



# PLAN EVENT/S

- LAND/PROPERTY OWNER CONSENT FORM
- EVENT KIT LIST
- BIG BALSAM BASH POSTER TEMPLATES
- WELFARE ASSESSMENT
- RISK ASSESSMENT

# Land/Property Owner Consent Form

## For Local Action Groups

### Agreement for Access and Control of Himalayan balsam

#### PART 1: LAND/PROPERTY OWNER DETAILS

FULL NAME:..... TITLE: .....

ADDRESS:.....

..... POST CODE: .....

MOBILE TELEPHONE: ..... DAYTIME TELEPHONE: .....

EMAIL ADDRESS:.....

#### PART 2: TENANT DETAILS (IF APPLICABLE)

FULL NAME:..... TITLE: .....

ADDRESS:.....

..... POST CODE: .....

CONTACT NUMBER: ..... EMAIL ADDRESS: .....

#### PART 3: HIMALAYAN BALSAM SITE/S DETAILS

SITE ADDRESS: .....

PLEASE DESCRIBE THE SITE: .....

Have you, your contractor or Local Action Group volunteers treated or managed the site before?

Yes  No  Unsure

Please give details (date/who involved/method of treatment): .....

#### PART 4: YOUR CONSENT

**GDPR Policy** - Your contact details will be kept solely for use by the local action group coordinator in order to contact you in relation to the treatment of Invasive Non-Native Species (INNS) on your land/property. Unless you indicate below, when this work finishes all contact details held for you will be deleted. They will never be shared with any third parties without your consent.

**As the land/property owner on title, by choosing 'Yes', I agree to:**

- Allowing the Local Action Group coordinator to hold my contact details as per the GDPR policy above.
- Allow the Local Action Group volunteers to work on the area of my land where the Himalayan balsam is growing at agreed dates and times.

SIGNED:..... DATE:.....

# BIG BALSAM BASH

# Kit List



Review your equipment list before your event to make sure that you have everything you need.

Don't forget your biosecurity kit and biscuits for your attendees!

## Kit check-list

### EQUIPMENT

- ✓ First aid kit
- ✓ Gloves for all attendees
- ✓ Alcohol/Hand gel wipes
- ✓ Refreshments
- ✓ Biosecurity kit





### PAPERWORK

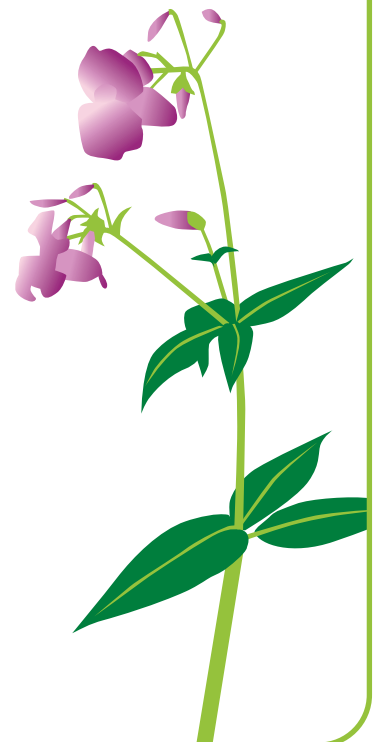
- ✓ Copy of Risk Assessment
- ✓ Volunteer Sign-In Sheet
- ✓ Volunteer Registration Forms
- ✓ Photo Consent Forms
- ✓ Copy of Welfare Assessment

Do make sure to include a basic biosecurity kit!

## BIOSECURITY KIT

The following are cheap and easily obtained items to include in your biosecurity kit:

-  **Hoof pick** – to remove seeds and plant fragments which imbed themselves in boot treads and tyres.
-  **Long handled brush** – to scrub equipment
-  **Water container** - or a large re-used water bottle, for washing equipment
-  **Flexible bucket** - big enough to fit your boot and a few inches of water inside





# Big

# Balsam Bash

Join the Fight Against This Invasive Plant!

Himalayan Balsam is an Invasive Non-Native Species and a pest plant. It is present in this area and likely to spread, finding niches away from the River Wye, in gardens, woodlands, orchards, along our paths and bridleways. It smothers native plants, alters natural habitats, forces out local wildlife and impacts on our own enjoyment of the countryside.

Help us to stop the spread by joining our Big Balsam Bash! Everyone is welcome.



Group Name: .....

Date/Time: .....

Meeting Point: .....

**What to bring:** Please wear protective clothing i.e. trousers, long sleeved tops and gardening gloves as you may be working amongst nettles or brambles. The terrain might be rough and uneven so do wear sturdy shoes. You may also wish to bring a bottle of water, light refreshments and sun cream.

