Pitch 9 Climbing Ltd

Boulder Brighton
Unit 7b&c Victoria Road Trading Estate

General Risk Assessment

Carried Out By: Tom Bauer, Director

Date: April 2026

Review Date: April 2027

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PARTICULARS	
Business Name: *Pitch 9 Climbing Limited*	**Trading as:** *Boulder Brighton*
Premises Name: *Unit 7b&c Victoria Road Trading Estate* **Address:** *Victoria Road Trading Estate* *Victoria Road* *Portslade* *BN41 1XQ*	**Use of Premises:** *Indoor Climbing Centre*
Tel No: 01273 422408	**Nominated Director Responsible for Health and Safety:** *Mr T.Bauer* *Director* *CIEH Advanced Health and Safety Award*
Date of Risk Assessment *April 2026*	**Date of Review:** *April 2027*
Name and relevant details of the person who carried out the Risk Assessment and/or standard used for assessment: *Mr T.Bauer (Director Responsible for Health and Safety)* *CIEH Advanced Health and Safety Award*	

General Statement of Policy
It is the policy of Pitch 9 Climbing Ltd to protect all persons including employees, customers, contractors, and members of the public from potential injury and damage to their health which might arise from activities taking place at Boulder Brighton as far as reasonably possible within the context of an adventurous activity. *The company will provide and maintain safe and healthy working conditions, equipment, and systems of work for all employees and provide such information, training, and supervision as they need for this purpose.* *The company will give a high level of commitment to health and safety and will comply with all statutory requirements.*

MANAGEMENT SYSTEMS

Commentary:

Health and Safety Management is the responsibility of the Director named in this risk assessment. The action plan produced as a result of this risk assessment will be checked by that Director.

All regular daily checks will be detailed and ticked off on the daily task sheets by the duty managers. All regular periodic checks will be contained within the Health and Safety Log file. The date for reviewing this risk assessment is also detailed on the title page and this is the responsibility of that same Director.
A risk assessment is completed to ensure adequate health and safety and will be reviewed as necessary and as scheduled. Any deficiencies identified by the risk assessment process will be prioritised and rectified accordingly.

The Director Responsible for Health and Safety is responsible for:

- *Deciding the Health and Safety protective and preventative measures*
- *Ensuring they are implemented and communicated to other employees*
- *Routine periodic checks of all systems*

There are no other occupiers to inform of safety issues or to co-operate and co-ordinate with.

Reporting

Incidents and accidents beyond the use of a plaster are reported using an incident report form by the first aider or duty manager on the scene. These include a picture of the scene. The report is reviewed by the duty manager on the day and any immediate action taken and noted. The Operations Manager reviews all incidents on a regular basis and records any further action taken. The Director responsible for Health and Safety checks this procedure is followed.
Incidents where professional medical treatment is sought immediately fall into our major incident categories, other incidents are categorised as minor incidents.
Additionally where CCTV footage of an incident is available this is captured and kept for any major incident or any incident involving a minor.
RIDDOR: We have communicated with the HSE and have been advised NOT to report incidents happening in the normal course of the sport. Staff injuries leading to more than 7 days absence or unusual major incidents to the public not happening in the normal course of the sport should still be reported using RIDDOR.

REFERENCED RESOURCES

Reference Works:

British Mountaineering Council
BMC Climbing Wall Manual
Undercover Rock (Bristol Climbing Centre and Association of British Climbing Walls)
HSE "Five Steps to Risk Assessment"
HSE Industry good practice guides: Leisure
ABC Operational Guidelines (published 2023 to members)

Referenced Individuals:
Keith Fleming MIC, IML

Referenced Events:
Blokfest 2012 / Blokfest 2013 / Blokfest 2014
SIBL from 2010 and earlier

Referenced Organisations / Other Climbing Walls:
The Castle Climbing Centre, London
White Spider Climbing Centre, Kingston
The Arch climbing centres, London
ABC (Association of British Climbing Walls) – aspirant member

Accident Logs March 2013 to December 2025

NOTE: From April 2020 to April 2021 activity was either stopped or severely limited in number due to coronavirus (see separate, specific risk assessment on communicable disease). In many cases we remove data from these years to allow comparisons

Major injury: Any injury resulting in the casualty leaving to receive immediate hospital treatment
Minor injury: All other injuries requiring first aid

Injuries by Year

Year	Minor	Major	Total incidents	Minor incidents per 10,000 check ins	Major incidents per 10,000 check ins	Tot incidents per 10,000 check ins
2013	18	9	27	4.30	2.15	6.46
2014	41	10	51	5.83	1.42	7.26
2015	54	9	63	6.62	1.10	7.73
2016	44	20	64	4.80	2.18	6.98
2017	78	22	100	7.78	2.19	9.97
2018	99	25	124	9.12	2.30	11.42
2019	140	33	173	9.86	2.33	12.19
2020	53	18	71	7.84	2.66	10.50
2021	61	23	84	6.96	2.62	9.58
2022	92	20	112	6.25	1.36	7.61
2023	114	25	139	6.53	1.43	7.96
2024	129	36	165	7.29	2.04	9.33
2025	91	27	118	5.35	1.59	6.94

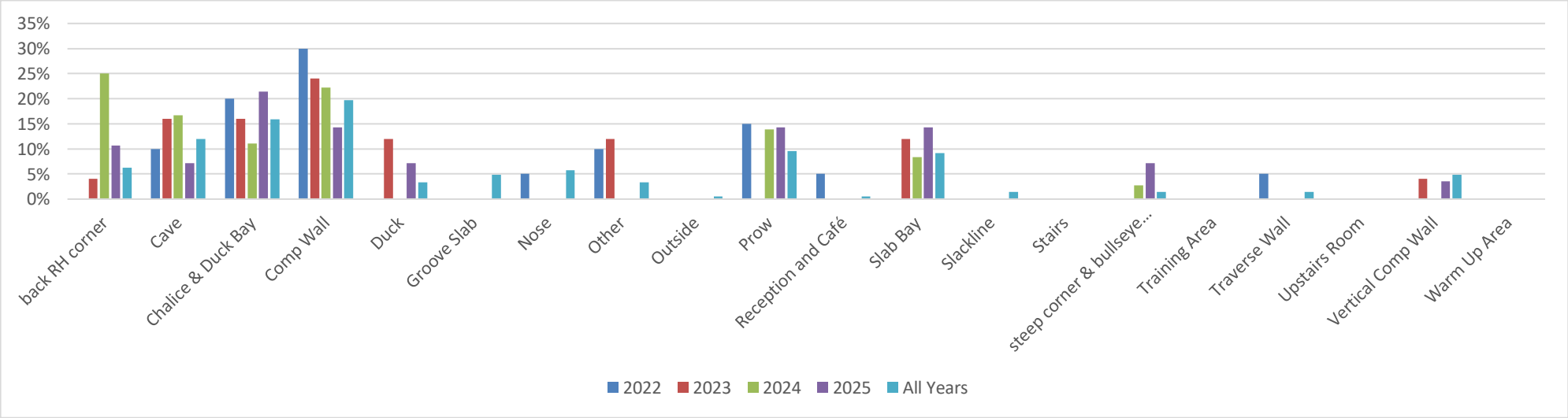
Injuries in 2025 show a decrease year on year from 2024. The all time average for major incidents per 10,000 check ins is 1.95 and over 2025 it was 1.59, not as low as 2022 or 2023 but well below 2024 levels. There appear to have not been any excess risks through 2025.

One comparative figure is from a study on soccer in America at 7.21 injuries per 1000 hours played (https://pubmed.ncbi.nlm.nih.gov/34063226/)
In 2025 this compares to 0.08 major injuries per 1000 hours at BB if you took each check in as an average of 2 hours spent climbing.

All Injuries by Location

Year	back RH corner	Cave	Chalice & Duck Bay	Comp Wall	Duck	Groove Slab	Nose	Other	Outside	Prow	Reception and Café	Slab Bay	Slackline	Stairs	steep corner & bullseye slab	Training Area	Traverse Wall	Upstairs Room	Vertical Comp Wall	Warm Up Area	Grand Total
2018		13	15	12	10	9	10	12		10	2	15	7			2			9	2	128
2019		12	28	19	13	16	18	14		14	1	17	14			1	5		5	1	178
2020		10	7	8	4	8	7	2	3	3		8	2				1		8	1	72
2021		12	8	22	3	9	5			6		11	2				3	1	2		84
2022		8	16	26	7	6	7	9		12	1	12	2				3	3	1		113
2023	4	18	13	30	12	7	1	15		9		13	7	1	3			1	5		139
2024	18	31	25	27	6			7		15		14			14	2			6		165
2025	**11**	**10**	**18**	**17**	**8**			**6**		**15**	**1**	**22**			**12**	**1**			**4**		**125**
Grand Total	33	114	130	161	63	55	48	65	3	84	5	112	34	1	29	6	12	5	40	4	1004

Percentage of Major Incidents by Location Years 2022 to 2025



Major Injuries by Colour of Climb (Difficulty)

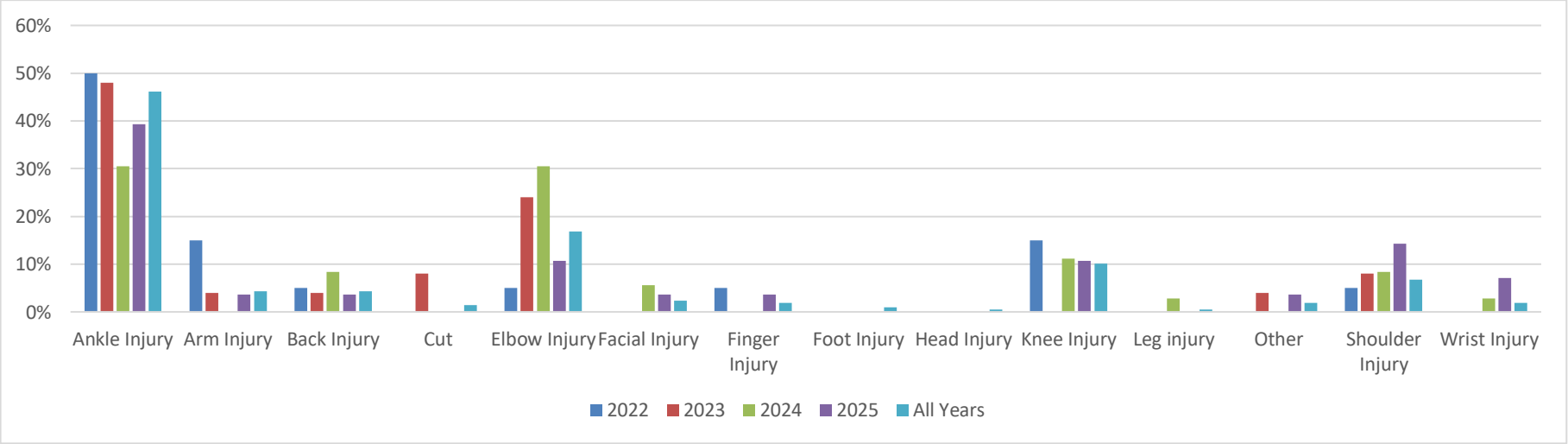
Year	01 Green	02 Wasp	03 Seagull	04 Pink Tiger	05 Mint	06 Grey	07 Red	08 Orange	09 Purple	10 Hot Pink	11 Yellow	12 Lime	13 Black	14 White	15 Blue	16 Wood	17 Candy	18 Yurple	19 Polka	20 Watermelon	Grand Total
2018	0	1	1	4	3	1	0	5	1			0	2	2	3		1	0	0	0	24
2019		0	1	6	2	2	4	0	3		1	2	0	1	4	0	0	2		0	28
2020			1	2	1	2	0	1	3		0	0	2	0	3			1	0	0	16
2021		1	4	2	1	2	2	2	1		1	1	1	0	3			2			23
2022	1	0	2	3	1	1	0	4	0	3	0	0	0	0	3			0			18
2023		2	0	2	3	2	5	1	2	4	0	1	1	0	1	0			0		24
2024		0	1	1	1	7	2	2	6	3	4	3	2	0	4		0				36
2025			0	2	2	2	1	4	1	3	2	1	2	0	3		0		1		24
Grand Total	1	4	10	22	14	19	14	19	17	13	8	8	10	3	24	0	1	5	1	0	193

