

Unit:

Activity / Exercise: HOCKEY

Risk Assessment Number:	GENERIC RA: YES (please delete as appropriate)
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Relevant Publications / Pamphlets / Procedures:
 1 .Annex B to ACP 20A ACTI No 66.
 2. I H F Rules of Hockey
 3. ACP 5

Assessor: _____
 Date of Assessment: ___/___/___
 Review Date: ___ / ___ / ___

Related RA's (eg Manual Handling)

The following steps relate to the Risk Assessment Process.

Ser	Activity	Hazards Identified	Existing Controls	Residual Risk acceptable YES or NO	Additional Controls	Residual Risk Acceptable YES or NO
(a)	(b)	(c)	(d)	(e)	(f)	(g)
1	HOCKEY	Slips, trips, falls. Movement of portable goals. Contact with ball. Contact with sticks. Contact between players.	*Pitch inspection by qualified official. *Correct footwear appropriate to playing surface and weather conditions.. *First Aid Kit. *Emergency procedures. *Health and safety brief, correct manual handling techniques demonstrated. *Portable goals to be securely anchored. *Match controlled by qualified officials appropriate to age and standard of players. *All equipment and clothing to be in accordance with I H F Rules of Hockey. Goalkeepers in particular must wear full protective gear.			

AIR CADETS

RISK ASSESSMENT PROFORMA

		Contact with spectators.	*Spectators to be kept a minimum of 5 metres from the touchline.			
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Details of person responsible for carrying out this Risk Assessment / Review

CONTROLS	NAME (print)	POST	DATE	SIGNATURE
Existing & Additional Controls Agreed Sqn Cdr, Wing, Region				
Additional Controls Implemented Activity Commander				

Issued by the Corps Physical Education Branch, Headquarters Air Cadets