# Clarty Commando's Outdoor adventure, Risk Assessment

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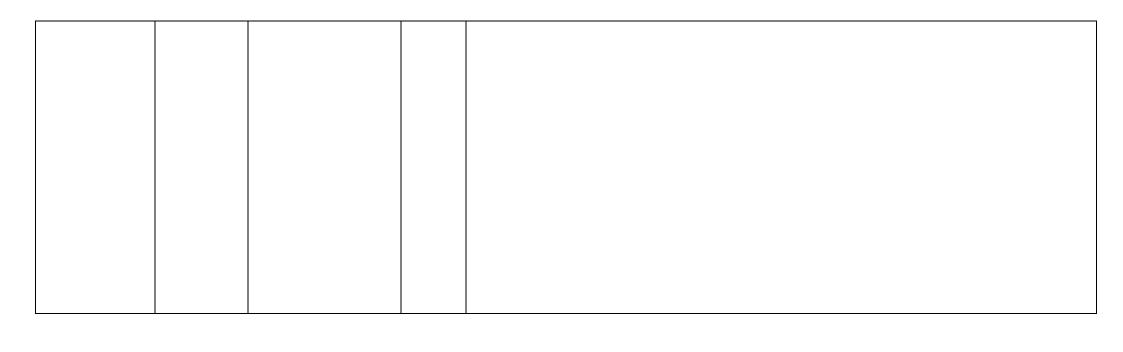


Hazard/Activity	Persons at risk	Risk	Risk Level (Hi/Med/L ow)	Control Measures
General health	Staff & clients.	Person becoming ill whilst undertaking activity.  Covid 19 symptoms  Person having allergic response.  Intoxication, use of nonprescription/recreational drugs.  Personal hygiene	High	Participants to complete medical declaration. Any relevant medical condition to be brought to the instructor's attention, use of inhaler, epi pen, angina spray.  • Any person displaying Covid 19 symptoms prior to the session must not attend. Any person who develops Covid 19 symptoms post session must inform Clarty Commandos immediately, in turn we will implement our track & trace procedures, see operating procedures. Site emergency procedure to be located in central position and readily available to all.  Consumption of alcohol prior to or during any activity is not permitted.  Taking of non-prescription/recreational drugs is not permitted at any time.  Hands to be washed after use of toilet or participation in manual activities and before eating and drinking.  Washing and hand sanitation facilities are provided, participants to wash & sanitise hands in accordance with government covid 19 guidelines  All cuts and grazes to be cleaned and covered promptly Client fitness Clients.  Over exertion whilst undertaking activity.
Client fitness	Clients.	Over exertion whilst undertaking activity	Low	<ul> <li>Participants to be aware of own limitations whilst undertaking strenuous activity.</li> <li>Instructors to be aware and vigilant at all times.</li> <li>Instructors will give clear briefings of the lifting process if required.</li> </ul>

Manual handling shelter building		Injury to back through poor lifting procedure	Low	<ul> <li>Minimum of two people involved in lifting heavy items</li> <li>All heavy items to be carried by team lift</li> <li>Ensure all lifting activity closely supervised</li> <li>Minimise requirement for heavy lifting through planning and preparation.</li> <li>Briefing to be given prior to activity taking place.</li> <li>Staff to check shelter robustness to avoid collapse</li> </ul>
Slips, trips & falls	Staff Clients	Tripping over equipment or guy ropes whilst moving around site  Tripping over natural features whilst moving around site.  Slipping due to seasonal ground conditions i.e. leaves, mud, ice etc.		Site inspected by event leader to identify and mark inherent hazards toxic or poisonous plant areas to be cordoned off in advance of the event. With particular focus on camp fires.  Information and safety brief prior to commencement of event  Appropriate footwear to be worn at all times.  Particular attention paid to ground and weather conditions on day of event.  Equipment not to be left lying around but kept within contained area and cleared away after activities.  Activities to be undertaken where risks from slips, trips or falls are reduced  Instructors to be aware and vigilant at all times.

Fire	Staff Clients	Smoke inhalation	Low	<ul> <li>Easy access to water to extinguish fire</li> <li>Burns kit easily accessible,</li> <li>fire retardant gloves, tongs,</li> <li>fire blanket and first aid kit.</li> <li>All participants to be briefed on how to approach &amp; move around the main camp fire safety</li> <li>Instructors ONLY to maintain the main Campfire</li> <li>Participants must implement the correct fire alert position, which is to kneel with both knees on the ground safety behind the fire boundary, leaving a length of an arm between the main flame &amp; the individual.</li> <li>Children must never be left to work alone with, or near any fire, adult support is mandatory</li> <li>No more than THREE participants &amp; adult support to work with, or at any fire, this includes the main Campfire.</li> <li>Seating must be two meters from the fire boundary &amp; secured long bench type</li> <li>Maneuvering around fire, participants must move slowly &amp; carefully around all fire, at a distance of two meters.</li> <li>All fires to be kept to a minimum size, sticks &amp; twigs no bigger or thicker than the participants fingers</li> </ul>
				All fires to be kept to a minimum size, sticks & twigs no bigger or thicker than the participants fingers  All fires to be lit in prepared designated areas sufficiently far from vegetation and other flammable materials.

				<ul> <li>All participants to be advised to wear low melt hazard clothing (i.e. wool, cotton) hair tied back prior to attendance</li> <li>Dry wood to be prepared and stored prior to use to reduce potential for smoke generation.</li> <li>Use open-air location or fires within buildings to be vented via chimney.</li> <li>Instructors to be aware and vigilant at all times; brief of assistants/volunteers about their role and fire routines/ rituals. Fire to be continuously supervision by a specific person.</li> <li>All assistants/ instructors/ volunteers to have read and agreed to the policy handbook.</li> </ul>
Disease Allergies Illnesses	Staff Clients	Covid 19  Lyme disease (see appendix 1)  Weils disease - Leptospirosis (see appendix 1)  Animals and Insects	High	<ul> <li>All participants must be made aware of our Covid 19 guidelines, the relevance of hand washing, social distancing &amp; the use of PPE, all hand washing stations are clearly marked, along with signage reminding EVERYONE to adhere to social distancing, participants will be issued an individual pre sanitised tool box which they'll use throughout the session, (after care, tools are sanitised &amp; are set aside for 72 hours, using our box rotation system).</li> <li>Participants to be made aware of the risk of Lyme disease through participation in Bushcraft activities.</li> <li>Participants to carry out body check for ticks.</li> <li>Participants to be aware of symptoms arising from tick bite.</li> <li>Participants to ensure all cuts and grazes to be cleaned and covered promptly.</li> <li>Staff must be aware of any allergies to bites or stings &amp; the use of epi pen.</li> <li>All epi pen inhaler angina spray users must be identified</li> <li>All food waste to be stored in appropriate bins for disposal off-site.</li> <li>Waste water arising to be disposed of well away from camp and cooking area.</li> <li>Food to be kept covered and stored securely to prevent contamination from insects or animals</li> </ul>



Cooking	Staff Clients	Food hygiene	Low	Good hygiene practice at all times. Lead instructor has a Level 3 in Campfire Cooking.
	Olicitis		inica	Use of antibacterial wipes and cleaning fluids in cleaning of surfaces, knives and cooking equipment
				Ensure washing facilities are changed or refreshed frequently.
		Food poisoning		Stainless steel/plastic cooking utensils to be provided to reduce risk of infection
		1 ood polociiiig		Ensure all meat is cooked thoroughly
				Uncooked meat to be stored for minimum period possible, dependent upon weather conditions.
				100% identification required for all wild gathered food before consumption.
		Burns and scalds		School groups will either eat food brought with them, or food cooked thoroughly by staff on the open fire.
		• Cuts		Heat proof gloves to be provided to assist in moving of hot pots and pans.
				Ensure that containers are not overfilled with water when boiling.
		Food Allergies		All cuts to be cleaned and covered promptly
		Dietary requirements		Meals to be prepared to ensure that ingredients that trigger individual allergic reactions are not used and alternative recipes or meals provided.
				Clients to make staff aware of any food allergies on Medical declaration.
				Menus are to take into account any special dietary requirements or wishes.
				Cooks to ensure that cross contamination of equipment between meat and non-meat food preparation does not take place.
				All participants will be instructed to avoid areas where toxic flora grow, areas with such plants fungi will be cordoned off prior to session.

Toxic poisonous plants & fungi	Staff Clients	Poising Burns Injury	Med	All participants will be instructed to avoid areas where toxic flora grow, areas with such plants fungi will be cordoned off prior to session.
		Illness		
Hygiene	Staff Clients	Hand washing     Hand sanitiser     Water hygiene	High/Med	<ul> <li>Hand washing stations must are clearly signed &amp; replenish after each session as per covid 19 guidelines</li> <li>Clean, potable water to be provided.</li> </ul>
				Shower facility to be situated away from main camp area.
				Facility to be situated away from main camp area
		Toilet facility		Fresh sawdust to be provided
				No paper or other waste to be disposed of in composting toilet
				All paper and other waste to be burnt • Hand sanitation/cleansers to be provided.
				Facility to be monitored and moved when necessary.
Weather	Staff Clients	• Sunburn		Everyone to be reminded of the importance of protecting skin from exposure to sun and avoidance of sunburn.
				Group shelter to be provided.
		Heat/Cold stress		Instructor to check weather forecast prior to session and observes conditions throughout. If necessary stop activity and move to safety. Change plans as necessary.
				Participants to have suitable and adequate clothing for weather conditions, plus access to hot/cold drinks as appropriate.
		Strong wind		As per handbook policy, use on site permanent Teepee during inclement weather Strong wind policy implemented when winds gust over 30 mph as per handbook (Howick Estates strong wind policy) foil blankets as part of the first aid kit.

Falling Objects	Staff clients	Deadfall Storm damage Hung up trees Thrown ropes	Med	General area to be inspected prior to event for dead fall risk, storm damaged, hung up trees and any branches cleared if necessary.  Activity to be undertaken where risk from deadfall is minimised  Instructor to brief clients prior to commencement of activity and continually monitor potential risk.  Safe working distances for activity to be observed at all times, social distancing  Correct procedure to be followed
Equipment Tool use	Staff Clients	Hand tools – Knives, saws, axes, hammer  Accidental loss of control	Med	All equipment to be kept sharp and in a safe and serviceable condition.  All tools to be subject to regular inspection. Accidental loss of control and any damaged including blade sharpening or unserviceable tools rejected for use.  Tools maintained and securely stored when not in use. Tools counted out and back in to ensure all returned. All tools to be accounted for ten minutes prior to session end.  Edged tools to be covered/sheathed and stored when not in use.  Ensure group have a full understanding on how to carry the tool correctly.  Correct tools to be used for each application.  Instructor to brief clients on safe working practices and correct usage before use.  Ensure the group have a full understanding on how to position the tool correctly when using it so if a slip occurs it will not make contact with them or any group member.  Only used under the direct supervision of trained staff with numbers appropriate to the tool is use.  All instructors to carry first aid kits and to be first aid qualified.  Clients to be made aware of safe working distances for tools.  Gloves are not to be worn whilst using hand tools All blades sharpen after each session.

				Participants will be issued with an individual pre sanitised tool box, containing everything they'll need for the session. (Tools are pre & post sanitised, left for seventy two hours using our tool rotation system)
Missing child/person	All	As per handbook policy	Low	All persons will return to the fire circle, implement head count & area search.  After 30 minutes implement emergency policy from Handbook
Road safety	All	As per handbook policy	Low	All participants must give way to all vehicles, two staff members (wearing high viz vests) will escort group's from Howick Hall car park to our site, (via single track road, max vehicle speed is 10mph) they will be situated at the front & rear of group, in a state of constant vigilance. If a vehicle approaches Participants will be asked to step off the road until vehicle is clear.

**Coronavirus** disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment.

Lyme Disease Lyme disease is a bacterial infection that is spread to humans by infected ticks. Ticks (loxides ricinus) are tiny, spider-like insects found in woodland areas that feed on the blood of mammals, including humans. Tick bites often go unnoticed and the tick can remain feeding for several days before dropping off. The longer the tick is in place, the higher the risk of it passing on the infection. Lyme disease can affect your skin, joints, heart and nervous system.

#### What are the symptoms of lyme disease?

The earliest and most common symptom of Lyme disease is a pink or red circular rash that develops around the area of the bite, three to 30 days after someone is bitten. The rash is often described as looking like a bull's-eye on a dart board. You may also experience flu-like symptoms, such as tiredness, headaches and muscle or joint pain. If Lyme disease is left untreated, further symptoms may develop months or even years later and can include:

- muscle pain
- joint pain and swelling of the joints
- neurological symptoms, such as temporary paralysis of the facial muscles

Lyme disease in its late stages can trigger symptoms similar to those of fibromyalgia or chronic fatigue syndrome. This is known as chronic Lyme disease. A person with Lyme disease is not contagious because the infection can only be spread by ticks.

Unless in its early stages when a rash is present, diagnosing Lyme disease is often difficult as many of the symptoms are similar to those of other conditions. Blood tests are useful and important in acute infection but don't always confirm diagnosis. Diagnosed cases of Lyme disease can be treated with antibiotics. Your course of antibiotics will depend on the stage at which your Lyme disease is at, but you will usually need to take them for two to four weeks.

## How common is Lyme disease?

Lyme disease is the most common tick-borne infectious disease in Europe and North America. People who spend time in woodland or heath areas are more at risk of developing Lyme disease because these areas are where tick-carrying animals, such as deer and mice, live.

The UK Health Protection Agency (HPA) estimates that there are 2,000 to 3,000 cases of Lyme disease in England and Wales each year, and that about 15%-20% of cases occur while people are abroad.

