

This risk assessment has been prepared for the pure attention and focus on delivering step 1: return to training. This is a working document that will evolve as government guidelines and advice changes. The majority of YCCC office based staff are still on furlough and those that haven't been furloughed are advised to work from home (see current guidelines for working in a confined space).

Organisation:	The Yorkshire County Cricket Club.
Venue address and postcode (in case of emergency)	Emerald Headingley Cricket Ground, Kirkstall Lane, Leeds, LS6 3DP.

The COVID-19 Officer is	Name, Job Title: Sam Hinchliffe, Operations Director.	Their mobile number is:	
		Their email address is:	
The local COVID-19 Medical Officer is	Name, Job Title: Kunwar Bansil, Lead Physiotherapist.	Their mobile number is:	
		Their email address is:	

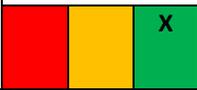
Severity/Consequence

		Slightly harmful (1)	Harmful (2)	Extremely harmful (3)
Likelihood	Highly unlikely (1)	Trivial risk (Score 1)	Tolerable risk (Score 2)	Moderate risk (Score 3)
	Unlikely (2)	Tolerable risk (Score 2)	Moderate risk (Score 4)	Substantial risk (Score 6)
	Likely (3)	Moderate risk (Score 3)	Substantial risk (Score 6)	Intolerable risk (Score 9)

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No	Guidance requirement	Examples of what needs to be put in place
1	<p>Communicating Risks and Consent</p> <p>Ensure that prior to the resumption of training, all athletes and staff who are engaged in the training environment are formally appraised of the risks and all mitigating steps being taken. It will be for individual sports to agree with their athletes any conditions for their return.</p> <p>All hosts/operators must ensure staff supporting elite sport return to training are formally appraised of the risks, mitigating steps being taken and requested to actively 'opt in' if they are comfortable to return to working within the training environment by way of written consent</p>	<p>Refer to ECB COVID-19 Medical Plan and associated training plans.</p> <p>Ensure you have stringent communication methods to explain the risk mitigations which is delivered on a 1:1 check in basis for all involved. A process for staff to able to 'opt in' or 'opt out' must be in place and written consent to be provided by all staff who 'opt in'.</p> <p>A briefing to be given to each person entering the site on the risks identified in this assessment and their duties in carrying out the mitigation plan and associated actions</p> <p>A documented process to record an individual's awareness of the risks and consent to participate (as per the ECB COVID-19 Medical Plan) that is compliant with GDPR regulations and medical confidentiality protocols.</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>
Who should lead on this?	Sam Hinchliffe.	
Hazards identified	<ol style="list-style-type: none"> 1) Personnel not receiving the documentation. 2) Personnel receiving the documentation and failing to acknowledge the information (neglect). 	
What are your mitigation actions?	<ol style="list-style-type: none"> 1. Ensure all contact details are present and correct for players and support staff. 2. Appoint key personnel to take responsibility for distributing the information and ensuring it has been acknowledged. 3. Distribute all documentation in writing and follow up verbally. Documentation list: <i>"Player Coach BCD return to training guidelines, current guidelines for working in a confined space, player and support staff arrival instructions.</i> 4. Demonstrate your COVID-19 compliance policy on your company website if you employ more than 50 people. 	