A fairly evenly spread range across the difficulty spectrum. Not much stands out from the spread of major injuries across the difficulties

All Injuries by Injury Type

Year	Ankle Injury	Arm Injury	Back Injury	Bruise	Burn	Cut	Elbow Injury	Facial Injury	Finger Injury	Foot Injury	Head Injury	Knee Injury	Leg injury	Near Miss	Neck Injury	Other	Shoulder Injury	Wrist Injury	Grand Total
2018	36		4	3	2	5	14	6	18		4	16		2	1	5	10	2	128
2019	61	3	3	12	1	7	14	9	12		5	26		3	2	9	7	4	178
2020	26	3	4	2			6	3	4	2	1	7		1	2	3	7	1	72
2021	36	4	1	3		1	7	2	9	3		11			1	4	2		84
2022	41	6	9	2			7	2	12	2		12		1		6	6	7	113
2023	65	4	4	1		2	8	3	15	1	1	21			2	4	6	2	139
2024	51	7	6				17	6	19	1	3	21	14		1	7	8	4	165
2025	47	2	3				11	6	16		1	11	9		3	2	8	6	125
Grand Total	363	29	34	23	3	15	84	37	105	9	15	125	23	7	12	40	54	26	1004

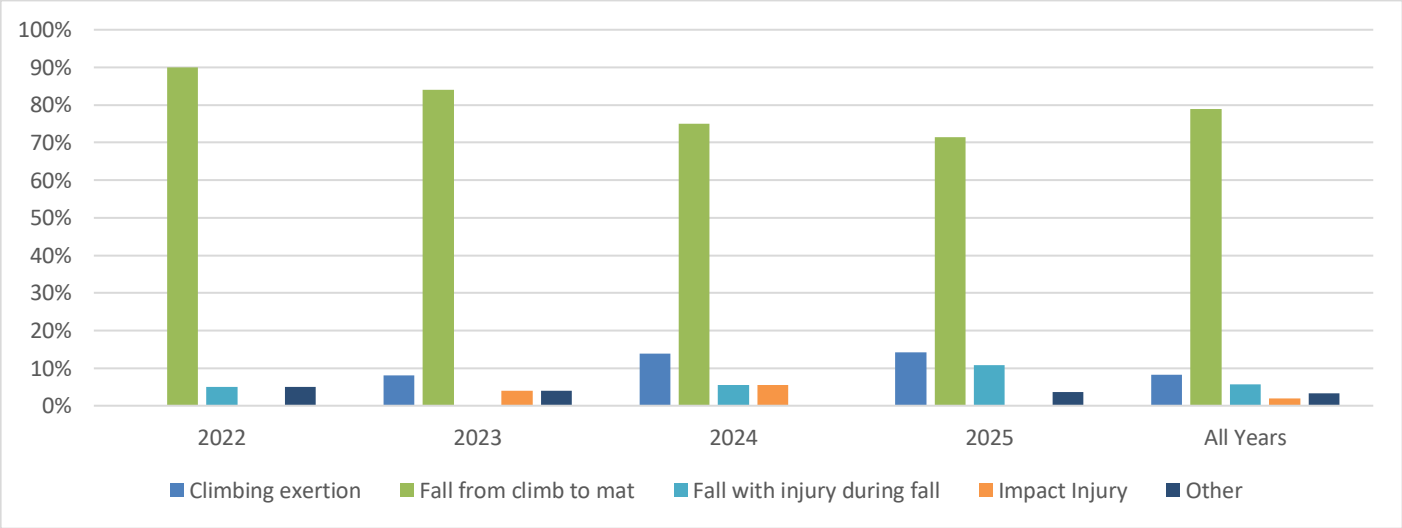
Percentage of Major Incidents by Injury Type Years 2022 to 2025



All Injuries by Cause

Year	Climbing exertion	Collision between participants	Fall from climb to mat	Fall from slackline	Fall with injury during fall	Impact Injury	Other	Spinning/Broken Hold	Grand Total
2018	38	6	50	6	17		10	1	128
2019	32	3	85	14	22		22		178
2020	16		37	2	11	2	4		72
2021	12		52	2	13	5			84
2022	19	1	64	1	7	8	13		113
2023	24		85	7	7	7	9		139
2024	39	1	76		19	24	6		165
2025	23		67		20	6	9		125
Grand Total	203	11	516	32	116	52	73	1	1004

Percentage of Major Incidents by Cause Years 2022 to 2025



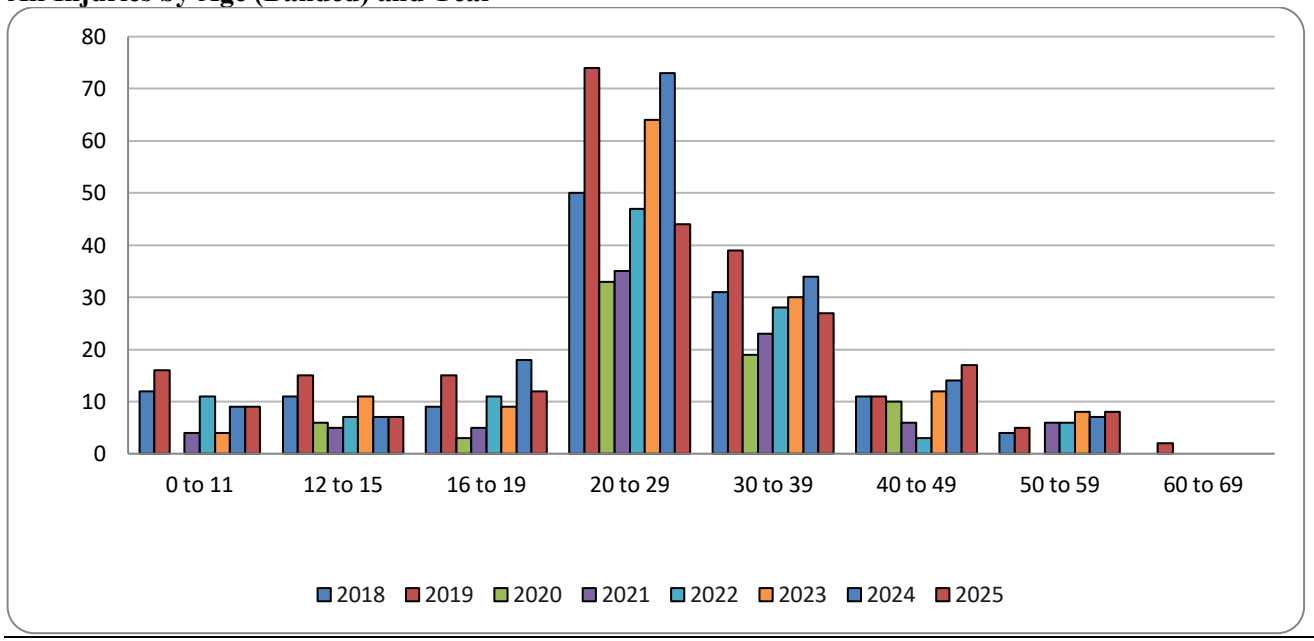
All Injuries by Gender (Using name as a proxy for gender)

