

Lesson Plan

TDP 3

Lesson Title Practice exercises	Duration
Trainer Angela Hunt	Group Potential QUEST Operators
Aim To allow the student to explore the potential of QUEST using a variety of scenarios	
Objectives - By the end of the session, students will be able to: 1. Students will carry out searches based around the Durham Exercise scenarios Link to NOS 3C1 Support the use of information technology 2A2 Evaluate information to determine its intelligence potential	
Time	Content, including teaching methods, audio visual aids used and resources needed.
2 mins	Resources: Overhead Projector White Board Student Folders Course Map Students Exercise Card MASLOW – Welfare and removal of blocks to learning <ul style="list-style-type: none"> • Environmental check (heating/lighting etc) • Meet and greet and any other formal introductions • Administration including Fitness to Train Declaration* • Domestic Arrangements – breaks; location of facilities etc* • General Health and Safety and Safety Briefing (if relevant)* • Relevant Instructions e.g. mobile phones/questioning strategy* • Encouragement to share experiences appropriately/participation
5 mins	GESTALT – Overview of what is to come in session

- Outline aims and objectives
- Outline learning strategies/assessment method

Le

Training Risk Assessment Record

Training Portfolio		Serial Number																																											
Date		Location																																											
Lesson Title / Task / Activity / Exercise																																													
Hazards which could result in Significant Harm	Checklist (not exhaustive)																																												
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input checked="" type="checkbox"/> Slips, Trips and Falls <input type="checkbox"/> Vehicle Contact <input type="checkbox"/> Manual Handling/Lifting <input type="checkbox"/> Poor Housekeeping <input type="checkbox"/> Working at height/use of ladder <input type="checkbox"/> Ladders <input type="checkbox"/> Use of tools and machinery <input type="checkbox"/> Environmental conditions <input type="checkbox"/> Lack of Instruction, supervision & Training <input type="checkbox"/> Pressure systems or temperatures </td> <td style="width: 50%; border: none;"> <input type="checkbox"/> Dust & Fumes <input type="checkbox"/> Fall of objects <input type="checkbox"/> Biological Agents (COSHH) <input type="checkbox"/> Excavations <input type="checkbox"/> Lifting Operations <input type="checkbox"/> Electricity <input type="checkbox"/> Hazardous substances (COSHH) <input type="checkbox"/> Noise <input type="checkbox"/> Fire or Explosion </td> </tr> </table>			<input checked="" type="checkbox"/> Slips, Trips and Falls <input type="checkbox"/> Vehicle Contact <input type="checkbox"/> Manual Handling/Lifting <input type="checkbox"/> Poor Housekeeping <input type="checkbox"/> Working at height/use of ladder <input type="checkbox"/> Ladders <input type="checkbox"/> Use of tools and machinery <input type="checkbox"/> Environmental conditions <input type="checkbox"/> Lack of Instruction, supervision & Training <input type="checkbox"/> Pressure systems or temperatures	<input type="checkbox"/> Dust & Fumes <input type="checkbox"/> Fall of objects <input type="checkbox"/> Biological Agents (COSHH) <input type="checkbox"/> Excavations <input type="checkbox"/> Lifting Operations <input type="checkbox"/> Electricity <input type="checkbox"/> Hazardous substances (COSHH) <input type="checkbox"/> Noise <input type="checkbox"/> Fire or Explosion																																								
<input checked="" type="checkbox"/> Slips, Trips and Falls <input type="checkbox"/> Vehicle Contact <input type="checkbox"/> Manual Handling/Lifting <input type="checkbox"/> Poor Housekeeping <input type="checkbox"/> Working at height/use of ladder <input type="checkbox"/> Ladders <input type="checkbox"/> Use of tools and machinery <input type="checkbox"/> Environmental conditions <input type="checkbox"/> Lack of Instruction, supervision & Training <input type="checkbox"/> Pressure systems or temperatures	<input type="checkbox"/> Dust & Fumes <input type="checkbox"/> Fall of objects <input type="checkbox"/> Biological Agents (COSHH) <input type="checkbox"/> Excavations <input type="checkbox"/> Lifting Operations <input type="checkbox"/> Electricity <input type="checkbox"/> Hazardous substances (COSHH) <input type="checkbox"/> Noise <input type="checkbox"/> Fire or Explosion																																												
Those Persons At Risk	Checklist (not exhaustive)																																												
STATE HOW MANY OF EACH	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input checked="" type="checkbox"/> Students <input type="checkbox"/> Supervisors <input type="checkbox"/> Maintenance Workers Cleaners <input type="checkbox"/> Visitors/Contractors <input type="checkbox"/> Operatives </td> <td style="width: 50%; border: none;"> <input type="checkbox"/> Disabled Staff <input type="checkbox"/> Inexperienced Staff <input type="checkbox"/> Lone Workers <input type="checkbox"/> Pregnant workers <input type="checkbox"/> Members of the Public </td> </tr> </table>			<input checked="" type="checkbox"/> Students <input type="checkbox"/> Supervisors <input type="checkbox"/> Maintenance Workers Cleaners <input type="checkbox"/> Visitors/Contractors <input type="checkbox"/> Operatives	<input type="checkbox"/> Disabled Staff <input type="checkbox"/> Inexperienced Staff <input type="checkbox"/> Lone Workers <input type="checkbox"/> Pregnant workers <input type="checkbox"/> Members of the Public																																								
<input checked="" type="checkbox"/> Students <input type="checkbox"/> Supervisors <input type="checkbox"/> Maintenance Workers Cleaners <input type="checkbox"/> Visitors/Contractors <input type="checkbox"/> Operatives	<input type="checkbox"/> Disabled Staff <input type="checkbox"/> Inexperienced Staff <input type="checkbox"/> Lone Workers <input type="checkbox"/> Pregnant workers <input type="checkbox"/> Members of the Public																																												