For more information visit/call: .....

Please do spread the word about stopping the spread!



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# Welfare Assessment Form Example for Local Action Groups

<b>ACTIVITY TYPE:</b>	Short duration works to carry out invasive non-native species (INNS) management – Himalayan Balsam survey, hand-pulling, some vegetation clearance to access INNS.				
<b>VOLUNTEER GROUP:</b>		<b>LANDOWNER/AGENT NAME:</b>			
<b>SITE/S NAME:</b>		<b>FOREST WORKS MANAGER:</b>			
<b>SITE/S GRID REFERENCE:</b>		<b>OPERATION TYPE:</b>	INNS management – Himalayan Balsam Survey and removal by hand pulling		
<b>SITE/S WHAT3WORDS ADDRESS:</b>		<b>EXPECTED OPERATOR DAYS:</b>			
<b>PRIMARY WELFARE USER:</b>	Volunteers	<b>SAFE LOCATION FOR WELFARE AND MAINTENANCE OF FACILITIES:</b> E.g. flat, off-road location, large enough for unit. (Tick relevant box)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Comments: Work is reactive, highly mobile and undertaken on foot from home. A welfare unit is not practical and facilities are not required on site except those detailed below.
<b>WELFARE PROVIDER(S):</b>	Volunteers	<b>SAFE SITE ACCESS RISK:</b> (Tick relevant box)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Comments: Work is reactive, highly mobile and undertaken on foot from home. Sites can be restrictive in size and access, but volunteers only allowed on sites where access is assessed to be safe by supervisor.
<b>ENVIRONMENTAL RISK:</b> (Tick relevant box)	<input type="checkbox"/>	Comments: Terrain can be steep, slippery and overgrown with thorny plants. See Risk Assessment for further information.	<input type="checkbox"/>	<input type="checkbox"/>	Comments: Rural areas of lower Wye Valley have a high vandalism and theft risk, however nothing will be left on site/s and volunteers will operate buddy system to ensure personal safety.
	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
<b>WELFARE FACILITIES REQUIRED:</b> (Tick relevant box)	Flushing Toilet:		Changing Area		Other (give details)
	Hand Washing	<input checked="" type="checkbox"/>	Rest Area		
	Drinking Water	<input checked="" type="checkbox"/>	Shower		
<b>JUSTIFICATION FOR ANY LOWER LEVEL OF PROVISION</b>	<p>Considering above factors, in particular the short duration and multiple locations of the works and the limited number of volunteer on site, table 2 Welfare Standards are acceptable. Volunteers will be making one-off short duration visits on foot to multiple locations starting and finishing from home where full welfare facilities are available.</p> <p>Gloves and hand cleansing facilities will be available on site. Bottled, safe and wholesome drinking water will be carried and available at all times.</p> <p>Covid-19 guidance will be followed at all times.</p> <p>The work is dictated by the weather and the lifecycle of the INNS, which ensures that volunteers will be working in dry, calm conditions with no risk of exposure to wintry conditions.</p>				

# Welfare Assessment Form for Local Action Groups

ACTIVITY TYPE:					
VOLUNTEER GROUP:			LANDOWNER/AGENT NAME:		
SITE/S NAME:			FOREST WORKS MANAGER:		
SITE/S GRID REFERENCE:			OPERATION TYPE:		
SITE/S WHAT3WORDS ADDRESS:			EXPECTED OPERATOR DAYS:		
PRIMARY WELFARE USER:			SAFE LOCATION FOR WELFARE AND MAINTENANCE OF FACILITIES: E.g. flat, off-road location, large enough for unit. (Tick relevant box)	<input type="checkbox"/>	<input type="checkbox"/>
WELFARE PROVIDER(S):			SAFE SITE ACCESS RISK: (Tick relevant box)	<input type="checkbox"/>	<input type="checkbox"/>
ENVIRONMENTAL RISK: (Tick relevant box)	<input type="checkbox"/>	<input type="checkbox"/>	SITE SECURITY RISK: (Tick relevant box)	<input type="checkbox"/>	<input type="checkbox"/>
WELFARE FACILITIES REQUIRED: (Tick relevant box)	Flushing Toilet:	<input type="checkbox"/>	Changing Area	<input type="checkbox"/>	Other (give details)
	Hand Washing	<input type="checkbox"/>	Rest Area	<input type="checkbox"/>	
	Drinking Water	<input type="checkbox"/>	Shower	<input type="checkbox"/>	
JUSTIFICATION FOR ANY LOWER LEVEL OF PROVISION					

# Risk Assessment Form For Local Action Groups Example

GROUP NAME: *The Brilliant Balsam Bashers*

OUTDOOR EVENT: *Spring Balsam Bashing Work Party*

DATE: *22 May 2022* LOCATION: *Beautiful Woods SSSI*

SITE ENTRY Grid Ref: *SO 000 0000* SITE ENTRY W3W Address: *made.up.address*

EVENT ACTIVITY: *Survey, Pulling, Cutting Himalayan Balsam*

NO. OF VOLUNTEERS: *Max. 20*

ASSESSOR (print): *Daisy Smith*

DATE: *20 April 2022* SIGNATURE: .....