Year	Female	Male	Grand Total
2023	61	78	139
2024	78	87	165
2025	59	66	125
Grand Total	198	231	429

Major Injuries by Gender (Using name as a proxy for gender)

Year	Female	Male	Grand Total
2023	16	9	25
2024	17	19	36
2025	20	8	28
Grand Total	53	36	89

All Injuries by Age (Banded) and Year



NOTE: From April 2020 to April 2021 activity was either stopped or severely limited in number due to coronavirus (see separate, specific risk assessment on communicable disease).

Notes:

The number of incidents (both total and major incidents only) in 2025 has dropped compared to 2024. Numbers are very similar to 2022 and 2023. No major changes to the overall trend in incidents is visible,

At 1.59 major incidents per 10,000 check in's it is below the average over the lifetime of Boulder Brighton (1.95).

Ankle injuries dominate both major and minor injuries which is an expected risk and in line with other years.

For major incidents the primary cause remains a fall from a climb to the mat. This is the main focus of the safety briefing and registration process and should remain so. In line with the new Bouldering Wall Instructor and development work at the ABC we have introduced falling and landing training and practice to our inductions and instructed sessions.

Age of injured parties has no standout age on an annual basis. The number of injuries by age is in line with our users age profile.

For the first time we have collated injuries by gender using their names to estimate their gender. There are some trends worth investigating here with the total number of injuries showing slightly more male than female incidents reported but major incidents show more female incidents than male in 2025 and 2023. Given that we can assume more male climbers than female climbers it looks like there is a higher prevalence of major incidents among female climbers than male climbers.

Nothing obvious stands out in the data to suggest any unusual activity or particularly dangerous periods. The accident reporting would suggest that we should continue to carefully warn all customers about the possibility of injury when falling from the walls unexpectedly.

Reference Number:	GH01				
Area Assessed:	General	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	General Hazards	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the general category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Slips and Trips, general	Users, Spectators, Staff	Staff check the main area floor regularly and move hazardous items or clean up spills and mess. Daily checks are ticked off on duty managers daily tasks sheet. Introduction video telling users to keep their bags in the shelving or lockers and written statement in the registration forms, see **Acknowledgement of Risk Form - risks**.	No
2	Injury to persons gaining access to the bouldering area without a safety induction	Users	Staff look out for climbers not properly signed in with reference to membership details including photo id. All people entering the centre through the front doors must speak to reception or use the check in terminal. Everyone is checked in to the RGP system every visit including supervisors. Group visits are an exception, using the group registration form as an alternative. Refer to file "***BB Registration Procedure***".	No
3	Collision injury caused by overcrowding forcing users too close to active climbers	Users, Spectators	At peak times there is an assessment of how busy it is by the duty manager. If appropriate, staff will give an extra warning about collision risk over the pa system and the duty manager assigns staff to walk the floor in the centre. Current evidence with Blokfest 2018 having over 350 people in the building suggests that these numbers are safe where the climbers are experienced. Special event banners are used to highlight the extra risks in these situations. The introduction of pre-booking only allows careful management of the type of climber and allows a ratio of new climbers : families : existing users. That means the total number of climbers is less of a risk as new users and families present a greater risk than existing users (see accident report summary). We will continue to use this to manage numbers, particularly of families as all non-members must book ahead for a pre-determined number of spaces.	No
5	Fire	All	Full fire risk assessment has been done and regular checks undertaken to ensure safety. See "***BB Fire Risk Assessment***" and "***Health and Safety Logs***"	See Fire Risk Assessment

6	Injury from electrical shock or burns from faulty electrical equipment	All	Electrical installation and all existing portable equipment inspected by a competent person and awarded a safety certificate and individual PAT test confirmation. Repeated as detailed in the "***Health and Safety Logs***". Staff trained to spot any defective plugs, discoloured sockets, damaged cables or switches and to take defective equipment out of use immediately. Staff also know how to turn off the electricity in an emergency, see "***Staff Induction Checklist***".	No
7	Injury from violence	Users, Staff	Staff asked to call police immediately if violent behaviour is seen in the centre. Staff advised not to confront or attempt to engage in any physical encounter but to leave the building and contact the authorities, see "***Staff Induction Checklist***".	No
8	Injury from fire and explosion as a result of a gas leak	All	Gas heater no longer used. Gas is decommissioned	No
9	Cardiac Arrest	All	Defibrillator installed on site for emergencies. Checked regularly by maintenance team and first aid course includes its use with a first aid trained individual on site at all times.	No
10	Harm caused by asbestos in the building	Contractors, Staff	Asbestos register kept electronically and in the office and given to any contractors or staff working on the structure of the building so that no asbestos is disturbed. Reinspection bi-annually.	No
11	Asbestos injury	Staff	Details of key asbestos containing areas added to staff induction procedures in the staff policy document.	No
12	Spectators getting injured when tempted to climb	Spectators	Spectators entering the building are asked to stay off the mats.	No
13	Persons under the influence of alcohol or drugs hurting themselves or others	Participants	Staff training through staff policy document reminded annually. Inclusion of this on customer registration waiver.	No
14	Further harm when moving a casualty	All	Staff training and acquisition of splint kit. Have had to accept that casualties may need moving to get them to hospital because of long wait times. We offer staff specialist training to prepare for that from Elements First Aid. Employees have first aid and then a refresher with a focus on when and how to move a casualty.	No
15	Fire or trip hazard from personal electronic devices plugged in by customers in the upstairs room	All	Staff made aware of the risk and check for personal devices left plugged in around the centre	No

Reference Number:	BO02				
Area Assessed:	Bouldering Wall	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	Bouldering	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
Some minor injuries and major injuries requiring an ambulance falling within these hazards.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Injury from landing badly on the mats This is the most frequent cause of injury according to the accident logs. Measures are carefully reviewed.	Users	Introduction to the centre informs users of the danger, see Induction Video, **Smartwaiver** and staff briefing prompt sheets. Users accept that there is a risk of injury and are given the only possible control measure – "climb down wherever possible, avoid uncontrolled falls". BMC Participation statement sign is up informing users that climbing involves risk. Extra care taken by routesetters so that on all problems up to 6a and wherever possible after that the hardest moves on a climb are not at the top, see "**Routesetters Procedures**". In line with the new BWI we will introduce progressive training in falling and landing for beginners starting on the mats. We would still suggest avoiding uncontrolled falls but are starting to work with participants on how to control basic falls. After accidents, pictures of each scene are saved with the report where possible: climbs and areas causing accidents are reviewed and any appropriate changes made by the DM on site or by the Operations Team at a later date. Where possible video footage from CCTV will be taken and stored for accidents involving minors or major incidents.	No
2	Injury caused by hold failure, either fall injury or impact injury from broken hold	Users, Staff, Instructors	ALL holds are pinned with screws to prevent spinning so there should be no examples of this. Duty managers are all trained to tighten or remove loose holds, see "***Staff Induction Checklist***". Risks of use of the centre informs users of the danger, see **Smartwaiver.** At registration users sign to say they have read the conditions of use referencing hold failure. Inspection of holds for damage on purchase and on route setting.	No

3	Impact injury from climber falling onto a person	Users, Staff, Spectators	Registration informs users of the danger, see Induction Video, **Smartwaiver** and staff briefing prompt sheets. Especially for supervised climbers this is emphasised at registration and any running or dangerous behaviour seen by staff leads to a conversation with the supervisor.	No
4	Tissue wounds from jewellery catching while climbing	Users	**Smartwaiver** informs users of the danger and mentioned in the induction video. Signage informs users of the danger.	No
5	Injury to U18 yr olds from using the training area	U18 Users	No injuries have been sustained in this area by minors or even inexperienced boulderers. Signs inform users "No U18's". The youth certification course makes it clear the training area is not to be used by U18's except under the supervision of a qualified instructor.	No
6	Strain injuries from using the training area	Users	Signage in training area informing users "These training aids are designed for use by experienced climbers"	No
7	Injuries from lack of common sense in minors using the wall	Users	Parental permission forms required for all minors. U16 users must be supervised or signed off to climb unsupervised by a qualified instructor. This could be as a result of doing the BB Youth Boulderer Course, see "***BB Registration Procedure***" or as a result of sufficient, and evidenced, experience. Examples of suitable experience are: regular climbing at a competition level, NICAS level 3 or above, NIBAS level 3 or above, BB Academy Level 3 or above, BB Level 2 and age 12+. Reference from a qualified instructor at another climbing wall.	No
8	Injury due to lack of physical preparation for bouldering	Users	Induction video informs users of the danger and recommends warming up.	No
9	Injury from boulderers not taking due care as a result of assuming BB staff were supervising	Users	Registration informs users of the danger, see Induction Video, **Smartwaiver** and staff briefing prompt sheets. Signage at entry to centre reminds boulderers they are unsupervised and responsible for their own safety.	No
10	Injury from falling "off mat" where mats extend sideways from walls	Users	Design includes 1.5m sidefall matting. Routesetters briefing includes setting notes to avoid "off mat" falls, see "**Routesetters Procedure**" Routes are risk assessed by setting team and removed if not safe. After any incidents they are re-assessed.	No
11	Climbers stuck after climbing over the top	Users	Registration informs users of the danger, see Induction Video, **Smartwaiver** and staff briefing prompt sheets.	No

12	Injury from poorly set climb	Users	Routesetters are chosen based on experience or trained in-house with careful monitoring of set routes. Routes are tested after setting to ensure they are suitable, see "**Routesetters Procedure**".	No
13	Falls onto a climbing hold when climbing	Users, Spectators, Staff	Routesetters are chosen based on experience or trained in-house with careful monitoring of set routes. Routes are tested after setting to ensure they are suitable, see "**Routesetters Procedure**". Any accidents are reviewed to see if holds should be removed.	No
14	Persons in the centre being fallen on	Anyone underneath a climber	If staff walking through the centre see a person standing in an unsafe position that is dangerous due to being under a climber they will verbally attempt to alert them to the danger. If that is not possible due to their age or the immediacy of the danger staff will physically move the endangered person out of the way.	No
15	Exacerbated injury from incorrect treatment after it has happened	Users	There is always one first aid trained member of staff on site, usually many more. All staff are trained to get a qualified first aider as soon as we become aware of an incident.	No
16	Failure to understand the Risks of Climbing	Users	The ABC have produced a set of recommended AOR forms in 2020. On studying these we consider the acknowledgement of risk forms in place on our website to cover all the areas in the ABC documents but to be slightly clearer and go further – for example highlighting not using the centre under the influence of drugs or alcohol. As a result, we have chosen not to adopt the ABC documents verbatim but have reviewed our own AOR forms and will continue to review those for changes.	No
18	Fall when downclimbing	Users	Added downclimb jugs and downclimb feet and lead setter considers placement for suitable downclimbing from all easier routes. Signed off on Setting Sheet for the day and scanned into records.	No