Parts of the UK that are known to have a high population of ticks include:

- Exmoor
- the New Forest in Hampshire
- the South Downs
- parts of Wiltshire and Berkshire
- Thetford Forest in Norfolk
- the Lake District
- the Yorkshire Moors
- the Scottish Highlands

Most tick bites occur in late spring, early summer and during the autumn because these are the times of year when most people take part in outdoor activities, such as hiking and camping.

### **Preventing Lyme disease**

There is currently no vaccine to prevent Lyme disease. In 2002, a vaccine was introduced in America but it was later withdrawn due to concerns over side effects. The best way of preventing Lyme disease is to avoid being bitten when you are in wooded or heath areas known to have a high tick population. The following precautions might help to prevent Lyme disease:

- Wear a long-sleeved shirt.
- Tuck your trousers into your socks.
- Use insect repellent.
- · Check yourself for ticks.
- Check your children and pets for ticks. If you do find a tick on your or your child's skin, remove it by gently gripping it as close to the skin as possible, preferably using fine-toothed tweezers, and pull steadily away from the skin.

Never use a lit cigarette end, a match head or essential oils to force the tick out.

Reference: http://www.nhs.uk/conditions/Lyme-disease/Pages/Introduction.aspx

Weil's Disease – Leptospirosis Leptospirosis is a type of bacterial infection that is spread by animals. It is caused by a strain of bacteria called leptospira. Leptospirosis is a zoonotic condition, which means it is spread to humans by animals.

You can catch leptospirosis by touching soil or water contaminated with the urine of wild animals infected with the leptospira bacteria. In England and Wales the rates of leptospirosis are very low, so there is no reason why you should not participate in freshwater recreational activities, such as swimming, sailing, water skiing or windsurfing.

An expert in leptospirosis has estimated that the risk of contracting a leptospirosis infection by taking part in these types of activities is as low as 1 in 10 million.

However, if you are regularly involved in freshwater activities, it is a sensible precaution to cover any cuts and grazes that you have with a waterproof dressing because there are other waterborne infections that you can catch, such as hepatitis A (a viral infection) or giardiasis (an infection caused by parasites). You should also shower or bathe after freshwater activities.

Animals known to be carriers of the leptospira bacteria include:

- cows
- pigs
- doas
- rodents; particularly rats Once a young animal is infected, they shed the bacteria in their urine for the rest of their life. Most animals have no symptoms, but up to 1 in 10 infected dogs die from the disease.

Human to human transmission through sex is possible, but very rare.

#### Types of leptospirosis

There are two main types of leptospirosis infection:

- Mild leptospirosis is where a person develops flu-like symptoms, such as headache, chills and muscle pain.
- Severe leptospirosis is where a person goes on to develop severe, sometimes life-threatening symptoms, including organ failure and internal bleeding. This is caused by the bacteria infecting major organs, such as the liver and kidneys.

Mild leptospirosis is the most common type of leptospirosis, accounting for 90% of cases. It is unclear why a few people go on to develop serious symptoms Risk factors for developing severe leptospirosis include:

- being under five years old
- being over 65 years old
- already having a serious health condition, such as pneumonia

## How common is leptospirosis

Leptospirosis is most common in tropical areas of the world. However, it is becoming increasingly widespread in urban areas that have low levels of sanitation, such as in poor areas of large cities in the developing world.

Most cases of leptospirosis are sporadic (infrequent), although large outbreaks have been reported after flooding.

Globally, it is estimated that 10 million people will get leptospirosis every year. It is difficult to estimate exactly how many people die from leptospirosis because many cases occur in parts of the developing world where causes of death are not routinely reported.

In the coming years, it is anticipated that the number of cases of leptospirosis will continue to increase as a result of global warming and the expected increase in flooding. Some experts have estimated that the fatality rate from leptospirosis could be anywhere between 5 and 25%. Deaths from leptospirosis tend to be higher in countries where access to good quality healthcare is limited.

## **Cases in England**

Rarely, leptospirosis occurs in temperate climates, such as England. For example, in 2009, there were 33 reported cases of leptospirosis in England and Wales, 14 of which were acquired abroad. Most cases either involved:

- people who regularly worked with animals and/or water, such as farmers and sewer workers
- people who took part in water-based activities, such as canoeing or sailing.

England, death rates for people with severe leptospirosis are much lower than in other parts of the world due to the quality of healthcare that is available. In 2009, there were only three deaths as a result of leptospirosis.

#### Outlook

Mild leptospirosis responds very well to treatment with antibiotics and most people will make a full recovery within a week. Most people with severe leptospirosis will require admission to hospital so the functions of their body can be supported while the underlying infection is treated with injections of antibiotics.

Reference: <a href="http://www.nhs.uk/conditions/leptospirosis/Pages/Introduction.aspx">http://www.nhs.uk/conditions/leptospirosis/Pages/Introduction.aspx</a>