



Glasgow City FC

HEALTH & SAFETYGUIDE



Introduction

Glasgow City Football Club is committed to a safe environment for all players, volunteers (all levels) and coaches.

It will promote standards of health, safety and welfare within football and will ensure compliance with all relevant statutory provisions.

The Club will ensure that suitable and sufficient risk assessments are carried out, that procedures and safe systems are implemented in accordance with all current statutory provisions and that all reasonable and practical measures are taken to avoid risk. Safe practices will be adopted, and continuous improvement will be sought through regular audits and reviews.

Appropriate instruction and training will be provided together with adequate resources to ensure that the successful management of health and safety is carried out within the Club and that this policy is collectively implemented.

This policy together with arrangements and procedures, will be reviewed regularly and revised and updated as necessary.

Health & safety policy:

- To support our Health & Safety policy statement we are committed to the following duties:
- Undertake regular, recorded risk assessment of the club premises and all activities undertaken by the club
- Create a safe environment by putting health & safety measures in place as identified by the assessment
- Ensure that all members are given the appropriate level of training and competition by regularly assessing individual ability dependent on age, maturity and development
- Ensure that all members are aware of, understand and follow the club's health & safety policy
- Appoint a competent club member to assist with health and safety responsibilities
- Ensure that normal operating procedures and emergency operating procedures are in place and known by all members
- Provide access to adequate first aid facilities, telephone and qualified first aider at all times
- Report any injuries or accidents sustained during any club activity or whilst on the club premises
- Ensure that the implementation of the policy is reviewed regularly and monitored for effectiveness.

As a club member you have a duty to:

- Take reasonable care for your own health & safety and that of others who may be affected by what you do or not do
- Co-operate with the club on health & safety issues
- Correctly use all equipment provided by the club
- Not interfere with or misuse anything provided for your health, safety or welfare.

CLUB HEALTH & SAFETY OFFICER: Carol Anne Stewart - +44 7949 885860

Location of first aid facilities:

At all our training parks we have allocated rooms for physiotherapy and first aid treatment.

Location of telephones:

All coaches and first aiders have mobile telephones which have emergency contacts

Qualified first aiders:

1. Paul Dunne
2. Scott Craig

HAZARD IDENTIFICATION AND RISK ASSESSMENT

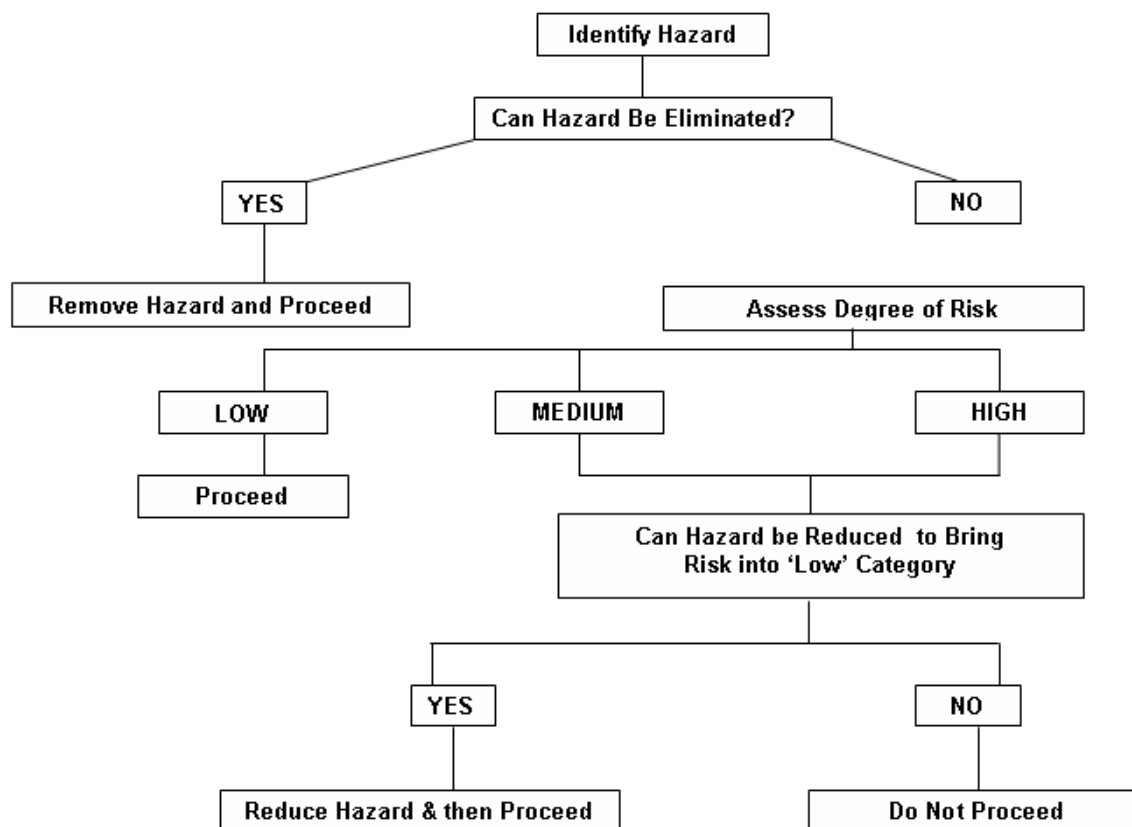
In order to discharge the duty of care to provide a safe environment for football it is necessary to identify hazards, assess the associated potential risks, then take action to eliminate the hazard.