Reference Number:	OG03				
Area Assessed:	Bouldering Wall	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	Organised Groups	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Injury due to organised group users not having a normal induction session	Users	All instructed sessions begin with the safety information necessary to use the wall under instruction. See staff prompt cards Instructors all have an appropriate national qualification. Staff training is carried out to ensure up to date safety procedures in groups.	No
2	Injury due to organised group users not being adequately supervised	Users	Ratio of instructors to participants fixed for each “instructed” session at 1:10 for Under 10 years old and 1:12 for Over 9 years old. There is some discretion allowed on sessions involving a mix of ages across the boundary and the duty manager and instructor of the group at the time would make a decision. For a very large group, particularly of teenagers or adults, there may be a “supervised” session where Boulder Brighton instructors supervise sections of the climbing area rather than instructing specific individuals. For use of half the climbing space left or right, there is a minimum of 2 instructors. For use of the whole centre there is a minimum of 5 instructors.	No
3	Injury due to lack of physical preparation for session	Users	Adequate warm up and cool down time planned for each session. Where they are adults, users are informed of the physical nature of the session and advised to warm up sufficiently based on their experience of physical activity.	No
4	Head Injury	Users	Low risk of head injury and helmets considered but actually more hazardous due to impact injury from helmet on another user. Standard industry practice is NOT to use helmets in bouldering or on auto-belays due to risk of “hang-ups”.	No
5	Injury due to group not listening to safety briefing	Users	Induction briefing given using pictures on the induction cards or using physical demonstrations by the instructor to reinforce the message.	No

6	Injury due to poor behaviour in a group and individuals not listening to the instructor	Users	Instructors have a structure of official warnings for the individual (which are communicated to a parent or carer if a youth): First Warning – behaviour is dangerous and putting the individual or group at risk, they must follow instructions from the instructor, or they will be asked to leave the group. Parent or carer is informed at the end of the session. Time Out – behaviour continues to be dangerous and they are asked to sit out from the activity for a short period. Parent or carer is informed at the end of the session. Removed – behaviour continues to be dangerous, so they are asked to leave the group. Any payment is refunded, and further bookings are at the discretion of the chief instructor after consultation with the session instructor. Parent or carer is informed immediately, if they are not on site they are called and the participant must wait in the cafe area.	No
7	Injury to a school group climber from improper registration / induction	Users	School group leaders all sign the group registration form even if all individuals are registered and checked in through RGP. This ensures the group leader has a signature agreeing to the group terms. Groups fall into categories: Self-instructed – they bring their own instructor (qualifications must be on file). Instructed – we follow our ratios, the students can register individually or sign on the group form countersigned by the teacher responsible. YBA – The students are either already suitably experienced to climb unsupervised or will be instructed by us until they can be certified to climb unsupervised. If there is an instructor they will work with any unqualified students first and then act as a coach and general safety oversight once the group are qualified to climb without instruction.	

Reference Number:	RS04				
Area Assessed:	Bouldering Wall	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	Route Setting & Cleaning	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the Route Setting category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Falling objects from route setters injuring those around	Users, Staff	While open, route setting should take place in a contained area. This can involve hazard tape or a section of wall that is discrete by its nature. The route setter will make a decision about safety but the Duty Manager can observe and intervene if they consider it dangerous. Only route setters authorised by the Director for Health and Safety may work at Boulder Brighton and they sign the procedures, see "**Routesetters Procedure**". *Signs:* "do not climb above this" signs are available to place at either edge of the setting area so that sidefalls do not land on setting equipment or holds.	No
2	Falling injury while route setting	Route Setters	Procedures clearly outlined: see "**Routesetters Procedure**" Only route setters authorised by the Director for Health and Safety may work at Boulder Brighton. Ladders to be inspected regularly and on every use, see "***Health and Safety Logs***".	No
3	Chemical injury while cleaning holds in an acid bath	Staff	For now we are cleaning WITHOUT any acid. If the hold state deteriorates then we may reintroduce it and adopt the following measures: Staff are asked to wear goggles and heavy-duty gauntlet gloves when using the cleaning fluid. Hold baskets should not be overloaded to make handling easier. Staff are shown how to go about cleaning the holds before being asked to undertake the task, see "**Staff Induction Checklist**". Staff provided with heavy duty outside wear to use when cleaning including boots.	No

4	Injury from pressure washing holds	Staff	Use of pressure washer explained prior to first use by staff, additional notice on pressure washer. Staff to be signed off as competent. Pressure washer changed to a simple electric cold-water washer to avoid any exhaust fumes or open flames. Pressure washer has been tested with the provided gauntlets to check it cannot cut through them and so staff can use the washer while holding the holds as long as they are in full PPE to do so. Maintenance keeps the work area clear and usable and will provide a structure to pressure wash in.	No
5	Manual Handling Injury – Climbing Holds	Staff	Trays and tubs of holds are kept from being overloaded. These need only be lifted short distances to the available trolleys and wheels. Improving hold storage by adding a rear shed to allow for heavier items to stay low down	No
6	Manual Handling Injury – Other	Staff	Carrying large objects sometimes required but should only be undertaken by a suitable number of staff lifting carefully together.	No

Reference Number:	RC05				
Area Assessed:	Reception and Cafe Area	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	General Use	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the Reception and Cafe category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Slips and Trips	Users, Spectators, Staff	Flooring change between reception and seating area bridged appropriately. Staff at reception vigilant regarding objects left lying around in walkways..	No
2	Burns and scalds from hot drinks	Users, Spectators, Staff	Hot drinks served only at the cafe end of reception, past the climbing wall entry door so there are no collisions with entering or exiting climbers. Staff trained not to fill customer flasks directly but to use a jug to move the boiling water.	No
3	Harm from food hygiene issues	Cafe Users	Very limited food hygiene concerns. DM's asked to complete Level 1 Food Hygiene training course. Fridge temperatures checked. Hand washing included in staff induction and utensils provided for handling food. Use by dates recorded and monitored.	No

