hospital attendance |
| **Minor** (2) | Minor injury, first aid required |
| **Insignificant** (1) | Minor injury, first aid not required |

Table 2 – Risk Likelihood [5-step scale]  
Risk owners assess the likelihood of each risk using the five-point scale which is shown in outline below.  
The risks should be assessed by factoring in the controls which are already in place to mitigate each risk.

|  |  |  |
| --- | --- | --- |
| RATING | SCORE | THREAT |
| Almost Certain | 5 | Expected to occur or a common occurrence 80% or above chance of occurrence |
| Likely | 4 | Will probably occur in most circumstances 70-79% or above chance of occurrence |
| Possible | 3 | Might occur at some point 40-69% or above chance of occurrence |
| Unlikely | 2 | Small chance of occurring at some point 10-39% or above chance of occurrence |
| Rare | 1 | Only in exceptional circumstance Less than 10% chance of occurrence |

## Table 3 – Risk Matrix [5x5 model]

• Multiplying risk impact by risk likelihood provides an overall risk rating or risk score.  
• Which risks pose the greatest threat?  
• Which risks to prioritise?  
• Which risks to resource or identify additional mitigation measures/further actions for?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **I M P A C T** | 5 | Severe | Low | Medium | High | Extreme | Extreme |
| 4 | Major | Low | Medium | Medium | High | Extreme |
| 3 | Moderate | Low | Low | Medium | Medium | High |
| 2 | Minor | Insignificant | Low | Low | Medium | Medium |
| 1 | Insignificant | Insignificant | Insignificant | Low | Low | Low |
|  | | Less than 10% chance of occurrence | 10-39% chance of occurrence at some time | 40-69% chance of occurrence at some time | 70-79% chance of occurrence at some time | 80% or above chance of occurrence at some time |
|  | | **Rare (1)** | **Unlikely (2)** | **Possible (3)** | **Likely (4)** | **Almost Certain (5)** |
| **LIKELIHOOD** | | | | | | |

|  |
| --- |
| Risk Matrix Legend |
| Low |
| 1 – 7.99 |
| Medium |
| 8 – 14.99 |
| High |
| 15 – 19.99 |
| Extreme |
| 20 - 25 |

## RISK ANALYSIS

On the next page, please list all potential risks associated with the planned event/activity in the risk assessment table. (Please see Tables 1, 2, 3 and 4 above for guidance on assessing risk impact (consequence) and risk likelihood and then calculating a risk profile score.)

**Please submit this document to the Advancement Office on alumni@ucc.ie.**

**Small Events** (i.e. fewer than 30 attendees): Risk assessments must be submitted by volunteers to the Advancement Office a minimum of 4 weeks in advance of small events.

**Large Events** (i.e. more than 30 attendees): Risk assessments must be submitted by volunteers to the Advancement Office a minimum of 8 weeks in advance of larger events.

**Decision** to be given to volunteers by the Advancement Office within 5 working days.

## RISK ASSESMENT TABLE

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Risk Description** | **Current Controls**  *(What measures are in place to reduce risk?)* | **Risk Impact (Consequence)** *Score 1 to 5*  ***(See Table 1)*** | **Risk Likelihood** *Score 1 to 5*  ***(See Table 2)*** | **Risk Profile Score**  *Risk Impact (Consequence) x Risk Likelihood* | **Risk Rating**  *Red, Amber, Yellow, Green*  ***(See Table 3)*** | **Further Actions**  *(What else can be done to reduce risk?)* | **Risk Owner** | **Decision** |
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## COMMUNICATION AND DECLARATION:

· I/We hereby confirm that we have informed the [Advancement Office](https://www.ucc.ie/en/advancement/) of our Event/Activity plan and the associated risks: Yes / No  
  
· I/We hereby confirm that all activity will be undertaken in full accordance with University College Cork’s Health and Safety policies –   
 <https://www.ucc.ie/en/policiesandprocedures/healthandsafety/>  
  
· I/We hereby confirm that all incidents and near misses will be reported to the [Advancement Office](https://www.ucc.ie/en/advancement/) at University College Cork – [alumni@ucc.ie](file:///C:\Users\shoran\Downloads\alumni@ucc.ie).

PREPARED BY:

Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_