Failing this, action must be taken to either eliminate the risks or reduce them to an acceptable level to the respective activities.

Within the context of Football, risk must be assessed in terms of:

- Low Risk - No risk or minimal risk of injury
- Medium Risk - Some risk of injury
- High Risk - High risk of injury

Note; Only if the risk has been assessed as 'Low' should a match, activity or training session be permitted to proceed. The following diagram outlines the procedures to be followed:



HAZARD:

A hazard is something with the potential to cause harm to an individual. This can be an object, an activity and even a substance. In football, examples would include the following:

- Objects- goalposts, fencing, nets, studs/football boots etc.
- Activity- playing games, training activities, travel, matches etc.
- Substance- e.g. water on playing/training surfaces, also in the form of ice, snow, or foreign objects etc.

RISK:

Risk expresses the likelihood that the harm from a potential hazard is realised. Risks are normally categorised as low, medium or high.

The principles of Risk Assessment are:

- Identify the hazard
- Identify those who might be harmed and how.
- Evaluate the risk (low, medium or high) and decide whether there are existing precautions and if these are adequate or are more required.
- Record the findings.
- Review the assessment and revise if necessary.

RISK ASSESSMENT

A formal and recorded process to weigh up the suitability and safety of any activity by identifying the hazards that could potentially cause harm and taking the appropriate precautions or actions required to prevent harm or injury.

The risk assessment should be undertaken by a 'competent' person. Ask other club members or committee members what they think as they may have noticed things which are not immediately obvious.

- **Make an inventory** of club activities and tasks.
- **Identify the hazards** for each of these activities – on and off site – and decide if the hazards are minor or significant.
- **Evaluate the risks** and decide whether the existing precautions are adequate or whether more should be done.
- **Decide if the risk is acceptable and prioritise the significant hazards** – identify whether the risk is high, medium or low by deciding which could result in serious harm or affect several people -see over page for more details on prioritising risks.
- **Select method of control** – check that all reasonable precautions have been taken to reduce the risk and avoid injury, however, be aware that even after all precautions have been taken, some risk usually remains
- **Record the findings** - keep the written record for future reference, it can help if you become involved in any action for civil liability. It can also remind you to keep an eye on particular hazards and precautions.
- **Implement measures** to reduce the risks
- **Monitor** – ensure that the standards are maintained.
- **Regularly review** – it is good practice to review your assessment to make sure that the precautions are still working effectively

NORMAL OPERATING PROCEDURES (NOP)

1. Supervision of Sessions

- **Identify the number of qualified first aiders required** - each training session will have at least one qualified first aider present
- **Identify the numbers of qualified coaches required** - each training session will have at least two qualified and registered coaches present
- **Coach to participant ratios - ratios of coaches to players will vary on age group** - Junior Academy (1:6), competitive sides (1:9)

2. Misbehavior

1. Should unacceptable behavior continue a final warning should be given by the head coach.
2. If rules are continually disobeyed the child should be asked to leave the session.
3. The child's parent/ guardian should be contacted and asked to pick them up, if they are not available then the child should be asked to sit by the side of the session put on warm clothing and have a drink

3. Risk assessment

- Regular and recorded risk assessments must be carried out for all on and off-site activities.
- Identify potential hazards which could reasonably be expected to result in significant harm
- Identify who might be harmed
- Consider existing controls - is the risk of significant harm low / unlikely, medium / possible or high / probable
- Where the risk is identified as medium or high, identify the action required
- If the risk is low, further precautions are optional and the activity may proceed
- Where the risk is medium, it is desirable that further precautions are taken before the activity proceeds
- If the risk is high, the risk should be significantly reduced before commencement of the activity.

4. Injury and incident reporting

- To comply with the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 1995, it is a legal requirement to immediately report all accidents and dangerous occurrence incidents.
- This report must be made to the committee who shall make a detailed record in the accident book of the accident/ dangerous occurrence and decide if the HSE should be informed.
- All incidents which require police involvement (i.e. theft, assault) must be recorded in writing by completing an accident/ incident report form.
- There is a statutory requirement to keep accident records for a period of 3 years.

5. Erecting and Dismantling Equipment

- All equipment must be erected and dismantled with due regard for the health and safety of self or other members. In all cases equipment shall be set up in accordance with best practice as defined by the sports governing body, manufacturers, suppliers and any training.
- Under no circumstances should high risk equipment be left unattended once erected.
- Members or staff should only be asked to erect equipment in which they have previous experience, knowledge or training.
- All identified defective equipment should be removed to a safe and secure place of storage and marked 'out of order'.
- Defective equipment must be brought to the attention of the committee who shall make arrangement for repair and replacement.

6. Facility Opening Procedure

- Open main doors and immediately turn off the security alarm
- Carry out a quick tour of the building ensuring that all corridors and fire doors are clear of obstructions
- Remove float from safe and place in till etc.
- Set alarm systems and lock front doors



EMERGENCY OPERATING PROCEDURES

Date Issued: **OCTOBER 2019**

THE EMERGENCY OPERATING PROCEDURES (EOP), OFTEN REFERRED TO AS THE EMERGENCY ACTION PLAN (EAP) should be devised to assist club members in the event of any emergency situation arising.

It is vital that all club members are aware of and understand these procedures. It is recommended that they are displayed in a prominent place i.e. club notice board if nearby to the training/ match facilities.

The procedures may vary in content depending on the size of the club or if the club owns the facility, club house, changing rooms etc.

It is the responsibility of the club to ensure that its members are aware of all emergency procedures.

However, if the club uses hired facilities then the facility manager should provide the emergency operating procedures.

Out of hours emergency contact numbers:

Carol Anne Stewart - +44 7949 885860

The following procedures are based on a club which owns a large club facility. The EOP should follow headings such as:

1. First Aid

A first aid kit is located: **kits are carried by each team and brought to training sessions and match days**

The nearest telephones are located: **all coaches are in the possession of mobile phones and therefore have access to the relevant emergency numbers**

Should a member of the club require first aid treatment a first aider should be summoned by the quickest available means. NB. A qualified first aider should be in attendance at all club sessions.

Most emergencies can be resolved by an on the spot response, however in the event of a serious incident, which could range from an injury or illness requiring medical treatment to a fatality, formal procedures must be in place i.e.:

Minor Injury e.g. small cut, graze, bumps, bruises

- Take appropriate First Aid action
- Make provision for the injured person to rest or continue as appropriate
- Record any incident or injury and complete the accident book/ forms.

Major Injury

- Arrange for injured person to be taken to hospital or ring for an ambulance.
- Use your discretion as to whether to administer First Aid.
- Telephone the next of kin.
- Record any incident or injury and complete the accident book/ form.

2. Contacting the emergency services

- When calling the emergency services, it is important that they are given the full information.
- Remember, when calling 999 for the police, ambulance or fire brigade, the 'control room' for these services may not be local, do not expect the operator to know where your club is located.

Procedure:

- Keep calm, speak clearly
- Give your name - state the service(s) that you require
- Give full name, address and telephone number of the club/ facility/ school
- Location, details and time of the accident/ incident
- Number of casualties and their condition together with the details of any treatment which is being administered or has been given
- Access point for ambulance
- Someone should be instructed to meet the ambulance which will aid the medics to reach the casualty as quickly as possible.

3. Fire

On discovering a fire, the nearest fire alarm must be activated. Do not attempt to tackle the fire unless safe to do so (i.e. the fire can be quickly extinguished with the minimum of risk to self).

It is the responsibility of the club committee to ensure that all members and staff understand the basic fire precaution arrangements and procedures:

- The location of fire alarms and how to use them
- The location of fire exits
- The location of assembly points
- The location of fire extinguishers and fire-fighting equipment

A fire point should be allocated. If evacuation is necessary, it is important to remember the following golden rules:

- Do not panic – keep a clear head
- Raise the alarm and call the fire services
- Do not stop to collect personal belongings or allow others to do so
- No heroics – People before property
- Close doors behind you
- Where possible use the nearest fire exit
- Take all registers and once at the assembly point account for all participants and coaches
- Do not use any lifts
- Do not re-enter the building or allow others to do so until instructed by the Fire Officer in charge.
- Record any incident or injury and complete the accident book/ form.

4. Theft or facility break in

Complete an incident report form to record the name, address and telephone number of the person whom the theft has occurred against. The person should be asked if they wish the theft to be reported to the police.

If there are reasonable grounds to suspect that a particular person may have been involved in the theft then the police must be contacted and the person informed that this is the course of action being taken.

If the person is still on the premises then they cannot be physically restrained or held against their will, the same is applicable to the person's property or clothing as this constitutes assault. Every effort should be made to detain the person until the police arrive. An incident report form should be completed.



5. Assault

Should an actual or alleged assault incident take place the senior club official available should be informed or summoned if on the site.

The incident should be investigated in an attempt to find the background factors that led to the assault and seek witnesses (names and addresses to be taken).

Where injury has been sustained, first aid should be provided and if necessary the ambulance and police service should be called. An incident report form should be completed.

6. Drug/ alcohol abuse

All persons found to be under the influence of drugs and/ or alcohol shall be escorted off the club site by the most senior club official available. It is important that club members or staff do not unduly place themselves at risk when dealing with disruptive or threatening behavior relating from drug or alcohol abuse: in all such cases the police service should be summoned.

In serious cases (i.e. unconscious casualty) the ambulance service must be called. During the interim period the casualty should be treated by a qualified first aider.

In such cases discarded items such as drug packaging should be brought to the attention of the ambulance service; this information may be vital to the emergency services to enable them to provide the appropriate care and treatment.

7. Lost person

In the event of losing a person i.e. in a leisure facility, an announcement should be made over the public address system requesting them to come to the meeting point. In the case of children, do not mention that they are lost.

Do not request the assistance of members of the public in the search (i.e. 'we have a lost child – has anyone seen them?')

Should the lost person not be located after an extensive search it may be necessary to call the police service (i.e. vulnerable persons).

I have read and understood the information contained in the Emergency Operating Procedures.

Name:

Position held within club:

Signature:

Date:



RISK ASSESSMENT FORM

CLUB SITE/ LOCATION:

(Name of training location/match relevant e.g. GHA, Whitehill, Nethercraigs, Bannerman, Petershill etc)

ASSESSORS NAME:

ASSESSORS SIGNATURE:

ASSESSMENT DATE:

ASSESSMENT REVIEW DATE:

ACTIVITY:

HEAD COACH/ LEADER:

PROCEDURES:

- Identify potential hazards which could reasonably be expected to result in significant harm
- Identify who might be harmed
- Consider existing controls - is the risk of significant harm low/ unlikely, medium/ possible or high/ probable
- Where the risk is identified as medium or high, identify the action required
- If the risk is low, further precautions are optional and the activity may proceed
- Where the risk is medium, it is desirable that further precautions are taken before the activity proceeds
- If the risk is high, it is essential that the activity does not proceed until the risk has been significantly reduced

TASKS UNDERTAKEN: activity/ area assessed	HAZARDS IDENTIFIED: NB: Any serious or imminent danger will need a procedure	RISK: Low/ Medium/ High	PERSON(S) AT RISK: i.e. coach, juniors, adults with special needs	EXISTING CONTROLS:	ADDITIONAL CONTROL MEASURES REQUIRED:	TARGET DATE: for action by	COMPLETED ON: date and initial
Setting up of seven-a-side goals	Number of goal pieces weight of object possibility of posts moving during game/practice	Medium	Coaches, players, spectators	at least two coaches' erect goalposts instructions clearly labelled and procedures followed (training)	additional weights to be placed on goals to hold them down during game/training	Immediate	XX/YY