Reference Number:	UC06				
Area Assessed:	Upstairs Changing Rooms, Showers, Toilets and training area	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	General Use	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the Upstairs Changing Rooms, Showers and Toilets category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Slips and Trips on Stairs	Users, Staff	Textured grip paint used on the floor and stair nosings. Handrail up the side. Adequate lighting. Good housekeeping and maintenance of structure.	No
2	Slips in toilet and showers	Users, Staff	Regular cleaning of these areas by staff during the day.	No
3	Communicable disease	All	Anti-bacterial wipes are kept fully stocked near gym equipment and signage around training area requesting customers to wipe down equipment after use.	No
4	Customer injury in the normal course of activity but isolated in the upstairs room	All	CCTV covering the upstairs training room is on the monitor behind reception so that at a glance staff at reception can see there is no-one waving for help in the upstairs room.	No
5	Injury on training equipment	Users	Signage in the room warning of the dangers of the equipment and not to use it unless you know what to do. Equipment included: Exercise bike, rowing machine, weight bench. Kept next to each other by the mirror and out of the way of the main stretching area. There is enough space between the equipment to get on and off safely.	No
6	Injury with Kettlebells, Dumbells or Weight plates	Users	These are stored in a fixed spot. The Dumbells have a rack for storage. The Kettlebells are safer on the floor so they cannot be dropped when storing. The weight plates are on a mobile trolley to allow for safe transport to the area they are to be used in. Signage specifies that all equipment must be returned to its storage space and staff have been asked to ensure this happens, when possible tracking down and speaking to any users who fail to do so. The edges of the weight plate trolley are a bit sharp and we have added protective pads to cover these	No

7	Injury using Dip Belt	Users	Dip Belt added for public use in the upstairs room. Same control measures as other training equipment. People are less likely to hurt themselves using the provided belt than attempting weighted exercises without it so it has been provided and will be checked along with the other equipment in the room.	

Reference Number:	EV07				
Area Assessed:	Bouldering Wall	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	Events	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No new dangerous occurrences or near misses from events.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Injury from landing badly on the mats due to the extra pressure of competition or event climbing	Users	All induction and registration procedures as for regular use of the wall, see BO02. Special information given on event literature and event registration stating: "*During special events participants are at extra risk of overexerting themselves or attempting moves outside their ability range and this can lead to serious injury. Please take extra care.*" Extra banner set up for events with warnings for users of the extra risk.	No
2	Impact injury from climber falling onto a person	Users, Staff,	All induction and registration procedures as for regular use of the wall, see BO02. Special information given on event literature and event registration stating: "*The climbing space will be especially busy during this event, please take extra care never to sit, stand, walk or climb in the fall zone for the problems".*	No
3	Impact injury from climber falling onto a person	Spectators	The spectator sign in form states "Do not go onto red mats".	No
4	Injury to minors as a result of taking part in a competition	Users	General registration for minors that must be signed by a parent/guardian or an adult responsible with the permission of a parent/guardian including the wording: "*During special events participants are at extra risk of overexerting themselves or attempting moves outside their ability range and this can lead to serious injury. Please take extra care.*" For competent youth normally allowed to climb at BB unsupervised permission for events is included in the registration documents.	No
5	Injury from over exertion at special events	Participants	Wording for event registration: "Be aware that every fall can lead to injury, and please take extra care".	No
6	Spectators on the top out boulder during events	Spectators	Designated supervisor for the top out boulder during finals to ensure it is not overcrowded and no silly behaviour or dangerous objects are taken up there.	No

Reference Number:	SA08				
Area Assessed:	Staff Areas and Activities	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	General Use	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the Staff Areas and Activities category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Injury from manual handling	Staff	Holds are organised in suitably small batches in the hold storage room. Staff are made aware of the wheeled moving trolley.	No
2	Staff entrance area	Staff/users	This can become clogged with stuff as an easy area for staff to dump their personal belongings thus blocking a fire escape route. Signs are put up and staff informed that it must be kept clear.	No
3	Injury from improper use of power tools	Staff	Power tools are stored in non-public areas when not in use so there is no customer access. Staff are appropriately trained in proper use of tools before being allowed to use them: Safety sheet for each tool signed for by staff under supervision of GM each time. Staff are warned through the staff policy not to use power tools without explicit permission from the Directors.	No
4	Abrasive Wheel Injury	Maintenance Staff	Training Course – online course for GM. Only to be used by staff who have done the course, TB or JG.	No

Reference Number:	OU09				
Area Assessed:	Outside the Building	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	General Use	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
No dangerous occurrences or near misses from the Outside category.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Slips and trips in icy weather	Users, Staff	Gritting salt for the front area of the building laid in icy conditions.	No
2	Collision with a motor vehicle	Users, Staff	Car park clearly marked out with white lines. Outside lights used when dark to illuminate the area.	No

Reference Number:	CD2021				
Area Assessed:	Entire Facility	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	Communicable Disease	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

The following measures would be brought in as appropriate based on the general risk across the UK. Items 1 through 28 are all measures to be used in the event of a local or national outbreak demanding business take action.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	Disease, General proximity between people in the building, higher risk from new or younger climbers	All	Types of users are controlled through the booking system. Numbers of families, young people and new users is carefully monitored/reviewed. We manage pay as you go capacity with a fixed number.	
2	Disease, General proximity between people in the building, mask use	All	*If there is a UK wide High Risk situation:* Users encouraged on the website and by staff example to wear masks to climb. Otherwise use of masks at climbing walls is not mandatory according to advice from ABC and government. Free disposable masks given to customers at reception for their use. Sale of re-usable cotton masks at the front desk.	
3	Disease, General proximity between people in the building	Customers	*If there is a UK wide High Risk situation: Signage from ABC used* Use of posters and material from the ABC around the centre to reinforce the need for social distancing, hand washing, etc'. Customers assured that they can have a refund/move session should they suspect they have covid or have a positive test result. Members will be offered a freeze on their account if they let us know they have covid. No current restrictions with regard to social distancing at time of 2023 risk assessment however if infection rates rise again and government guidance requires social distancing then please see Appendix 1.	
4	Disease, Proximity in reception	Customers	Use of middle double doors as an exit to create a 'one-way system' for entry and exit. Not mandatory but encouraged.	