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Who will lead on delivery		Sam Hinchliffe and Cecilia Allen.				
Hazard Severity Score (H from 1-3)	1	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	1	RAG Rating (see table above delete as appropriate) 
When does mitigation need to be in place?	June 1 2020.			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					
No	Guidance requirement			Examples of what needs to be put in place		
2	<p>Identifying COVID-19 Vulnerable Persons</p> <p>Agree a clear position on how athletes and staff who are deemed vulnerable or are in a household with vulnerable individuals interact with the training environment, which must be in line with government advice on clinically vulnerable individuals. Clinically extremely vulnerable individuals or those continuing to live with anyone deemed clinically extremely vulnerable should not be engaged in the training environment in line with current government advice.</p> <p>Athletes or staff deemed 'clinically extremely vulnerable' should continue to follow government advice. This currently includes maintaining 'shielding' and therefore, should not return to organised training outside of the home.</p>			<p>Refer to ECB COVID-19 Medical Plan and associated training plans.</p> <p>Agree and implement a policy on how staff, players and coaches who are deemed vulnerable or are in a household with vulnerable individuals will interact with the training environment.</p> <p>Refer to the ECB COVID-19 Medical Plan</p> <p>A pre-screening process that considers who needs to be on site to deliver and participate in training (e.g. players, coaching staff, medical staff, ground staff, administration staff) and an assessment of vulnerability by a competent person.</p>		
Who should lead on this?	Kunwar Bansil. Sam Hinchliffe.					
Hazards identified	<ol style="list-style-type: none"> 1) Vulnerable persons attending site. 2) Personnel attending site who cohabit with vulnerable persons. 					
What are your mitigation actions?	<ol style="list-style-type: none"> 1) Obtain in advance as much information as possible regarding vulnerable persons attending site or living in support staff/training players households. 					

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	<p>2) Discourage vulnerable persons from attending site unless in an exceptional circumstance.</p> <p>3) Promote best practice and guidelines for all persons visiting site.</p> <p>4) Distribute all documentation in writing and follow up verbally. Documentation list: <i>"Player Coach BCD return to training guidelines, current guidelines for working in a confined space, player and support staff arrival instructions."</i></p>					
Who will lead on delivery	Sam Hinchliffe and Kunwar Bansil.					
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	4	RAG Rating <small>(see table above delete as appropriate)</small> 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
4	<p>Regular COVID-19 Screening</p> <p>Outline how regular screening for COVID-19 symptoms will take place before each entry to the training environment. Updated information on the most common symptoms can be found on the NHS website. Screening should include a questionnaire and temperature check as a minimum.</p>	<p>Refer to ECB COVID-19 Medical Plan and associated training plans.</p> <p>Ensure you have adequate screening provision for COVID-19 symptoms upon entry to the venue.</p> <p>The plan should identify the facilities, equipment and PPE required, the location of the screening facility (e.g. in the car park used for participants and staff).</p> <p>A screening questionnaire (see template in ECB COVID-19 Medical Plan and a process for completing, collating responses and recording compliance on a daily basis that meets all data protection and confidentiality requirements.</p>

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		<p>A strategy for measuring and recording temperature that removes the risk of transmission between individuals in the measurement and recording process.</p> <p>Identification of other processes required.</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>				
Who should lead on this?		Kunwar Bansil.				
Hazards identified		<ol style="list-style-type: none"> 1) Players or support staff arriving at the ground with COVID-19 symptoms. 2) In light of the above, identify if the person came into contact with any other personnel or landmarks/locations at the ground. 				
What are your mitigation actions?		<ol style="list-style-type: none"> 1) Discourage anyone with COVID-19 symptoms from attending site in advance and to seek urgent medical guidance. 2) If the player or support staff has arrived at site and is fit to do so, direct them to leave site and seek urgent medical attention. 3) Follow up communications with the person to discuss their safety and wellbeing. 4) Confirm if there were any contact with persons or locations at site and disinfect points of interest and seek further mitigating guidance. 				
Who will lead on delivery		Kunwar Bansil.				
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	4	RAG Rating <small>(see table above delete as appropriate)</small> 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC June 1 2020					