RISK ASSESSMENT FOR JUNIOR MEMBERS

Junior Club Sessions

The risk assessment process for junior sessions should only require the same procedures as your normal risk assessment process. You must be aware that many children have a lack of fear and they do not see the danger. Therefore ALL hazards, even those which have been rated as a minimal or tolerable risk must be regarded as a priority and actions must be put in place to reduce the risks. There is a risk ratings schedule to assist in planning the action to take.

It is recommended that all coaches continue to do their informal risk assessment, but this should also be backed up by a regular formal, written report.

The risk assessment should look for and correct any problem which may cause injury or harm, depending on the nature of the setting, resulting from:

- Breakages, weather damage or vandalism
- Rubbish or animal feces
- Inadequate cleaning
- Blocked access to emergency exits or along walkways
- Instability of large equipment, fences or barriers
- Dirty water in playing/training areas
- Nonfunctioning of door or gate locks.

Safety Briefing for Junior Members

- It is important to brief junior members on their responsibilities for protecting themselves and others against injury or harm. They should be encouraged to enjoy the sessions and enjoy new experiences without being subject to high risks. Ensure that all participants:
- Wear the correct football clothing e.g. Boots and not trainers
- Wear the correct protective clothing e.g. shin pads
- All clothing and protective clothing fits correctly and laces are done up properly
- Remove all jewelry, chewing gum etc.
- Are familiar with the environment in which they are playing, point out any potential obstructions or hazards
- Report any damage to equipment to the person in charge
- Warm up so that they are ready for exercise
- Always listen to instructions
- Bring a drink with them to every session
- In the sun – wear a hat, long sleeved T-shirt, high protective sun cream

Risk Ratings Template

Having completed the risk assessment, you should be able to clearly identify the risk rating i.e. minimal – intolerable and prioritise them depending on how harmful the risks are, who may be harmed, to what extent, how likely etc.

RISK RATING = SEVERITY OF HARM X LIKELIHOOD OF OCCURRENCE

	Slightly Harmful	Harmful	Extremely Harmful
Highly Unlikely	Minimal Risk	Tolerable Risk	Moderate Risk
Unlikely	Tolerable Risk	Moderate Risk	Substantial Risk
Likely	Moderate Risk	Substantial Risk	Intolerable Risk

NB. Tolerable here means that risk has been reduced to the lowest level that is reasonably practicable.

ACTION PRIORITY: (ranking risks in priority order)

Risk Level	Action/ Priority	Timescale
Minimal (low)	No immediate action is required and no documentary records need to be kept.	Review annually
Tolerable (medium)	No additional controls required. Effective solutions should be considered. Monitoring and auditing is required to ensure that the controls are maintained.	3 - 12 months
Moderate (medium)	Activity should NOT be started or continued until the risk has been evaluated and controls implemented.	1 - 3 months
Substantial (high)	Activity should NOT be started until the risk has been reduced. Resources may have to be allocated to reduce the risk.	1 - 4 weeks
Intolerable (High)	Activity should NOT be started or continued until risk has been reduced. If it is not possible to reduce the risk, even with unlimited resources, activity has to be prohibited.	Immediate

STAFFING RATIOS

Through the Scottish FA Quality Mark there are set minimum ratios for coaches/leaders to young people for coaching young people under the age of 18 years.

The following circumstances should be considered for adjusting the ratios of children per coach:

- The nature of the activities
- The sex, age, attitudes, disability, behavior and competence of the young people
- The extent to which people with special needs are included within the group
- The competence, experience and expertise of the coaches
- The duration and nature of the travel to and from the activity
- The type of venue
- The weather conditions
- The need to maintain a complete programme of supervision
- The risk assessment for each activity – high, medium or low risk

Providers of open access activity (as defined in The Children Act 1989) should use the ratio of 1:8 as a guideline for all activities involving 4.5 to 8-year-old children. Therefore the club must ensure adequate numbers of staff to organise these activities. A ratio of 1:10 is recommended for children aged 8 years plus, although the Quality Mark states a ratio of 1:20 for coaching sessions as a minimum.

In any club situation it is highly recommended that **TWO ADULTS SHOULD BE PRESENT AT ALL TIMES** with a group of children.

This protects the children and also the coach from difficult situations or false allegations and should form part of a club's child protection procedures. Whenever possible ensure that there is a balance of **MALE AND FEMALE SUPERVISORS** for all activities regardless of whether the group of children are boys, girls or mixed. For all activities at least one adult must be a qualified first aider.

The responsibility delegated to all accompanying adults (coaches, instructors, leaders or helpers) should be clearly understood by all, including the children under their care.

Thorough briefings for accompanying adults are vital. When a volunteer assumes the role of coach it is essential that he/she is appropriately approved for the activity and relevant insurance's are in place.

People with special needs

The safety of people with special needs requires more consideration and planning, as what may be a low risk activity for most individuals, could be a high risk activity for those with special needs. Attention should be given to:

- Access to the site and its facilities
- Security Arrangements
- Medical needs
- Additional support staff and carers
- Dietary requirements
- Emergency procedures and specialist advice in an emergency

GUIDELINES FOR DEALING WITH AN INCIDENT/ACCIDENT

Step-By-Step Advice for Club Members

Glasgow City Football Club

1. Stay calm but act swiftly and observe the situation.
2. Is there danger of further injuries?
3. Listen to what the injured person is saying.
4. Alert the first aider who should take appropriate action for minor injuries.
5. In the event of an injury requiring specialist treatment, call the emergency services.
6. Deal with the rest of the group and ensure that they are adequately supervised.
7. Do not move someone with major injuries.
8. Wait for the emergency medics.
9. Contact the injured person's parent/carer.
10. Complete an incident/accident report form.



INJURY/INCIDENT REPORT FORM

TO BE FILLED IN BY THE COACH/ INDIVIDUAL IN CHARGE AT THE TIME OF THE INCIDENT.

Coach/ Individual's name:

Tel no:.....

Address:.....

.....

Postcode:

About the injured person:

Full Name:

Tel no:.....

Address:

.....

Postcode: Male/ Female:

Age:.....

About the Incident:

Activity taking place at time of incident:

Date & Time of incident:

Place of incident:

Description of incident:



Action Taken:

Action taken by Coach/ Leader/ Club Rep:

Were the emergency services called (if yes, provide details):

Action taken by Doctor or Nurse (if appropriate):

Diagnosis:

Signatures:

Signature of Coach/ Leader/ Club Rep:.....

Signature of casualty (if possible):

Signature of witness (1)

Address:.....

Signature of witness (2)

Address:

FIRST AID

General information about First Aid equipment

It is essential that first aid equipment is checked frequently, therefore ensuring sufficient quantities and all items are usable. Always replenish contents of the first aid boxes and kit as soon as possible after use. Items should not be used after the expiry date shown on packets.

On-site first aid equipment

First aid boxes should be made of suitable material and designed to protect the contents from damp and dust. First aid box should be clearly identifiable. The first aid box should contain only those items which a first aider has been trained to use.

In most cases the first aid box should contain the following:

- One guidance card & contents card
- Individually wrapped sterile & waterproof adhesive dressings (assorted sizes), appropriate to the club environment
- Sterile eye pads, with attachment
- Six individually wrapped triangular bandages
- Safety pins
- Medium & large sized, individually wrapped, sterile un-medicated wound dressings
- Antiseptic tissues, sterile water or saline in sealed disposable containers
- If emergency blankets are provided, store alongside equipment & in such a way as to keep them free from dust & damp.
- Disposable aprons and plastic gloves should be provided near the first aid materials
- Blunt ended scissors should be kept where there is a possibility that clothing, or material needs to be cut.
- Plastic disposable bags for soiled or used first-aid dressings should be provided.
- Travelling or outdoor first aid

The contents of travelling first aid kits should be appropriate for the circumstances in which they are to be used. At least the following should be included:

- Card giving general first-aid guidance
- Individually wrapped sterile adhesive dressings
- One large sterile un-medicated dressing
- Two triangular bandages and safety pins
- Individually wrapped moist cleansing wipes
- In addition, it may be necessary to purchase sports specific first aid equipment depending on the nature of your activity e.g. stretcher etc.