ASSESSMENT DISCUSSED AND AGREED WITH EVENT ORGANISER:

COORDINATOR NAME (print): .....

AGREEMENT DATE: ..... COORDINATOR SIGNATURE: .....

## Assessment Review Dates (annually/change occurs):

DATE: ..... BY WHOM: .....

DATE: ..... BY WHOM: .....

DATE: ..... BY WHOM: .....

## Risk Rating:

HAZARD (Severity)	VALUE	RISK (Likelihood)
Negligible	1	Unlikely
Slight	2	Possible
Moderate	3	Quite Possible
Severe	4	Likely
Very Severe	5	Very Likely

**Hazard Value x Risk Value = Risk Level**

## Ranking of Risk (Risk Level)

1 - 4	1	Low Risk
5 - 15	2	Medium Risk
16 - 25	3	High Risk

**Low Risk:** Risk can be acceptable.

**Medium Risk:** Acceptable with adequate control measures in place.

**High Risk:** Action MUST be prioritised and timetabled to reduce risk to an acceptable level.



## Risk Assessment Form For Local Action Groups Example

# Hazard and Risk Identification

SHEET No: 1 of 3

GROUP: *The Brilliant Balsam Bashers*

LOCATION: *Beautiful Woods SSSI*

EVENT: *Spring Balsam Bashing Work Party*

Grid Ref: *SO 000 0000*

DATE: *22 May 2022*

SITE ENTRY W3W Address: *made-up address*

SIGNIFICANT HAZARDS IDENTIFIED	PERSONS AT RISK	RISK RATING Hazard x Risk = Risk Level	CONTROL MEASURES	DATE ACTIONED & SIGNATURE
Volunteer underlying medical conditions - injury or illness is triggered by physical, outdoor activity.	Volunteers	1	<ol style="list-style-type: none"> <li>Ensure all volunteers complete the daily sign-in form detailing medical conditions and measures they have in place e.g. those with asthma ask to see their inhaler.</li> <li>Risk to individual and group is assessed and work allocated accordingly or volunteer stopped from taking part in activity.</li> </ol>	19/5/22 LB
Catching Covid-19 from volunteers	Volunteers	3	<ol style="list-style-type: none"> <li>Use own transport to reach site.</li> <li>Work is outdoors in wide open spaces.</li> <li>Hand sanitiser and spare face masks are available.</li> <li>Safe distance is maintained between volunteers as per current guidelines.</li> <li>Tools and equipment not to be shared, but if they are then sanitize.</li> <li>Number of volunteers on site at one time set by Covid-19 guidelines.</li> </ol>	
Minor cuts and scratches from pulling or cutting vegetation incl. Himalayan balsam, bramble, bracken, thorny bushes, nettles.	Volunteers	3	<ol style="list-style-type: none"> <li>Risks outlined at start of each work party</li> <li>All instructed as to what to do if sharps are found</li> <li>Gloves to be used.</li> <li>Extra care to be taken if handling blackthorn</li> </ol>	
Cuts from using slashers, pruning saws, loppers, secateurs.	Volunteers	3	<ol style="list-style-type: none"> <li>Risks outlined at start of each work party</li> <li>All instructed in safe use of tools - the 'tools talk'</li> <li>Gloves must be used when using saws</li> </ol>	
Bruises, strains, sprains and from slips, trips and falls, when moving around on site, carrying tools, moving vegetation	Volunteers	3	<ol style="list-style-type: none"> <li>Risks outlined at start of each work party - warning of unstable ground and issues of working on slippery, wet or uneven ground or on a slope.</li> <li>Regular breaks are built in to the event to reduce risk of accidents from tiredness or exhaustion</li> </ol>	