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No	Guidance requirement	Examples of what needs to be put in place
5	<p>Onsite Symptomatic Persons</p> <p>Clear protocols to manage any person who becomes symptomatic at the venue as per government guidelines for employers and businesses as the most relevant information.</p> <p>Should a known or suspected COVID-19 case occur in the training environment or an individual be identified as a contact of a known case the individual/s in question should be placed in isolation and follow the PHE guidelines. The designated medical officer should be immediately informed if not involved with identifying and isolating the case at the training venue.</p>	<p>Refer to ECB COVID-19 Medical Plan and associated training plans.</p> <p>Ensure you have a protocol in place for staff members, players or coaches who may become symptomatic whilst at the training venue.</p> <p>Develop a protocol(s) compliant with the ECB COVID-19 Medical Plan and Government Guidance and ensure that all are trained on how to enact this.</p> <p>Consider a quarantine location and a management protocol for its use and cleaning.</p> <p>Supply the required PPE and a disposal solution compliant with the ECB COVID-19 Medical Plan.</p> <p>Consider protocols for communication of actions to ECB Chief Medical Officer.</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>
Who should lead on this?	SH and KB	
Hazards identified	1) Someone becoming COVID-19 symptomatic whilst at the stadium.	
What are your mitigation actions?	<ol style="list-style-type: none"> 1) Temperature checks and healthcare questionnaires to be completed prior to arriving at Emerald Headingley Stadium (private vehicle travel use only). 2) Confine them to a quarantine zone (East Stand first aid room) and seek further advice from the Club Doctor / NHS 111. 3) Arrange the symptomatic person to leave site via best way possible: on their own, someone from the same household collects them, ambulance in an urgent situation. 	

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		4) Once the symptomatic person has vacated site, deep clean any potentially infected areas and review all safety measures currently in place.				
Who will lead on delivery		SH and KB. Bernie Grant would lead on the cleaning element.				
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	6	RAG Rating <small>(see table above delete as appropriate)</small>
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
6	Returning COVID-19 Cases Outline how staff who are returning to the training environment from isolation due to suspected or confirmed cases of COVID-19 or other COVID-19 related reasons should be medically assessed prior to return.	Ensure you have a protocol for staff members, players of coaches who may be accessing the venue from isolation. Develop a protocol(s) compliant with the ECB COVID-19 Medical Plan and Government Guidance and ensure that all are trained on how to enact this.
Who should lead on this?		SH and KB.
Hazards identified		1) Anyone returning to work who has had COVID-19 who may not have been in isolation for the allocated amount of time and/or still have COVID-19 symptoms. 2) Anyone returning to work who has had COVID-19 and may still be vulnerable.
What are your mitigation actions?		1) Advance communication with players and staff to understand who may already have contracted COVID-19. 2) Ensure they have spent the recommended amount of time in isolation and no longer have symptoms / received appropriate treatment.

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		<p>3) Advance personal monitoring systems in place prior to arriving at site.</p> <p>4) Discourage anyone from visiting site if they still have COVID-19 symptoms or who are a high risk/vulnerable person.</p>				
Who will lead on delivery		KB for players and SH for staff.				
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	4	RAG Rating (see table above delete as appropriate)
When does mitigation need to be in place?		June 1 2020		When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?		WC 1/6/2020				

No	Guidance requirement	Examples of what needs to be put in place
7	<p>PPE</p> <p>Ensuring any practitioners who need to work in close contact with potentially symptomatic members have access to personal protective equipment (PPE) and are trained in their appropriate usage and disposal. More generally, medical staff should only use PPE appropriate for the setting. If suitable PPE cannot be procured without taking away supply intended for key workers then the practice or work requiring the PPE should not take place.</p>	<p>Provision as per current PHE Advice.</p> <p>Consider both supply and safe disposal as clinical waste (i.e. any PE used by the physio for clinical work in and out of the treatment room.)</p> <p>Ensure an adequate supply of cleaning materials and hand sanitiser.</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>
Who should lead on this?		SH, KB and BG.
Hazards identified		1) Not having appropriate PPE for all staff and coaches. PPE = facemask, gloves, disinfectant wipes and access to hand sanitiser.

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	2) Sharing facilities and equipment with other people who may have unknowingly contracted COVID-19 without appropriate PPE. These people are more than likely going to be the coach, physio or strength and conditioning coach who would come in to closer contact with personnel more so than most. However, we must acknowledge that all staff are at risk.					
What are your mitigation actions?	1) Procure PPE for all personnel and proactively encourage the use of facemasks, gloves, hand sanitiser and disinfectant wipes. 2) Distribute appropriate guidelines for best practice to all players and support staff. Do this in writing and follow up verbally. 3) Distribute the <i>Player Coach BCD return to training guidelines</i> for all players and coaches.					
Who will lead on delivery	SH for support staff. KB for players and coaches.					
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	3	RAG Rating (see table above delete as appropriate) 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
8	Practice standards and insurances Ensure any support staff within the training environment are operating to the minimum standards of practice that ensure any professional body endorsement and professional indemnity insurances they require are still valid.	Consider who this applies to in your operation/venue (e.g. medical staff, coaching staff and delivery staff) Review applicable insurances. Refer to ECB COVID-19 Medical Plan

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Who should lead on this?	AG from an implementation point of view. SH from an insurance point of view.					
Hazards identified	1) Struck with a ball when coaching. Slips, trips and falls.					
What are your mitigation actions?	1) Promote best practice.					
Who will lead on delivery	Andrew Gale.					
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	4	RAG Rating (see table above delete as appropriate) 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
9	Minimising Injury/Illness Risk and NHS Burden Ensuring training choices are made to minimise the injury and illness risk/NHS burden as a priority consideration.	Refer to ECB COVID-19 Medical Plan and associated training plans. Consult with coaches and review training plans in this context. Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.
Who should lead on this?	Andrew Gale.	
Hazards identified	The 'norm' for cricket practice (mentioned in RA8).	
What are your mitigation actions?	AG to deliver safe and best practice for 1-1 coaching sessions.	
Who will lead on delivery	Andrew Gale.	

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Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	4	RAG Rating (see table above delete as appropriate)
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place				
10	Medical Staffing Levels Ensure an appropriate level of medical staffing is in place within the training environment to manage any injuries and illness in training, while also meeting the demands of any COVID symptom screening.	Refer to ECB COVID-19 Medical Plan.				
Who should lead on this?		Kunwar Bansil.				
Hazards identified		<ol style="list-style-type: none"> If the lead physiotherapist is ill or otherwise absent / unable to attend the training session, what's the backup? Multiple incidents requiring medical attention occur all at once. Major trauma. 				
What are your mitigation actions?		<ol style="list-style-type: none"> Second person available on standby. TBC. 1-1 training to no more than 1 session occurring at once. Dial 999. 				
Who will lead on delivery		Kunwar Bansil.				
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	2	RAG Rating (see table above delete as appropriate)
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	

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When should the mitigation plan be reviewed?	WC 1/6/2020
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No	Guidance requirement	Examples of what needs to be put in place				
11	<p>Emergency Medical Cover</p> <p>Ensure local emergency medical cover/assistance can be accessed in the event of a potential life or limb threatening injury requiring immediate extrication and urgent medical care or hospitalisation.</p>	<p>Refer to ECB COVID-19 Medical Plan and existing venue medical/emergency plans and procedures and how these can be implemented (including PPE and equipment).</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>				
Who should lead on this?	Kunwar Bansil.					
Hazards identified	<ol style="list-style-type: none"> 1) Occurrence of major trauma/incident that cannot be treated at Emerald Headingley Stadium by the personnel on site or inadequate facilities. 2) Any incident that isn't deemed as a major trauma/injury as above but requires expertise greater than is available at the time of occurrence. 					
What are your mitigation actions?	<ol style="list-style-type: none"> 1) Assess the incident and decide if appropriate measures are in place to effectively treat at Emerald Headingley stadium. 2) If the answer to the above isn't appropriate, the clear guidelines to follow thereafter are to dial 999. 3) Communicate with The Club sports doctor consultant: Dr Jon Power. 					
Who will lead on delivery	Kunwar Bansil.					
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	6	RAG Rating (see table above delete as appropriate)
						
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
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No	Guidance requirement	Examples of what needs to be put in place				
12	Staff Training Ensuring minimum but necessary training staffing levels are calculated to balance training need, distancing protocols and reducing risk of burden to the NHS.	<p>Refer to ECB COVID-19 Medical Plan and consult with coaches. Refer to guidance on zoning and functional areas in the Bio-Secure Model Medical Guidelines.</p> <p>Ensure appropriate levels of staffing will be in place to facilitate the training yet not compromise social distancing.</p> <p>Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.</p>				
Who should lead on this?		SH.				
Hazards identified		1) Being understaffed.				
What are your mitigation actions?		1) Discuss with the Director of Cricket and Lead physio what the staffing requirements are and have backups available as a secondary option.				
Who will lead on delivery		SH/KB/AG.				
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	3	RAG Rating (see table above delete as appropriate)
						
When does mitigation need to be in place?		June 1 2020		When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?		WC 1/6/2020				

No	Guidance requirement	Examples of what needs to be put in place
13	Social Distancing Agree what steps need to be taken to ensure social distancing and appropriate hygiene measures are maintained in the training	Ensure compliance with government guidelines on social distancing can be met by all parties involved (staff, players, coaches) in all areas in which they will be accessing.

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	<p>environment, in line with the government's guidance.</p> <p>Hosts/operators should ensure that government advised social distancing guidelines can be maintained within their facility and work with sports/clubs to determine maximum capacity levels for the various spaces in use.</p> <p>All athletes and staff should adhere to government rules on social distancing when travelling to and from the training venue and should not come within the 2m social distancing range of anyone outside their household whilst travelling to and from training.</p>	<p>Ensure appropriate levels of staffing will be in place to facilitate the training yet not compromise social distancing.</p> <p>Refer to ECB COVID-19 Medical Plan where this is documented.</p> <p>Walk through the venue and:</p> <ul style="list-style-type: none"> • Consider how social distancing can be enacted and controlled – look at potential pinch points and workarounds, one way systems (including entrances and exists), screens, floor markings and PPE requirements. Identify an operational protocol and communication and compliance plan (use illustrates site plans, signage and other control measures as required). • Identify areas used, contact points and how these should be cleaned, at what frequency and by whom. <p>Ensure you have a protocol in place for transport to and from the venue and car parking arrangements to assist social distancing that is compliant with the government guidelines and the ECB COVID-19 Medical Plan.</p> <p>Ensure an adequate supply of cleaning materials and hand sanitiser.</p> <p>Consider the operational protocols, cleaning materials, PPE, waste management and signage required to enact plans</p>
Who should lead on this?	SH	
Hazards identified	1) Cross contamination: same touch points in close proximity of each other such as door handles, push buttons, utensils, cricket equipment, toilet facilities etc.	

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	2) Working in confined spaces.					
What are your mitigation actions?	1) Practice outdoors for as long and as much as possible. 2) Reduce the amount of potential touch points when working in a confined space. 3) Share appropriate guidelines for working in confined spaces. 4) Provide appropriate PPE. 5) Distribute all documentation in writing and follow up verbally. Documentation list: <i>“Player Coach BCD return to training guidelines, current guidelines for working in a confined space, player and support staff arrival instructions.</i>					
Who will lead on delivery	SH					
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	2	RAG Rating (see table above delete as appropriate) 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
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No	Guidance requirement	Examples of what needs to be put in place
15	<p>Equipment Cleaning</p> <p>Outline how equipment being <u>brought into</u> the training venue will be suitably cleaned and disinfected to manage the possible transmission of COVID-19 (e.g. specialist technical equipment, wheelchairs).</p> <p>Outline how any equipment/items that must be <u>shared within</u> the training venue (e.g. gym equipment) will be cleaned/disinfected between each user.</p>	<p>Refer current government guidance for non-hospital facilities cleaning and to ECB COVID-19 Medical Plan and consult with players and coaches.</p> <p>In this context this includes (but is not limited to) playing equipment, clothing, balls, training equipment, bowling machines, stumps, nets, S&C equipment, SAQ equipment etc).</p> <p>Ensure you have a protocol in place for the cleaning at the start and end of the training day and in between each user. Ensure users are adequately trained and training is delivered if necessary</p>

