|  |  |
| --- | --- |
| Job Task:  Poolside Coaching | **Masters Swimming Branch** –SA |
| **Applicable Positions (Typical)** – State or Club Coach |
| **Location** – Any Pool in SA (Indoor or Outdoor) |

# RISK IDENTIFICATION AND CONTROLS

**R1** Risk without controls **R2** Risk with controls

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Procedural Step(s)** | **Possible Hazard(s)** | **R1** | **Safety Control(s)** | **R2** |
| Preparation – outdoor pool in cold/wet weather | * Cold/chill factor * Rain * Hypothermia * Slips/trips/falls (slippery surfaces) | S | * Plan ahead – check weather forecasts * Wear warm, weatherproof clothing * Bring hot beverage to pool * Take breaks in shelters * Shorten training session * Appropriate footwear | L |
| Preparation – outdoor pool in hot weather | * Heat stress * Sunburn | S | * Plan ahead – check weather forecasts * Follow MSA Heat Index rules (i.e. limit exposure if temperature is over 40 degrees – see Section 9 of MSA National Safety Policy) * Slip, slop, slap * Take regular breaks under shaded areas * Ensure plenty of fluids are available * Take a dip in pool * Shorten training session | L |
| Storm or lightening – outdoor pool | * Lightening strike | H | * Plan ahead – check weather forecasts * Leave open areas * Cancel training session/carnival – must stay clear of pool for at least 30 minutes after the last roll of thunder | L |
| Attempt to rescue MSSA swimmer in difficulty – particularly in deep pool, where pool staff are not present | * Swimmer may drown * Coach intervenes and may struggle | S | * Ensure coach or nominated lifeguard has current lifesaving qualifications * Ensure pool has appropriate rescue equipment nearby – buoys, ropes, defibrillators, phones, etc. * Train members on where to get ambulance the best access to pool | L |
| Coaching position on pool deck | * Fall into pool * Strike pool edge or other swimmers | L | * Try to minimise standing on pool edge * Wear shoes or sandals with good grip * Place mats over slippery surfaces | L |
|  | **Overall Risk Rating** | **S** | **Overall Risk Rating** | **L** |

**RISK RATING GUIDE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | |  | **Consequence** | | | |
|  | |  | **Death**  Catastrophic Illness/Injury | **Major**  Extensive Injuries | **Moderate**  Medical Treatment Required | **Minor**  No Injuries |
| **Likelihood** | **Almost Certain**  Occurred Before/Expected | | H | H | S | S |
| **Likely**  Probably Will Occur | | H | S | S | S |
| **Moderate**  May Occur At Some Time | | H | S | L | L |
| **Unlikely**  Unusual or Rare Situation | | S | L | L | L |
|  | |  | **High (H)** – Cease exposure immediately until protection, approved at senior management level, implemented | | | |
|  | |  | **Significant (S)** – Procedures alone may not be enough, senior management attention required | | | |
|  | |  | **Low (L)** – May be managed by routine procedures, some risks in this category may be acceptable | | | |

**SPECIFIC TASK REQUIREMENTS**

|  |
| --- |
| **Qualifications or Experience** |
| * Workplace induction |
| **Training** |
| * Manual handling training |
| **Engineering Details, Certificates and WorkCover Approvals** |
|  |
| **Relevant Codes of Practice, Legislation and Standards** |
| * Manufacturer’s Operators Manuals (for timing devices etc.) * Work Health and Safety Act 2012 (SA) * Work Health and Safety Regulations 2012 (SA) * Code of Practice: Hazardous Manual Tasks (December 2011) * Masters Swimming Australia (MSA) National Safety Policy – refer to:   <http://www.mastersswimming.org.au/Portals/26/Information/Policy/MSA%20National%20Safety%20Policy%20-%20May%202012.pdf>   * MSA National Risk Management Policy – refer to:   <http://www.mastersswimming.org.au/Portals/26/Information/Policy/Risk%20Mmt%20Policy%20May%202013.pdf> |

|  |
| --- |
| **Plant/Equipment** |
| * Timing devices * Underwater cameras * Underwater mirrors * Training aids |
| **Maintenance Checks and Site/Workplace Inspections** |
| * Refer to manufacturer’s operators manual |

# Suggested Improvements (in order of priority)

Prior to using any new equipment, a Safety Analysis/Risk Assessment must be completed and signed off by the Club President and Coach, and requirements fully implemented

**Additional Comments**

**Assessment Dates**

|  |  |  |
| --- | --- | --- |
| **Initial Assessment Date** | **Current Assessment Date** | **Reassessment Date** |
|  |  |  |

**Assessors**

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Date** |
|  |  |  |

**Recommendation** 🞎 Follow up required

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Date** |
|  |  |  |

**Approval**

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Date** |
|  |  |  |

*I have read and understood this Safe Work Method Statement*

|  |  |  |
| --- | --- | --- |
| **Name** | **Signature** | **Date** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |