



# Risk Assessment

Cambridge Korean School

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## Section 1: General Information

- School Name: Cambridge Korean School
  - Activity / Session: \_\_\_\_\_
  - Date(s): \_\_\_\_\_
  - Location: **St Augustine's Church, 95 Richmond Rd Cambridge UK, CB4 3PS**
  - Assessor Name & Role: \_\_\_\_\_
  - Date of Assessment: \_\_\_\_\_
  - Review Date: \_\_\_\_\_
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## Section 2: Description of Activity

Brief description of the activity/session being assessed (e.g. Saturday classes, break time, performance rehearsal, event):

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## Section 3: Hazard Identification and Control Measures

| Hazard / Risk | Who Might Be Harmed | Existing Control Measures | Further Action Required | Risk Level (L/M/H) |
|---------------|---------------------|---------------------------|-------------------------|--------------------|
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*(Examples: slips/trips, fire, overcrowding, unauthorised access, supervision ratios, use of toilets, first aid, allergies, behaviour issues)*

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## Section 4: Safeguarding Considerations

- Adequate staff supervision in place: ☐ Yes ☐ No



- Appropriate adult-to-child ratios maintained: ☐ Yes ☐ No
  - Clear arrival and dismissal arrangements: ☐ Yes ☐ No
  - Toilets and changing areas risk assessed: ☐ Yes ☐ No
  - Any additional safeguarding risks identified?
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### Section 5: Fire Safety and Emergency Arrangements

- Emergency exits identified and clear: ☐ Yes ☐ No
- Fire alarm procedures explained to staff: ☐ Yes ☐ No
- Assembly point identified: ☐ Yes ☐ No
- Emergency contact details available: ☐ Yes ☐ No

Assembly Point Location:

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### Section 6: First Aid and Medical Needs

- First aid kit available: ☐ Yes ☐ No
- Designated first aider identified: ☐ Yes ☐ No
- Known medical conditions / allergies accounted for: ☐ Yes ☐ No
- Medication arrangements agreed (if applicable): ☐ Yes ☐ No

Details:

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### Section 7: Premises-Specific Considerations (Hired Premises)

- Premises safety information received from provider: ☐ Yes ☐ No
- Any restricted areas identified and controlled: ☐ Yes ☐ No
- Cleaning / hygiene issues identified: ☐ Yes ☐ No

Details:

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### Section 8: Overall Risk Assessment Outcome

- Overall risk level: ☐ Low ☐ Medium ☐ High
- Is the activity safe to proceed with current controls? ☐ Yes ☐ No

If **No**, outline additional actions required:

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### Section 9: Sign-off

I confirm that this risk assessment has been completed and appropriate control measures are in place.

- Name: \_\_\_\_\_
- Role: \_\_\_\_\_
- Signature: \_\_\_\_\_
- Date: \_\_\_\_\_

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**This risk assessment must be reviewed regularly and updated if circumstances change or following any incident.**



# Accident and Incident Log Form

## Cambridge Korean School

*(This form must be completed for all accidents, injuries, and significant incidents involving pupils, staff, volunteers, or visitors. It supports the Health and Safety Policy, Safeguarding Policy, and RIDDOR requirements where applicable.)*

### Section 1: General Details

- Date of Incident: \_\_\_\_\_
- Time of Incident: \_\_\_\_\_
- Location (room / area / premises): \_\_\_\_\_
- Type of Record: ☐ Accident ☐ Incident ☐ Near Miss

### Section 2: Person(s) Involved

#### Injured / Affected Person

- Name: \_\_\_\_\_
- Role: ☐ Pupil ☐ Staff ☐ Volunteer ☐ Visitor
- Age (if pupil): \_\_\_\_\_
- Class / Group (if applicable): \_\_\_\_\_

### Section 3: Description of Accident / Incident

Please provide a clear and factual account of what happened, including **what, where, when, and how**.

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#### Section 4: Injury or Impact Details

- Nature of injury / impact (if any): \_\_\_\_\_
  - Body part(s) affected: \_\_\_\_\_
  - Severity: ☐ Minor ☐ Moderate ☐ Serious
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#### Section 5: Immediate Action Taken

- First aid administered: ☐ Yes ☐ No
  - Name of first aider: **Choonchu Kim, choonck@hotmail.com**
  - Emergency services called (999): ☐ Yes ☐ No
  - If yes, details: \_\_\_\_\_
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#### Section 6: Safeguarding Considerations

- Did this incident raise a safeguarding concern? ☐ Yes ☐ No
  - If yes, was the Designated Safeguarding Lead (DSL) informed? ☐ Yes ☐ No
  - DSL Name: **Angela Brown, shinangela@gmail.com**
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#### Section 7: Parent / Carer Notification (if pupil involved)

- Parent/carers informed: ☐ Yes ☐ No
  - Date and time informed: \_\_\_\_\_
  - Method (phone / email / in person): \_\_\_\_\_
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#### Section 8: Follow-up Action Required

- Further action needed to prevent recurrence? ☐ Yes ☐ No

If yes, provide details:

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### Section 9: Reporting to External Bodies

- RIDDOR report required? ☐ Yes ☐ No
- If yes, date reported and reference number:

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- Referred to Local Authority / other agency? ☐ Yes ☐ No
- Details:

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### Section 10: Record Completion and Sign-off

- Form completed by (name & role): \_\_\_\_\_
- Signature: \_\_\_\_\_
- Date: \_\_\_\_\_

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**This form must be stored securely and reviewed by the Head of School or relevant lead.**