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		<p>Ensure you have protocol in place for the ongoing cleaning of common contact points. Refer to 16 below.</p> <p>Ensure an adequate supply of cleaning materials and hand sanitiser.</p> <p>Consider the operational protocols, cleaning materials, PPE, waste management and signage required to enact plans</p>				
Who should lead on this?	SH					
Hazards identified	1) Multiple touch points cross contamination across all facilities and equipment.					
What are your mitigation actions?	<p>1) Encourage the use of hand sanitiser as much as possible in as many indoor areas as possible.</p> <p>2) Encourage the use of disinfectant wipes in areas such as gyms where the number of touch points could be high.</p> <p>3) Distribute all documentation in writing and follow up verbally. Documentation list: <i>"Player Coach BCD return to training guidelines, current guidelines for working in a confined space, player and support staff arrival instructions."</i></p>					
Who will lead on delivery	Everyone.					
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	3	RAG Rating <small>(see table above delete as appropriate)</small> 
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
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<p>16</p>	<p>Cleaning of all Areas</p> <p>Outline how all areas will be cleaned between sessions for different groups of athletes.</p> <p>Operators of venues being used for Step One return to training should ensure that all areas to be accessed by elite athletes, support staff and facilities staff are deep cleaned prior to return to a standard which follows government guidance for post-COVID case non-hospital facilities cleaning as a minimum.</p> <p>Operators of venues being used for Step One return to training should ensure that all areas to be accessed by elite athletes, support staff and facilities staff are cleaned at the beginning and end of the training day to a standard which follows government guidance for non-hospital facilities cleaning as a minimum.</p> <p>Operators of venues should agree with sports/clubs in advance about how any relevant areas will be cleaned between sessions for different groups of athletes.</p> <p>Operators should ensure their cleaning staff have all the necessary levels of PPE and cleaning material needed to complete deep cleaning and daily cleaning protocols.</p> <p>Operators should ensure their cleaning staff have the necessary levels of training needed to complete deep clean and daily cleaning protocols prior to organised training resuming.</p>	<p>Ensure that all areas that will be in use by staff, players and coaches are identified ahead of access and that these areas are deep cleaned ahead of use as per the government guidance for post-COVID case non-hospital facilities cleaning as a minimum.</p> <p>Ensure that all areas that will be in use by staff, players and coaches are identified ahead of access and that these areas are cleaned at the beginning and end of the training day to a standard which follows government guidance for non-hospital facilities cleaning as a minimum.</p> <p>Ensure you have a protocol in place for the cleaning at the start and end of the training day and in between each user.</p> <p>Refer to ECB COVID-19 Medical Plan where this is documented.</p> <p>Consider the responsibility of the individual to clean in areas such as training areas, lavatories and welfare areas – provide appropriate training, cleaning materials, waste disposal and signage.</p> <p>Refer to 13 and 15 above.</p> <p>Ensure an adequate supply of cleaning materials and hand sanitiser.</p> <p>Ensure cleaning staff are adequately trained and training is delivered if necessary</p> <p>Ensure an adequate supply of the appropriate PPE required for deep cleaning and general cleaning.</p>
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	Ensure you have relevant guidance signage to be displayed throughout areas being used including lobbies, corridors and stairwells.					
Who should lead on this?	SH					
Hazards identified	1) Multiple touch points cross contamination across all facilities and equipment.					
What are your mitigation actions?	1) Bring Bernie Grant back from furlough who can carry out the maintenance and cleaning regimes as created by SH. 2) Request that all players and coaches take responsibility at assisting with the cleaning of equipment and facilities that they use with disinfectant wipes. 3) It is safer using outdoor facilities because this drastically reduces the amount of touch points and therefore potential cross contamination amongst other people. Using indoor facilities and equipment dramatically increases the touch points and therefore heightens the risk for everyone.					
Who will lead on delivery	Everyone.					
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	1	Risk Calculation (H x L)	3	RAG Rating (see table above delete as appropriate)
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

No	Guidance requirement	Examples of what needs to be put in place
17	Access Control The venue should take reasonable steps to ensure only approved elite athletes and those staff required to support their training enter the site. This should be in keeping with all applicable	Consider access control (in accordance with screening requirements) and signage – sites with public access need to consider this guidance requirement carefully and consult with the ECB where applicable.

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	rules, including relevant Health and Safety requirements and Fire Regulations.		
Who should lead on this?	SH		
Hazards identified	1) Unauthorised personnel attending site and increasing the risk of cross contamination.		
What are your mitigation actions?	1) Keep the required head count to a minimum in consultation with the Director of Cricket and ensure that a clear instruction is given to the security gatehouse for authorised personnel only to attend site during training periods.		
Who will lead on delivery	SH and the security gatehouse.		
Hazard Severity Score (H from 1-3)	2	Likelihood Score if mitigation strategy in place (L from 1-3)	1
			Risk Calculation (H x L)
			2
			RAG Rating (see table above delete as appropriate)
			
When does mitigation need to be in place?	June 1 2020		When was it put in place? WC 25/5/2020
When should the mitigation plan be reviewed?	WC 1/6/2020		

No	Guidance requirement	Examples of what needs to be put in place
18	Indoor Spaces	<p>The ECB COVID-19 Medical Plans refer to increased risk of transmission in indoor environments, particularly where natural ventilation to the outside world is poor and access is restricted.</p> <p>Consider carefully whether indoor spaces can be used or need to be adapted to comply with this guidance. Natural ventilation is important, you should risk assess transmission risk in the context of air conditioning / comfort systems.</p>
	Who should lead on this?	Sam Hinchliffe.
	Hazards identified	1) Indoor confined space -nets. 2) Indoor confined space – gym.

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	<ul style="list-style-type: none"> 3) Indoor confined space – toilets and facilities. 4) No natural airflow. 5) No ventilation systems. 6) Warm and 'stuffy' environments that increase the rate of germs breeding. 7) Multiple touch points: doors, door handles, taps, hand dryers, toilet flushers, bowling machines, bowling machine balls, nets, wickets, curtains. 					
What are your mitigation actions?	<ul style="list-style-type: none"> 1) Prop open all fire exit doors in advance of training to reduce the number of touch points. Ensure all doors are closed at the end of practice. 2) Prop open all fire exit doors in advance of training to encourage natural air flow. Ensure all doors are closed at the end of practice. 3) Create a one way in, one way out system and cascade the information accordingly. 4) Keep the head count in this space to an absolute minimum: player, coach, physio and cleaner. 5) Apply and encourage the use of appropriate PPE at all times when working indoors: facemask, gloves and disinfectant wipes. 6) Distribute all documentation in writing and follow up verbally. Documentation list: <i>"Player Coach BCD return to training guidelines, current guidelines for working in a confined space, player and support staff arrival instructions.</i> 7) Only the coach can touch ANY cricket equipment: the bowling machine, bowling machine balls, wickets, nets and curtains. <i>See ECB guidance: COVID player journey infographic V5.</i> 8) The coach must take responsibility for cleaning down (using disinfectant wipes) of the above cricket equipment at the end of each session. 9) It is safer only using outdoor facilities because this drastically reduces the amount of touch points and therefore potential cross contamination amongst other people. Using indoor facilities and equipment dramatically increases the touch points and therefore heightens the risk. 					
Who will lead on delivery	Andrew Gale.					
Hazard Severity Score (H from 1-3)	3	Likelihood Score if mitigation strategy in place (L from 1-3)	2	Risk Calculation (H x L)	6	RAG Rating <small>(see table above delete as appropriate)</small>
						
When does mitigation need to be in place?	June 1 2020			When was it put in place?	WC 25/5/2020	
When should the mitigation plan be reviewed?	WC 1/6/2020					

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