5	Disease, Proximity at reception	Staff	Customers can pass bacteria through interaction with staff at reception. We have installed sneeze screens at the service stations at reception. These completely cover the area so the staff are well protected. Staff will be asked to wear a mask throughout their shifts.	
6	CV19, Transfer through proximity, individuals showing symptoms	All	Any customers or staff arriving with symptoms should be sent home immediately. Staff training and duty managers meeting reinforce this. Remind staff of isolation rules by general staff message.	
7	CV19, Transfer through proximity, individuals showing symptoms	Staff	Staff arriving with any symptoms to be sent home immediately and asked to do a LFT. If a positive result occurs staff asked to self-isolate for 5 days and complete 2 consecutive negative LFT's before returning to work. Remind staff of isolation rules by general staff message	
8	CV19, Transfer by surface contact	All	Use of posters and material from the ABC around the centre to reinforce the need to wash hands and/or sanitise regularly. Check list of daily tasks includes regular sanitisation of surfaces throughout the centre.	
9	CV19, Transfer by surface contact throughout building	All	Rigorous cleaning schedule from a dedicated cleaner and general staff cleaning on the daily task sheets.	
10	CV19, Transfer by surface contact throughout building	All	We have installed a hand washing sink in the main climbing area. Hand sanitiser stations at the front door, exit door, entry to climbing area and one in the central section on both sides of the centre.	
11	CV19, Transfer by surface contact throughout building	All	Cleaning procedure to be followed on a rolling basis throughout the day to wipe down frequent touch points in the building such as door handles, surfaces, etc'. See the document "**Regular On-Shift Cleaning Schedule Procedure**"	
12	CV19, Transfer by surface contact with staff uniform	Staff	An apron is provided for use when doing cleaning, this is washed in the weekly laundry	
13	CV19, Transfer by surface contact, canned drinks sales	All	Door to drinks fridge cleaned regularly as part of the regular on shift cleaning schedule	
14	CV19, Transfer by surface contact, use of shared training equipment	All	All shared training equipment: bands, weights, stretching mats, etc are now available for customers and staff to use. Staff clean down the equipment as part of the "**Regular On-Shift Cleaning Schedule Procedure**". Signage used to request that all customers use the available sanitising wipes to clean down any equipment they have used.	

15	CV19 Transfer during the ordering and service of food and drink	All	Café service has resumed as normal however staff are asked to wear masks at all times. Food and drink preparation area regularly sanitised.	
16	CV19 Transfer during route setting from holds and dust from them	Staff	Staff Route Setters asked to wear masks	
17	CV19 Transfer during route stripping and cleaning from holds and dust from them	Staff	Holds taken down and either acid dipped before washing or held for 72hrs before cleaning to reduce the risk for staff pressure washing. PPE worn for cleaning.	
18	CV19 Transfer during a first aid incident	Staff	PPE is available (gloves, mask, glasses and apron) with the first aid kit.	
19	CV19 Transfer in the kids cave	All	Closed off, soon to be removed.	none
20	Legionella Disease	All	The full shutdown of the building raised the risk of Legionella. Water systems were still used weekly in regular cleaning. There is one stored hot water tank (Downstairs Disabled Loo feeding the 3 downstairs toilets) and this was turned off at the start of the closedown period. Flushed this through and heated above 60 degrees before bringing it back into use. The only other stored water is in the main cold water tank and this is below 20 degrees.	
21	CV19 Transfer via water fountain	Customers	Water fountain removed and replaced with additional hand washing sink.	
22	CV19 Transfer following a confirmed case at BB	All	Track and trace no longer in force at time of risk assessment however PHE would contact Boulder Brighton in case of any major disease breakout. Should track and trace be reintroduced previous protocol would be reinstated Including possible closure for a fixed period according to PHE guidelines. We would then engage our cleaning company to do a deep clean throughout and continue to follow government guidance.	
23	CV19 Transfer due to proximity and shouting caused by loud music	All	Sound system volume levels continue to be reduced to avoid customers and staff needing to shout at each other to be heard. These volume levels marked on the amps. In the event that transmission rates become low then the centre can be adjusted back to normal levels.	None
24	Groupwork: CV19, General proximity between people in the building	All	*High Risk: Limited group size for instruction* At time of risk assessment no current controls for groups beyond Boulder Brighton's normal group sizes (1:10 for youth, 1:12 for adults but we aim for 1:8	None

			and 1:10 to allow ourselves a contingency). Previous regulations may be reinstated if controls come back into force (See BB Coronavirus Risk Assessment 2021 CD2020 – Instruction and groups: 1)	
25	CV19, Transfer risk from communication with a group	All	Staff, including instructors will be asked to wear masks as standard while transmission rates remain high and with reference to government guidance.	None
26	CV19, Additional instructor guidance	All	Please see the additional guidance given to instructors on taking small instructed sessions.	None
27	CV19, Transfer risk from group sessions	All	Schools no longer using 'bubble' system so usual instructor ratios apply unless government guidance changes in which case see BB Coronavirus Assessment 2021 CD2020 – Instruction and groups)	None
28	CV19, Transfer through proximity, individuals showing symptoms	All	Customers in group arriving with any symptoms to be discussed with group leader (from institution).	None

Reference Number:	COSSH				
Area Assessed:	COSSH	**Assessors Name:**	Tom Bauer	**Date of Assessment**	04/2026
Activity Assessed:	All harmful substance use	**Position:**	Director Responsible for Health and Safety	**Date of Re-assessment**	04/2027

Notes from experiences since last Risk Assessment:
Introduced as a separate item.

No.	Hazard	Persons at Risk	Control Measures	Action, see Action Plan
1	General Cleaning Chemicals	All staff	Keep the number of chemicals used to a minimum so training and use is better controlled. COSSH file with details on each in staff folder on computer and included in induction procedure see "**Staff Induction Checklist**". Current list: Multi-Surface Cleaner (Infinity Foods Bio-D 830604) Toilet Cleaner (Infinity Foods Bio-D 830606) Dishwasher Detergent Dishwasher Rinse Aid Viakal Limescale cleaner Cream Cleaner	No
2	Hold Cleaning Chemical	Strip and Clean Team	***None used currently***. But if it were reintroduced: Kept locked in the rear shed with a lid and a sign. Heavy duty gloves worn when using it with other PPE including goggles and suits available. HRT Reanimator.	No
3				No
4				No

Appendix 1: Sketch view of the centre showing 2m distance circles around different occupancies:

36 Climbers outline sketch



60 Climbers outline sketch



ACTION PLAN				
See Section:-	**Deficiency / Rectification**	**To be Completed By**	**To be Completed by - *name***	**Date Rectified. *Name and Initials***