## Risk Assessment Form For Local Action Groups Example

# Hazard and Risk Identification

SHEET No: 2 of 3

GROUP: *The Brilliant Balsam Bashers*

LOCATION: *Beautiful Woods SSSI*

EVENT: *Spring Balsam Bashing Work Party*

Grid Ref: *SO 000 0000*

DATE: *22 May 2022*

SITE ENTRY W3W Address: *made-up address*

SIGNIFICANT HAZARDS IDENTIFIED	PERSONS AT RISK	RISK RATING <small>Hazard x Risk = Risk Level</small>		CONTROL MEASURES	DATE ACTIONED & SIGNATURE
Physical exhaustion, dehydration	Volunteers	2		<ol style="list-style-type: none"> <li>Risks outlined at start of each work party.</li> <li>Volunteers informed about importance of drinking water regularly, to pace themselves and not work excessively.</li> <li>Regular breaks are built in to the event, and more so during hot weather.</li> </ol>	<i>19/5/22</i> <i>LB</i>
Stings, tick bites (potentially leading to Lyme disease) and allergic reactions.	Volunteers	3		<ol style="list-style-type: none"> <li>Check online that there's not been a Lyme disease area warning.</li> <li>Volunteers with allergies let us know before starting (via sign-in form and verbally) and ensure they have an EpiPen. If no EpiPen in group, send volunteer home.</li> <li>Risks outlined at start of each work party.</li> <li>All to wear protective clothing e.g. long sleeves, trousers tucked into socks.</li> <li>Regularly wash hands and always wash hands before eating.</li> <li>Volunteers to check for signs after activity e.g. if develop an oval or circular rash, flu-like symptoms with aching joints check with their GP re. Lyme disease.</li> </ol>	
Exposure, hypothermia, heat exhaustion, sunburn.	Volunteers	2		<ol style="list-style-type: none"> <li>Check weather forecast 72, 48 and 24 hours ahead of event</li> <li>Inform volunteers, advise them of appropriate dress for weather, to have a spare set of dry clothes to hand if weather due to be wet.</li> <li>Volunteers informed to drink water regularly, wear sun-cream, don't get overheated or soaked.</li> <li>Have an emergency shelter as part of First Aid kit</li> <li>Event will be cancelled in extreme conditions e.g. very wet, heatwave.</li> </ol>	

## Risk Assessment Form For Local Action Groups Example

# Hazard and Risk Identification

SHEET No: 3 of 3

GROUP: *The Brilliant Balsam Bashers*

LOCATION: *Beautiful Woods SSSI*

EVENT: *Spring Balsam Bashing Work Party*

Grid Ref: *SO 000 0000*

DATE: *22 May 2022*

SITE ENTRY W3W Address: *made-up address*

SIGNIFICANT HAZARDS IDENTIFIED	PERSONS AT RISK	RISK RATING <small>Hazard x Risk = Risk Level</small>		CONTROL MEASURES	DATE ACTIONED & SIGNATURE
Anti-social behaviour from residents/members of the public	Volunteers	1		<ol style="list-style-type: none"> <li>1. Surveying can only be carried out from volunteers own private land, Public Right of Way (PROW), pavement or highway verge.</li> <li>2. Landowner permission (and any other relevant consents) must be secured before venturing on to a site to work.</li> <li>3. If aware of any anti sentiment locally, prior to the event use social media and posters to raise awareness of the importance of the work.</li> <li>4. Ensure volunteers are equipped with knowledge of the reasons for the work so they can respond to questions.</li> <li>5. Volunteers that experience anti-social behaviour are to inform the coordinator and call the Police on 101.</li> </ol>	<i>19/5/22</i>  <i>LB</i>

### Additional safety measures include:

- A first aid kit always to hand with trained 1st Aider.
- Water and/or cleanser will be available on site to wash hands; eyes and wounds
- A mobile phone for emergency contact will be on hand.
- Houses/amenities close by (fill out relevant house names) can provide a land line in the event of poor mobile phone signal or battery failure (unless owners are selfisolating).

# Risk Assessment Form For Local Action Groups

GROUP NAME: .....

OUTDOOR EVENT: .....

DATE: ..... LOCATION: .....

SITE ENTRY Grid Ref: ..... SITE ENTRY W3W Address: .....

EVENT ACTIVITY: .....

NO. OF VOLUNTEERS: .....

ASSESSOR (print): .....

DATE: ..... SIGNATURE: .....

ASSESSMENT DISCUSSED AND AGREED WITH EVENT ORGANISER:

COORDINATOR NAME (print): .....

AGREEMENT DATE: ..... COORDINATOR SIGNATURE: .....

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## Hazard and Risk Identification

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GROUP: .....

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EVENT: .....

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SITE ENTRY W3W Address: .....

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# Risk Assessment Form For Local Action Groups

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