14) Risk Assessment Form for Online Pre-recorded Delivery

Type of service	Virtual Pre-record	ed							
Activity Description		s classes and physical activity sessions which are part of structor cannot see or hear the participants. The class wil					way de	ivery	
Assessment Date			Review	v Date					
Organisation/Department			Asses	sor					
Participant Profile			Numbe	er of Peo	ple				
Location		-	Risk L	evel			-		
Hazard			Initia	l Risk Ra (S x L)	ating		Fina	l Risk R (S x L)	-
(Something with a potential to cause harm)	Person at Risk	Existing Controls (Consider Hierarchy of Control)	Severity	Likelihood	Risk Rating	Further Controls Required (Consider Hierarchy of Control)	Severity	Likelihood	Risk Rating
Disclaimer Issues: Participants must understand potential risk and exercise common sense.	Participant	Participants must be provided with a written disclaimer before signing up to access pre-recorded session.							
Data Protection/ Privacy Issues: Sending sensitive information about referrals to instructors' personal devices.	Participant	Consent confirmed with participant prior to sending contact details to instructor. Any personal information MUST be sent within password protected documents. Instructors agree to SLA stating that any participant information MUST be deleted from their personal							



Data Protection/ Privacy Issues: Instructors use their own devices to communicate with participants.	Instructor	 devices when the project is complete and after securely sending all records back to the Coordinator. Information must only be accessible to the relevant parties, and must be kept secure in line with GDPR. Consent confirmed with instructors that they are comfortable using their own devices for participant communication purposes. Participants must be made aware that following the end of the project, they should only contact instructors via professional e-mail addresses and contact numbers. 				
Home Environment The participants' home environment may not be optimal for exercises instructed, and when communication is via pre- recorded the instructor cannot see the environment to advise/ take this into account.	Participant	Although participants are accessing a pre-record, they will still need to undergo a consultation before accessing. The pre-record library will be hosted on a hidden page and will be invite only. The consultation prior to the session should include discussion/viewing of equipment and environment at the participants home, including obstacles, chairs, and any exercise equipment.Instructors should advise participants on how to make their space safe and appropriate for the type of exercise they are prescribing.Participants should be advised to tell someone what they are doing if they live alone, particularly if they are at risk of a fall or another health event.Instructors should advise on suitable clothing and footwear for exercise.				



Environmental conditions Air temperature too warm/cold If the air temperature is too warm or too cold it may put the participant at risk of illness or injury.	Participant or Instructor	Instructor to mention room temperature and ventilation when talking about space (in their pre-assessment)- temperature should be around 18 degrees. Participants may want to open some windows to improve ventilation. More info on web page.				
Technology Poor sound quality	Participant	Instructors should ensure that participants are able to clearly hear instructions during the recording. Where possible, the instructor should send out the information via e-mail following consultation and session. The instructor may need to follow up with a phone call.				
Licencing Issues: must comply with PPL and PRS Licencing if using licenced music.	Instructor/organisa tion	Must ensure that the correct music licence is held or that only PPL and PRS free music is used.				
Internet A poor internet connection may result in a participant or instructors screen freezing, becoming disconnected or sound/picture distorted or out of time as examples. This may result in injury or illness due to not being able to follow the session correctly.	Participant	The instructor should be asking about the quality of internet access over the phone.				



First Aid Incident Participant may fall ill or becomes injured during the session	Participants or Instructor	Due to the instructor not being able to see participants, we would be unaware if a participant became ill or injured, therefore co-ordinators need to ensure participants are accessing the safety video which outlines procedures. This will include that they should only participate if fit, well and able and it would				
		be advisable to have a phone close by and exercise when others are also in the house.				
Exercise/ Activity No instructor supervision during exercise activity	Participant	All instructors qualified in delivery of the session. Participants cannot be observed and corrected during exercise, so instructors must ensure that resources provided are suitable for the participant's level of experience in following exercise instructions, as well as their fitness level. Instructors should double check with participants what forms of exercise and media they are most confident with. All pre-recorded physical activity videos have been designed and delivered by experienced and suitably qualified industry experts. Use simple, easy to follow language when giving advice. Promote the importance of a warmup and cool-down to ensure adherence to these components. Participants must be educated on physical signs that they should stop exercising, and they should keep any medication nearby that could be needed (inhaler, GTN spray etc). Participants are encouraged to inform instructors of any changes to their health or medication status				



Screening Limited time / instructor may forget with this being pre- record, to explain how things are going to work, pre-screen etc may result in injury or illness	Participant	Instructors should ensure they undertake a screening process with every participant they sign post to the pre-recorded library. This should be followed up by a phone call. Instructor may suggest not to exercise or give tailored adaptations throughout.				
Inappropriate Activity Prescribed Unsuitable activity pitched at the wrong level could result in pain, injury or even a medical event.	Participant	All approved pre-recorded classes contain information about how to exercise safely and monitor exercise intensity. Pitch exercise delivery at a lower intensity/ difficulty level than if the exercise was supervised. The instructor may create tailored programmes, or select appropriate resources from a database of approved physical activity videos/ programmes/ apps however we need to ensure that these are hosted in one location with the other pre-records. All instructors must be appropriately qualified to work with the individuals on their caseload. Instructors may screen participants and refer them back to the coordinator to reassign if they are unsuitable.				
Mental Wellbeing The pandemic has resulted in some difficult and painful experiences for a great deal of people, particularly those in the higher risk groups. Some of these topics are very likely to	Instructor and Participant	The Coordinator should equip instructors with the contacts to refer participants for further support where needed. The Coordinator should ensure that instructors are able to pace their calls/ shifts to allow enough downtime to manage their own mental wellbeing.				



come up during consultation,		The Coordinator should link instructors to suitable				
potentially causing some		support services in case they feel that their mental				
mental distress to the participant and instructor.		wellbeing is affected during this programme.				
participant and instructor.		The Coordinator should regularly check-in with				
		instructors and be available to support them with				
		questions or concerns.				
		Instructors should approach sensitive topics with care				
		and compassion when speaking to participants.				
		Physical activity may not be a priority.				
		Instructors should encourage participants to engage				
		with wellbeing tools/ resources as well as those related to physical activity.				
COVID	Participant	The Coordinator will keep on top of COVID rehab				
		guidance as it emerges and maintain communications				
The long term effects of		with hospital services involved in the first stages of				
COVID mean that COVID		COVID rehabilitation.				
rehabilitation referrals are						
likely, though this is not		Instructors should apply the principles of known				
included in standard Exercise		exercise referral conditions to the symptoms of long				
Referral training.		COVID. For example; breathlessness and chronic				
-		fatigue.				
This is such a new situation						
that there are not yet		Instructors may complete the following CPD to				
standardised guidelines for		improve their confidence in working with sufferers of long COVID: https://www.e-				
working with sufferers of long		Ifh.org.uk/programmes/covid-19-recovery-and-				
COVID		rehabilitation.				



Cardiac Rehab Specific	Participant	 Participants should only use evidence based, pre-recorded Cardiac Rehab exercise videos delivered by experienced and appropriately qualified Cardiac Rehabilitation Instructors, such as those provided by the British Heart Foundation <u>Cardiac rehabilitation at home BHF</u> Participation should only occur if the participant has received a cardiac rehabilitation assessment and started or completed a programme. Water should always be available to drink Water should not exercise if they feel unwell Participant should not continue to exercise if they have chest pain, nausea, and dizziness, unusual joint pain, become very breathless, or cold and clammy Participant should monitor their exertion through a combination of RPE and heart rate if reliable method available to measure. Participant should take medication as normal on day of exercise. 				



Instructor performs a pre exercise checklist prior to		
exercise to ensure participant is suitable to exercise		
on that day.		
Refer back to GP if they hit any of the following criteria. Decrease in exercise performance, worsening of angina, worsening of other symptoms, uncontrolled tachycardia, any further cardiac event, resting BP >180/100 or symptomatic hypotension. Instructor should ensure correct warm up and cool down is demonstrated with correct length of time and		
suitable activities.		
Instructor should encourage a lower training heart range for those considered high risk.		
Instructor should promote the avoidance of isometric exercise and the avoidance of Valsalva manoeuvre.		
Participants should be educated in the correct protocol in case of angina and correct use of GTN		
In the absence of a functional exercise test (FET), exercise professionals can utilise validated tools (e.g. Duke Activity Status Index) and detailed history taking to gauge the patient's current level of activity and exercise tolerance.		
Resistances can be quantified through using household items such as cans or bottles of water, and progressed gradually as tolerated		

During this activity, what could go wrong resulting in an emergency situation?	
How could this emergency situation be prevented / controlled?	



Who should respond to a potential emergency situation and how? Have staff been trained to respond to this emergency situation?	
Could any non – routine changes affect the safety arrangements in	
place for this activity? (E.g. weather, people, equipment etc.) What	
can be done?	

Risk Assessor (s) Name(s):	Risk Assessor(s) Signature (S):		
Authorised By:	Authoriser Signature:	Initial	
Date Conducted:	Date of Next Review:		
	Date of Review:		
	Date of Review:		
	Date of Review:		
	Date of Review:		

Risk Assessment Conclusion

Potential Severity of Harm	High Death, paralysis, long term serious ill health.	Medium	High	High
	Medium			
	An injury requiring further medical assistance or is a	Low	Medium	High
	RIDDOR incident.			



L* = Likelihood of harm	1 - Unlikely	2 - Possible	3 - Quite possible	4 - Highly possible	5 - Very likely
S* = Severity of harm possible	1 - Possible risk of injury	2 - Minor injury	3 - Over 3 days injury	4 - Major injury	5 - Death/Disablement
RR* = Risk Rating (LXS) 1 - 5 Low priority 6 - 10 Medium priority 12 - 25 High priority - Immediate Action required					

Low Minor injuries not resulting in any first aid or absence from work.	Low	Low	Medium
	Low The event is unlikely to happen.	Medium It is fairly likely to happen.	High It is likely to happen.
	Likelihood of Harm Occurring		

Risk Rating Definitions				
Low	This is an acceptable level of risk. No further controls are required as the risk rating cannot be reduced any further. However, it is advised that continual monitoring occurs in order to ensure that no changes / deviation of control measures occur.			
Medium	It is advised that further controls are implemented to reduce the risk rating to as low a level as possible. If the risk cannot be reduced to lower than a medium, then on site monitoring should occur to ensure that all stipulated controls are being adhered to.			
High	This is an unacceptable risk rating. Urgent interim controls should be implemented to reduce the risk so far as is reasonably practicable. If the risk rating cannot be reduced to lower than a High , then a documented safe system of work should be implemented to control the activity. It may be necessary to seek further professional advice. Serious considerations should be given to the validity of carrying out the activity at all. Regular monitoring of the activity should occur.			