Current Control Measures	Checklist (not exhaustive)																																												
STATE WHERE INFORMATION IS KEPT	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input checked="" type="checkbox"/> H&S Briefing <input type="checkbox"/> Compliance with current legislation <input type="checkbox"/> Engineering Controls, e.g. LEV <input type="checkbox"/> Isolation <input type="checkbox"/> PPE/RPE </td> <td style="width: 50%; border: none;"> <input type="checkbox"/> Information, Instruction, Training <input checked="" type="checkbox"/> Adequate Supervision <input type="checkbox"/> SSOW/Permit to work <input type="checkbox"/> Compliance with Recognised Industry Standards </td> </tr> </table>			<input checked="" type="checkbox"/> H&S Briefing <input type="checkbox"/> Compliance with current legislation <input type="checkbox"/> Engineering Controls, e.g. LEV <input type="checkbox"/> Isolation <input type="checkbox"/> PPE/RPE	<input type="checkbox"/> Information, Instruction, Training <input checked="" type="checkbox"/> Adequate Supervision <input type="checkbox"/> SSOW/Permit to work <input type="checkbox"/> Compliance with Recognised Industry Standards																																								
<input checked="" type="checkbox"/> H&S Briefing <input type="checkbox"/> Compliance with current legislation <input type="checkbox"/> Engineering Controls, e.g. LEV <input type="checkbox"/> Isolation <input type="checkbox"/> PPE/RPE	<input type="checkbox"/> Information, Instruction, Training <input checked="" type="checkbox"/> Adequate Supervision <input type="checkbox"/> SSOW/Permit to work <input type="checkbox"/> Compliance with Recognised Industry Standards																																												
Assessment Of Risk																																													
Vertical Axis - probability of Accident	<table style="margin: auto;"> <tr> <td style="text-align: center;">5</td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> <tr> <td style="text-align: center;">4</td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> <tr> <td style="text-align: center;">3</td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> <tr> <td style="text-align: center;">2</td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> <tr> <td style="text-align: center;">1</td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> <tr> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> <td style="text-align: center;">5</td> </tr> </table> <p style="text-align: center;"><i>Place and 'X' in the appropriate box having considered all of the risks</i></p> <table style="margin: auto; border: none;"> <tr> <td style="padding-right: 20px;">Vertical Axis No.</td> <td>Highly Improbable (1)</td> </tr> <tr> <td>Horizontal Axis No</td> <td>Minor Injury (1)</td> </tr> <tr> <td>Final Assessment</td> <td>Low</td> </tr> </table>			5						4						3						2						1							1	2	3	4	5	Vertical Axis No.	Highly Improbable (1)	Horizontal Axis No	Minor Injury (1)	Final Assessment	Low
5																																													
4																																													
3																																													
2																																													
1																																													
	1	2	3	4	5																																								
Vertical Axis No.	Highly Improbable (1)																																												
Horizontal Axis No	Minor Injury (1)																																												
Final Assessment	Low																																												
Horizontal Axis - Most Likely Outcome																																													
If current control measures are not adequate further protective and preventative measures necessary.	Checklist (not exhaustive)																																												
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input type="checkbox"/> Elimination or substitute operation <input type="checkbox"/> Reduction of exposure <input type="checkbox"/> Safe systems at work <input type="checkbox"/> Permit to work system <input type="checkbox"/> Information, Instruction & Training <input type="checkbox"/> Provision of Special Equipment / Facilities <input type="checkbox"/> Increased Supervision </td> <td style="width: 50%; border: none;"></td> </tr> </table>			<input type="checkbox"/> Elimination or substitute operation <input type="checkbox"/> Reduction of exposure <input type="checkbox"/> Safe systems at work <input type="checkbox"/> Permit to work system <input type="checkbox"/> Information, Instruction & Training <input type="checkbox"/> Provision of Special Equipment / Facilities <input type="checkbox"/> Increased Supervision																																									
<input type="checkbox"/> Elimination or substitute operation <input type="checkbox"/> Reduction of exposure <input type="checkbox"/> Safe systems at work <input type="checkbox"/> Permit to work system <input type="checkbox"/> Information, Instruction & Training <input type="checkbox"/> Provision of Special Equipment / Facilities <input type="checkbox"/> Increased Supervision																																													

Assessor

Signed

Supervisor

Signed

Date for next assessment

Where risks are assessed as requiring additional controls, the following action plan should be used to manage the process:

ACTION PLAN FOR FURTHER CONTROLS		
What is required?	By whom?	When?

Action timescales depend on levels of risk – so far as is reasonably practicable – the greater the risk the sooner the action must be taken

PLAN FOR ACTIVE MONITORING (for low and medium risks only)		
Control Measure	How monitored	How often

In order to ensure that work continues to be safe, the control measures identified in the risk assessment must be implemented and maintained. The following checklist should be used to highlight how controls will be checked

DETAILS OF REVIEW			
Date of Review	Findings	Reviewed by	Signature

Risk assessments must be reviewed following any significant change if there is any reason to suspect that the assessment is no longer valid **and at least annually**. The results of reviews are to be recorded below: