

## **CHIMERA CLIMBING - RISK ASSESSMENT**

Incorporating business-wide activity at all locations and settings.

**Company Name: Chimera Climbing Community CIC.**

**Company Number: 08707565**

**Chimera Climbing Centres**

**Registered addresses:**

**Chimera Tunbridge Wells**

3 North Farm Road, High Brooms Industrial Estate, Tunbridge Wells, TN2 3DR

**Chimera Canterbury**

Unit 1, 22 Maynard Road, Wincheap Industrial Estate, Canterbury, CT1 3RH

**Chimera Chatham**

Unit 4, The Quays, Jetty, 5 Dockhead Rd, Chatham, ME4 4ZJ

**Revised by:** Marisa Gifford / Rob Jarvis

**Date of Revision:** 18/05/2026

**Activities Covered:** Outside Rock Climbing, Outdoor Bouldering, Indoor Bouldering, Rock Scrambling, Indoor Top-Roped Climbing and Bottom Roped Climbing, Outdoor Top-Roped Climbing and Bottom Roped Climbing

**Main Locations:** Chimera Climbing Centres, Southern Sandstone Crags (Kent & Sussex)

**Other Areas:** Peak District / North Wales / UK and Single-Pitch Crags

All activities must be risk assessed using a Generic Risk Assessment alongside a site-specific Risk Assessment to ensure all relevant risks are identified.			
<u>Generic Risk Assessments</u>	<u>Expiry date</u>	<u>Site-Specific Risk Assessments</u>	<u>Expiry Date</u>
<a href="#">Generic Bouldering (Indoor)</a> <a href="#">Generic Gym and Training Equipment</a> <a href="#">Groups and Kids Clubs</a> <a href="#">Route Setting and Maintenance</a> <a href="#">Café, Reception and Washrooms</a> <a href="#">Generic Climbing (Indoor / Roped)</a> <a href="#">Generic Bouldering, Scrambling and Climbing (Outdoor)</a>		<a href="#">Canterbury</a>  <a href="#">Chatham</a>  <a href="#">Tunbridge Wells</a>	

**Each part of this Risk assessment is checked and revised individually; However, the below person ensures all section are completed and in date.**

**Revised by:** Marisa Gifford

**Date of Revision:** 18<sup>th</sup> May 2026

### Risk Assessment Process:

Hazards		
Identify Hazards that could reasonably be expected to result in significant harm		
Consequences		
<b>What could result from the hazard?</b>		
<ul style="list-style-type: none"> <li>• <b>First aid injury:</b> minor cuts, sprains, bruises</li> <li>• <b>Serious injury:</b> head injury, loss of consciousness, broken bones, dislocations, respiratory problems Usually an injury from which full recovery is possible.</li> <li>• <b>Death or very serious injury to one person:</b> Loss of limb, paralysis or life changing injury from which full recovery is unlikely.</li> <li>• <b>Death or very serious injury to more than one person</b></li> </ul>		
Severity (S)	Probability (P)	P x S = R
5 Multi death / Very serious injury	5 >Almost inevitable	Who might be harmed? P= Probability S = Severity R = Risk level
4 Single death / Very serious injury	4 Very Likely	
3 Serious Injury	3 Likely	
2 RIDDOR (3 day)	2 Unlikely	
1 Minor First Aid	1 <Very Unlikely	
Who is at risk?		Controls
Risk		Is the risk adequately controlled?
<ul style="list-style-type: none"> <li>• Participants</li> <li>• Other Climbers</li> <li>• Chimera Staff</li> <li>• Spectators</li> <li>• Trespassers, especially children</li> <li>• General public in the climbing area</li> </ul>		Consider hierarchy of controls <ul style="list-style-type: none"> <li>• Eliminate</li> <li>• Substitute</li> <li>• Reduce</li> <li>• Isolate</li> <li>• Control</li> <li>• PPE</li> <li>• Discipline</li> </ul>
Represent best practice?		Reduce risk as far as is reasonably practicable. Comply with industry standards?

Calculation of Risk (R)							<b>Action Level:</b>  <b>H = High, immediate action required</b> <b>M = Medium, Justify and review each serial/ day</b> <b>L = Low, no further action required</b>
<b>Probability</b>	5	5-M	10-H	15-H	20-H	25-H	
	4	4-L	8-H	12-H	16-H	20-H	
	3	3-L	6-M	9-H	12-H	15-H	
	2	2-L	4-L	6-M	8-H	10-H	
	1	1-L	2-L	3-L	4-L	5/ M	
	0	1	2	3	4	5	
<b>Severity</b>							

<b>Activity</b>	Generic bouldering	<b>Location</b>	(Indoor)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	All Centres
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	N/A	<b>Signed off by</b>	Marisa Gifford

This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.

Identify Hazards	Associated Risk	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
				(S)	(P)	(R)	
Uncontrolled fall	Serious injury resulting from a fall from height	Public & Staff	Participants should look down, push away from the wall and land feet first, but allow the body to crumple. As legs absorb the impact, roll onto your back.	4	2	8	MED
Striking an object	Twists, Breaks, Cuts or Bruising	Public & Staff	Beware of the features and holds on the wall, that you may collide with during your range of movement. Ensure there is a safe fall zone before starting your climb	3	2	6	MED
Striking another person	Serious injury resulting from a collision	Public & Staff	Participants are advised to avoid climbing above or below other climbers. Spectators on the mats are not permitted to enter the fall zone of an active climber.	3	2	6	MED

Landing on an object	Cuts or Bruising.	Public & Staff	Participants are advised to avoid placing personal items on mats and to ensure there is a safe fall zone before starting your climb.	2	3	6	MED
Spinning and breaking holds	Serious injury resulting from a fall from height.	Public & Staff	Appropriately torqued bolts. Tightening bolts with T- Bars after initial screwing. Participants should report any hold movement to reception for immediate remedial action.	4	2	8	MED
Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to use warm up exercises and easy climbs to prepare for climbing. To take adequate rests between activity. And not to over train. performance coaching is available to improve participants efficiency of movement.	2	2	4	LOW
Objects falling from height	Head injuries, Cuts or Bruising from contact with object.	Public & Staff	Participants are advised to remove watches, jewellery and loose items in pockets	3	1	1	LOW
Use of top out boulder	Serious injury resulting from a fall from height.	Public & Staff	Participants are instructed on the safe use in the safety briefing. And are advised to down climb on the easy grey and yellows. To only use the top of the boulder as a means of escape down the easy down climb. Not to gather in groups and walk around the edge.	4	2	8	MED
Air quality with use of chalk	Mild respiratory problems and irritation to existing respiratory illnesses.	Public & Staff	Participants are advised to minimise the use of loose chalk in favour of chalk balls and liquid chalk. Any participant suffering	2	2	4	LOW

			from respiratory illnesses is asked to seek medical advice before climbing and have access to appropriate medication.				
Temperature	An inability to concentrate. Muscle cramps. Fatigue Nausea. Moist skin	Public & Staff	Participants are advised to wear light breathable clothing. Take regular drink breaks and to find a cool spot off the mats to rest between climbs. Chalk fingertips as necessary to avoid slips.	2	1	2	LOW
Degraded & slippery climbing holds	Serious injury resulting from a fall from height.	Public & Staff	Participants that experience degraded surface contact with holds resulting of loss of grip should, Chalk fingertips as necessary. Brush hold with pole brush. Participants should report any slippery holds to reception for immediate remedial action.	3	1	3	LOW
Line of Sight	Unable to attain help in the event of an injury or emergency.	Public & Staff	Staff are required to undertake regular mat walks and check rooms where customers or staff could be. To ensure they are ok	2	2	4	LOW

<b>Activity</b>	Generic Gym / Training Equipment	<b>Location</b>	(Indoor)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	All Centres
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	N/A	<b>Signed off by</b>	Marisa Gifford

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Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Use of free Weights weight vest	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to use warm up exercises before use & perform static stretches after use; to take adequate rests between sets; and not to over-train. Staff are available to monitor safe use.	2	3	6	MED
Use of free Weights weight vest	Trip hazards	Twists, breaks, cuts or bruising.	Public & Staff	Participants must return all weights to the designated racks after use. Training aids, water	1	2	2	LOW

				bottles, and personal items should be stored safely so they do not create trip hazards for participants or other facility users. Any equipment left on the floor or mats should be returned to the appropriate storage area, or a member of staff should be informed. Staff are available to supervise and monitor the safe use of the training area at all times.				
Use of Campus board & finger board	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to perform warm up exercises before use and easy climbs to prepare for climbing; to take adequate rests between sets; and not to over-train. Performance coaching is available to improve participants efficiency of use.	2	3	6	MED

Use of Campus board & finger board	Uncontrolled fall	Finger & wrist injuries; twists, breaks, cuts or bruising.	Public & Staff	Participants should avoid a dynamic mount onto the board; best practice would be to lower themselves down gently and stabilise their body before continuing.	2	4	8	MED
Use of Campus board & finger board	Open hand & half hand grip board	Finger pulley injuries.	Public & Staff	Participants best practice would be to lower themselves down gently and stabilise their body before continuing. Open & half hand grips are less stressful on the fingers.	2	4	8	MED
Use of Campus board & finger board	Full crimp, raised hand grip	Finger pulley injuries.	Public & Staff	Full crimp raised finger sessions may only be undertaken by advanced-level participants who have received appropriate professional training.	2	4	8	MED
Use of peg board	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to use warm up exercises and easy climbs to prepare for use; to take adequate rests between activity;	2	3	6	MED

				and not to over-train. Performance coaching is available to improve participants efficiency of use.				
Use of peg board	Uncontrolled fall	Finger & wrist injuries; twists, breaks, cuts or bruising	Public & Staff	Participants should avoid a dynamic mount onto the board; best practice would be to lower themselves down gently and stabilise their body before continuing.	2	4	8	MED
Use of peg board	Landing on an object	Cuts or bruising	Public & Staff	Participants are advised to avoid placing personal items on mats or dropping pins in fall zone.	2	2	4	LOW
Use of rings, gym climbing rope, TRX	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to perform warm up exercises before use and easy climbs to prepare for climbing; to take adequate rests between sets; and not to over-train. Performance coaching is available to improve participants efficiency of use.	2	3	6	MED

Use of pull up bar / dip bar	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force. It includes lifting, pushing, pulling.	Public & Staff	Participants are advised to use warm up exercises before use. It may be necessary to jump up or climb up to the bar which should be done from a stable controlled base. To take adequate rests between repetitions and not to over-train. Performance coaching is available to improve participants efficiency of movement.	2	3	6	MED
Use of pull up bar / dip bar	Landing on an object	Twists, breaks, cuts or bruising.	Public & Staff	Participants are advised to avoid placing personal items on mats in fall zone.	2	2	4	LOW
Slackline	Equipment failure	Twists, breaks, cuts or bruising.	Public & Staff	Installers of equipment must be trained and competent to undertake safe installation. Regular maintenance & inspections checks are completed in line with ABC guidelines.	2	3	6	MED

Slackline & Wobble Board	Uncontrolled Fall	Wrist injuries, twists, breaks, cuts or bruising.	Public & Staff	Participants are advised to use warm up exercises before use and perform static stretches after use. Use of spotters for unconfident persons. Assistance may be necessary when stepping on and off the slackline. Staff are available to monitor safe use.	3	2	6	MED
Slackline & Wobble Board	Landing in an object	Cuts or bruising	Public & Staff	Participants are advised to avoid placing personal items around the slackline.	1	2		LOW
Slackline & Wobble Board	Striking another person	Cuts or bruising	Public & Staff	Spectators are advised to avoid gathering around the slackline fall zone unless spotting or assisting the Participant.	3	2	6	MED
Plyo Block	General Use	Muscle strains, high-impact loading leading to compression of the spine and lower extremities	Public & Staff	Participants are advised to fully understand the plyometric landing	2	3	6	MED

				technique before attempting to use the plyo block and should practice it at low level until confident with the movement. spotters can be used to stabilise the block as height is gained.				
Plyo Block	Uncontrolled fall	Waist injuries, Twists, Breaks, Cuts or Bruising.	Public & Staff	Participants are advised to use warm up exercises before use and perform static stretches after. Use spotters for unconfident persons. Staff are available to monitor safe use.	3	2	6	MED
Plyo Block	Landing on an object	Cuts or Bruising	Public & Staff	Participants are advised to avoid placing personal items around the Plyo block.	1	2	2	LOW
Plyo Block	Striking another person	Cuts or Bruising	Public & Staff	Spectators are advised to avoid gathering around and in the fall zone unless spotting or assisting the Participant.	2	3	6	MED

Slackline	Equipment failure	Twists, Breaks, Cuts or Bruising	Public & Staff	Installers of equipment must be trained and competent to undertake safe installation. Regular maintenance & inspections checks are completed in line with ABC guidelines.	2	3	6	MED
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<b>Activity</b>	Groups / Kids Club	<b>Location</b>	(Indoor)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	All Centres
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	Green award or above	<b>Signed off by</b>	Marisa Gifford

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Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Group pulse raiser and dynamic stretching	Striking another person	Injury resulting from a collision.	Public	Coaches select an area suitable in size and without obstruction to conduct the game or exercise designed to involve vigorous movement. Sessions are restricted to between 6-10 participants (depending on age), and group behaviour is well managed.	2	2	4	LOW
Coaching technique & practice	Uncontrolled fall; striking another person; landing on an object,	Serious injury, twists, breaks, cuts or bruising.	Public	Coaches select an area suitable in size & difficulty to conduct the demonstration & practice. Sessions are restricted to 6 participants, and group behaviour is well managed.	3	2	6	MED

	musculoskeletal injuries							
Bouldering: warm up climbing and free climbing	Uncontrolled fall	Serious injury resulting from a fall from height.	Public	Participants should look down, push away from the wall and land feet first, but allow the body to crumple. As legs absorb the impact, roll onto your back. Stabilize with your forearms and elbows	4	2	8	MED
Bouldering: warm up climbing and free climbing	Striking another person	Serious injury resulting from a collision.	Public	Participants are advised to avoid climbing above or below other climbers. spectators on the mats are not permitted to enter the fall zone of an active climber.	2	4	8	MED
Bouldering: warm up climbing and free climbing	Landing on an object	Cuts or bruising.	Public	Participants are advised to avoid placing personal items on mats and to ensure there is a safe fall zone before starting the climb.	2	3	6	MED
Bouldering: warm up climbing and free climbing	Spinning and breaking holds	Serious injury resulting from a fall from height.	Public	All bolts are appropriately torqued, with final tightening carried out using T-bars after initial screw-in. Participants are advised to report any movement of holds to reception immediately so that remedial action can be taken without delay.	3	2	6	MED
Bouldering: warm up climbing and free climbing	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a	Public	Participants are advised to use warm up exercises and easy climbs to prepare for climbing. To	1	2	2	LOW

		load by hand or bodily force; this includes lifting, pushing, pulling.		take adequate rests between activity. And not to over train. Performance coaching is available to improve participants efficiency of movement.				
Bouldering: warm up climbing and free climbing	Objects falling from height	Head injuries, cuts or bruising from contact with object.	Public	Participants are advised to remove watches, jewellery, phones and loose items in pockets.	2	2	4	LOW
Bouldering: warm up climbing and free climbing	Use of top-out boulder	Serious injury resulting from a fall from height.	Public	Participants receive a safety briefing that includes instruction on the safe use of the facility, including how to downclimb using the designated easy grey and yellow holds. The top of the boulder is to be used only as a means of accessing the designated downclimb. Participants are instructed not to gather in groups or walk around the edge of the top of the boulder.	2	3	6	MED
Bouldering: warm up climbing and free climbing	Air quality with use of loose chalk	Mild respiratory problems and irritation to existing respiratory illness suffers.	Public	Participants are advised to minimise the use of loose chalk in favour of chalk balls and liquid chalk. Any participants suffering from respiratory illnesses are asked to seek medical advised before climbing and have access to appropriate medication.	2	2	4	LOW

Bouldering: warm up climbing and free climbing	Temperature	An inability to concentrate; muscle cramps; fatigue; nausea; moist skin.	Public	Participants are advised to wear light breathable clothing, take regular drink breaks and to find a cool spot off the mats to rest between climbs. Chalk finger tips as necessary to avoid slips.	1	2	2	LOW
Bouldering	Degraded and slippery climbing holds	Serious injury resulting from a fall from height.	Public	Participants that experience degraded surface contact with holds resulting from loss of grip should chalk finger tips as necessary, brush holds with pole brush. Participants should report any slippery holds to reception for immediate remedial action.	1	2	2	LOW
Child Protection & Safeguarding	Inappropriate and unsafe practices	Serious psychological and physical injury.	Public	All coaches are safeguarding trained, and sessions are regularly observed by line managers. Routine mat walks are carried out to monitor safety and participant behaviour. All staff working in the centre hold a current DBS check, and CCTV is in operation throughout the facility.	2	2	4	LOW

<b>Activity</b>	Route Setting & Maintenance	<b>Location</b>	(Indoor)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	All Centres
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	Route Setting training	<b>Signed off by</b>	Marisa Gifford

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Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Working behind walls	Injury from contact with low head space and confines spaces	Twists, cuts or bruising.	Staff	Staff must ensure the space is adequately lit and ventilated during access. The space should be kept tidy and free of trip hazards. Any protruding objects should be covered with protection. No hot works to be conducted without a permit from the safety officer. Work that creates dust including sweeping should only be done wearing a dust mask.	2	2	4	LOW
Route setting and maintenance	Fall from ladder	Twists, breaks, cuts or bruising.	Staff	Only staff trained in the use of access equipment in this specified setting are permitted to use the ladders.	2	2	4	LOW

				Access equipment should be held in position at the base by footing.				
Route setting and maintenance	Volume – detached from wall	Twists, breaks, cuts or bruising.	Staff	Setters check volumes before use. Use adequate number of screws relative to size of volume. Pre-pilot holes to ensure that screws are placed at best angle. Ensure that screw holes are sound and screws bite. Any spinning screws are to be removed, and new holes made in substrate.	2	2	4	LOW
Route setting and maintenance	Broken holds	Injury resulting from fall.	Staff	Setters inspect holds before use; fasten holds using appropriate fastenings; take care not to over-tighten holds, especially on non-even surfaces.	1	3	3	LOW
Route setting and maintenance	Uncontrolled fall	Injury resulting from fall from height.	Staff	Setters should ensure there is a safe fall zone before testing the climb; they should look down, push away from the wall and land feet first, but allow the body to crumple. As legs absorb the impact, roll onto your back with hands off the ground.	2	2	4	LOW
Route setting and maintenance	Striking an object	Twists, breaks, cuts or bruising.	Staff	Beware of the features and holds on the wall, that you may collide with during your range of movement.	1	4	4	LOW

				Ensure there is a safe fall zone before testing the climb.				
Route setting and maintenance	Striking another person	Injury resulting from a collision.	Staff	Setters are to avoid climbing above or below other staff. Spectators on the mats are not permitted to enter the fall zone of active testing.	1	3	3	LOW
Route setting and maintenance	Landing on an object	Cuts or bruising.	Staff	Setters are advised to avoid placing personal items or setting items on mats within the fall zone.	1	3	3	LOW
Route setting and maintenance	Spinning and breaking holds	Injury resulting from fall from height.	Staff	Competent setters attach holds using correct fixings; Setters use fixing holes or pin holds if hold is likely to spin due to positioning or surface. All routes/blocs should be tested before open to public. Users warned of risk of spinning holds. Route Setting Policy should reflect safety measures which includes attending spinning holds as soon as reasonably practicable.	2	2	4	LOW
Route setting and maintenance	Musculoskeletal injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force including lifting,	Staff	Staff are trained to use warm up exercises and easy climbs to prepare for setting and to take adequate rests between activity.	1	4	4	LOW

		pushing, pulling.						
Route setting and maintenance	Equipment failure	Twists, breaks, cuts or bruising.	Staff	Equipment inspected, maintained and stored by competent member of staff. Setters to do a pre-use check of all equipment before use.	2	2	4	LOW
Route setting and maintenance	Chemicals substances (hold washing with chemical)	Injury resulting from a chemical burn.	Staff	Holds soak in ventilated, well-lit area. Containers with toxic substances clearly marked and put away when not in use. Protective eyewear and gloves to be used when washing holds. Substances to be used and stored in areas not accessible to the public. All COSHH recommendations followed.	1	3	3	LOW
Route setting and maintenance	Electric shock (jet wash)	Injury resulting from electrical burns and shock.	Staff	Remove any electrical appliances from wet areas.	1	3	3	LOW
Route setting and maintenance	Scalding and pressurised water (jet wash)	Injury resulting from scalding.	Staff	Setters trained in use of jet wash. Jet wash not accessible to public and turned off when not in use. Jet wash must never be pointed at anyone.	2	2	4	LOW
Route setting and maintenance	Manual handling	Repetitive strain injuries caused by supporting a	Staff	Setters use appropriate lifting techniques when moving holds and volumes. Staff are trained to	2	2	4	LOW

		load by hand or bodily force including lifting, pushing, pulling.		warm up before setting. Setters should be trained in the correct use of tools (HSE guidance on Manual Handling).				
Route setting and maintenance	Objects falling from height when setting	Head injury, break, cuts or bruising.	Staff	Where reasonably possible, arrange setting to minimise risk to public (eg during quiet periods). Suitable exclusion zone cordoned off with notices warning of danger. Equipment to be attached to setter. Pre-use check of kit bags/buckets. No tools, holds or fixings are rested on top of the boulder or balanced on holds. All lifting of heavy loads (eg volumes, holds) should be properly planned, appropriately supervised and carried out in a safe manner.	2	2	4	LOW
Route setting and maintenance	Sports Injury	Repetitive strain injuries caused by supporting a load by hand or bodily force including lifting, pushing, pulling.	Staff & Public	Setters should set within grade range defined by the operator. Routes should be clearly labelled with an indication of their difficulty. Setters should avoid setting routes and problems with holds or sequences likely to cause injury.	1	4	4	LOW

Route setting and maintenance	Finger trapped behind climbing hold	Break, cuts or bruising.	Staff	Setter should grip the outside edge of the hold and take care when using power tools to fasten the hold.	1	3	3	LOW
Route setting and maintenance	Finger traps from gaps behind holds	Break, cuts or bruising.	Staff	Holds should be placed correctly to ensure that there are no large gaps between the hold and the wall capable of trapping a finger.	1	3	3	LOW
Route setting and maintenance	Temperature	An inability to concentrate; muscle cramps; fatigue; nausea; moist skin.	Staff	Staff are issued light breathable clothing and should take regular drink breaks. Chalk finger tips as necessary to avoid slips.	1	2	2	LOW

<b>Activity</b>	Café / Reception / Washrooms	<b>Location</b>	(Indoor)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	All Centres
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	Staff Induction	<b>Signed off by</b>	Marisa Gifford

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Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Access	Slips & trips; doorways (rain); spillages; uneven surfaces	Twists, breaks, cuts or bruising.	Public & Staff	In dry weather to aid free movement the entrance doors are left in the open position. All centres have glass doors (CY) has automatic opening doors operated by a PIR, (TW) doors swing bi-directionally, (CH) one-way push-in-door (See access policy for DDA compliance); Matting in doorway areas absorbs external water during wet conditions and the reception area is regularly mopped. Kitchen matting	2	2	4	LOW

				provides a non-slip surface beneath water prone areas.				
Food preparation / Food handling / Allergies	Food contamination; food poisoning; Anaphylaxis	Abdominal pain, vomiting; serious reaction to histamine resulting in swelling, redness, breathing problems.	Public & Staff	Food preparation areas have been fitted with stainless steel hygienic counters, hand washing and drying station and colour coded chopping boards; segregated refrigeration along with comprehensively trained staff ensures strict compliance to hygiene & non cross contamination procedures.	2	4	8	MED
Manual Handling	Repetitive strain; back injuries	Repetitive strain injuries caused by supporting a load by hand or bodily force including lifting, pushing, pulling.	Staff	Staff are manual handling trained and follow company procedures.	2	2	4	LOW
Contact with steam, hot water and hot surfaces	Inhaling steam, skin contact with hot surfaces and liquids	Internal & external burns.	Staff	Internal and external burns.	2	3	6	MED
Knives	Cutting or puncturing skin	Serious injury resulting from lacerations.	Staff	Serious injury resulting from lacerations.	2	4	8	MED

COSHH	Exposure to corrosive chemicals or by products of use.	Inhaling toxic fumes, chemical burns.	Staff	Inhaling toxic fumes; chemical burns.	2	3	6	MED
Electrical appliances & static earthing	Electric shock	Injury resulting from electrical burns and shock.	Staff	Metal preparation surfaces are kept dry at all times. Staff are instructed not to operate electrical equipment with wet hands and to remove any electrical appliances from wet areas immediately. Any faults must be reported without delay, and the affected equipment taken out of service until it has been checked and signed off as safe for use.	1	1	1	LOW
Shower Room, slips and trips	Slipping in or out of the shower	Serious injury, or unconscious.	Public & Staff	Staff to check showers regularly and ensure people come out of the shower. Ensuring the floor is as dry as it can be and matting is in place to prevent slips.	2	2	4	LOW
Slips / Entrapment	Slipping on wet floor. Door lock failure on toilets.	Serious injury, or unconscious; Trapped and unable to get out of the cubical.	Public & Staff	Staff complete regular checks in washrooms. Mop and place wet floor signs if required.	2	2	4	LOW

				Routine checks on lock mechanism to ensure functionality.					
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<b>Activity</b>	Generic Climbing (Roped)	<b>Location</b>	Indoor
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	(All Centres)
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	CWI or above	<b>Signed off by</b>	Marisa Gifford

This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.

Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Rope Work	Climber falling because of belayer error.	Serious injury resulting from a fall from height.	Public & Staff	Qualified Instructor to run and supervise every session.	3	2	9	MED
Rope Work	Climber falling because of personal equipment or knot failure.	Serious injury resulting from a fall from height.	Public & Staff	Equipment is checked before and after use. All of the set-up is checked before leaving the ground.	3	2	6	MED
Rope Work	Climber becoming 'stuck' on wall because	Serious injury resulting from a fall from	Public & Staff	Equipment is checked before and after use. All of the set-up is checked before leaving the ground.	3	1	3	LOW

	of personal equipment or knot failure.	height, rope burn, cuts and bruising.						
Rope Work	Climber stranded because of jammed belay device.	Serious injury resulting from a fall from height.	Public & Staff	All loose clothing out the way, hair / jewellery removed. Instructors to be vigilant.	3	2	6	MED
Rope Work	Entanglement or entrapment	Serious injury resulting from a fall from height.	Public & Staff	All loose clothing out the way, hair / jewellery removed. Instructors to be vigilant.	3	2	6	MED
Rope Work	Climber falling because of belayers equipment failure.	Serious injury resulting from a fall from height.	Public & Staff	Equipment is checked before and after use. All of the set-up is checked before leaving the ground.	3	2	6	MED
Rope Work	Belayer or spectator injured by falling climber.	Serious injury resulting from a fall from height.	Public & Staff	Part of the centre is to be cordoned off. Routes that are climbed must be at least two meters distant from any other climbers.	3	2	6	MED
Rope Work	Climber injured because of being lowered off too quickly.	Serious injury resulting from a fall from height.	Public & Staff	Equipment is checked before and after use. All of the set-up is checked before leaving the ground.	3	1	3	LOW

Rope Work	Falling onto another climber in bouldering area.	Serious injury resulting from a collision.	Public & Staff	Part of the centre is to be cordoned off. Routes that are climbed must be at least two meters distant from any other climbers.	3	2	6	MED
Rope Work	Climber injured because of being lowered off too quickly.	Serious injury resulting from a fall from height.	Public & Staff	Equipment is checked before and after use. All of the set-up is checked before leaving the ground.	3	1	3	LOW

<b>Activity</b>	Generic Outdoor Bouldering, Scrambling and Climbing	<b>Location</b>	Outdoor (single pitch remit)
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	Harrison's Rocks Bowles Activity Centre
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>	RCI or above, or SSLA	<b>Signed off by</b>	Marisa Gifford
This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.			

Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Outdoor Bouldering & Climbing	Fall from Height	First Aid injury; Serious injury; Death or Very Serious injury.	Public & Staff	Clear safety briefing outlining hazards & procedures. Correct fitting PPE worn by participants & Chimera Staff Safe top out locations outlined to untie from the belay system. Descent routes shown to participants. Participants assemble at the base of the rocks.	1	4	4	LOW

Outdoor Bouldering & Climbing	Fall from above the extended anchor point	First Aid injury or Serious injury.	Public & Staff	Appropriate choice of climbs with regards to sling length, finishing & topping out holds and participant ability.	2	1	2	LOW
Outdoor Bouldering & Climbing	Belay Malfunction	First Aid injury; Serious injury; Death or Very Serious injury.	Public & Staff	Belay equipment regularly inspected for damage and faults Belay technique taught to the participants. Belay connections & technique checked by the instructor before the climber climbs. Choice of belay device available for appropriate group ability level.	1	4	4	LOW
Outdoor Bouldering & Climbing	PPE Malfunction	First Aid injury; Serious injury; Death or Very Serious injury.	Public & Staff	PPE regularly inspected for damage and faults.	1	4	4	LOW
Outdoor Bouldering & Climbing	Fall from Low Height (specific to Bouldering)	First Aid injury or Serious injury.	Public & Staff	Appropriate choice of boulder problems in view of descent route and difficulty. Boulder pads used appropriately to lessen impact of a landing.	3	2	6	MED

				Chimera Staff trained in spotting for safety and pad placement.				
Outdoor Bouldering & Climbing	Extreme weather	First Aid injury; Serious injury; Death or Very Serious injury.	Public & Staff	Session cancelled at the discretion of on-site Chimera Staff. Additional water carried by Chimera staff. Session will not run in high winds, electrical storms or in heavy rain. Kit list provided to participants prior to the session.	2	1	2	LOW
Outdoor Bouldering & Climbing	Participant Preparation	First Aid injury or Serious injury.	Public	Safety Briefing as outlined in SOP's.	1	2	2	LOW
Outdoor Bouldering & Climbing	Exacerbation of previous injury or illness	First Aid injury; Serious injury; Death or Very Serious injury.	Public & Staff	Prior declaration of fitness completed Applicable activities chosen based upon the above Specific Risk Assessment carried out in view of fitness declaration.	2	3	6	MED

<b>Activity</b>	Chimera Climbing Canterbury	<b>Location</b>	Canterbury
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	Unit 1, 22 Maynard Road, Wincheap Industrial Estate, Canterbury, CT1 3RH
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>		<b>Signed off by</b>	Marisa Gifford
This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.			

Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Fireman's Pole	Trips and falls from height	Serious injury leading to disability.	Public & Staff	Participants are advised to read the safety notices and stay away from the edge until they understand the correct mounting technique. Staff are available to monitor safe use.	2	4	8	MED
Fireman's Pole	Friction Burn	Burns to skin	Public & Staff	Participants are advised to read the safety notices, to wear long cotton trousers and should understand the correct mounting technique. Hand should apply a light grip with the thighs and feet controlling decent. Staff are available to monitor safe use.	2	4	8	MED

Mezzanine	Dropping an item over the edge or falling from the mezzanine.	Serious injuries or death	Public & Staff	The mezzanine is fitted with a high protective railing with fixed vertical uprights to prevent persons or items from falling through or over the edge. Railings and fixings are regularly inspected, and the area is monitored by staff during operational hours. Any dropped items or unsafe behaviour are reported immediately.	4	1	4	LOW
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<b>Activity</b>	Chimera Climbing Chatham	<b>Location</b>	Chatham
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	Unit 4, The Quays, Jetty, 5 Dockhead Rd, Chatham, ME4 4ZJ
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>		<b>Signed off by</b>	Marisa Gifford
This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.			

Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Balconies	Dropping an item over the edge or falling from the balconies.	Serious injuries or death.	Public & Staff	Balconies have a high railing with glass panels with no gaps. Doors to access balconies for controlled access.	4	1	4	LOW
Training Rig	Falling, failing rig collapse	Minor or serious injuries depending on fall.	Public & Staff	All equipment is installed and maintained in accordance with manufacturer guidelines and industry standards. Fixings and rigging are regularly inspected by trained staff, and any defects are reported immediately and	4	1	4	LOW

				taken out of use until made safe.				
Outside Boulder Sprains and strains	Falling off and landing on the rubber chippings in a dip	Rolling or twisting ankle on landing.	Public & Staff	Staff set regular task to rake chippings to ensure it's a flat as possible.	1	3	3	LOW
Outside Boulder trips, slips	Wooden beams surround is slippery when wet. Stepping in and out of the boulder area and tripping over the wooden surround.	Minor or serious injuries depending on fall.	Public & Staff	Steps are set by the door to enable people to get in and out of the chippings. High contrast from chippings to wooden surrounds to ensure people can see them when stepping out. Only to be used in daylight. Outside boulder closed in bad weather.	2	2	4	LOW
Slipping on ice water on the boulder	Bad or freezing weather means the top will be very slippery; Falling from height.	Serious injuries	Public & Staff	During winter or wet & cold periods of the year the boulder is not a top out, just a match top hold. Or the boulder is set as a traverse to prevent people from getting on top.	3	2	6	MED
Foreign objects in the chippings (Screws from set, Rubbish dropped)	Tripping over or falling on to objects that are not chippings	Minor injuries or impaled injuries	Public & Staff	Staff to regular check the chipping for items especially after being set and remove as required.	2	2	4	LOW

Steps down on the main floor	The step down around the cafe to the sofas	Minor injury	Public & Staff	Yellow edging, sign on the floor and signs on post to advise people that there is step there. Staff to also remind customers to mind the step.	1	3	3	LOW
The Arch								

<b>Activity</b>	Chimera Climbing Tunbridge Wells	<b>Location</b>	Tunbridge Wells
<b>Assessment Date</b>	18 <sup>th</sup> May 2026	<b>Address</b>	Unit 3, North Farm Road, High Brooms Industrial Estate, Tunbridge Wells, TN2 3DR
<b>Review Date</b>	18 <sup>th</sup> May 2027	<b>Completed by</b>	Marisa Gifford
<b>Qualification of lead</b>		<b>Signed off by</b>	Marisa Gifford
<p>This Risk Assessment in no way negates the need for continual dynamic risk assessment and adherence to company policies. Along with generic or site-specific risk assessments, appropriate staff training and assessment.</p>			

Identify Hazards	Associated Risk	Consequences	Who is at Risk	Controls	Severity (S) x Probability (P) = Risk Rating (R)			Action Level
					(S)	(P)	(R)	
Mezzanine, Mini slab & Cave top out area	Not properly topping out, climbing back down or sitting on the edge if the top out.	Serious injury resulting from a fall from height.	Public & Staff	Participants are instructed on the safe use in the safety briefing and are advised to walk down the stairs once they've topped out. Participants and the public are asked not to gather in groups / sit at the top out area.	3	1	3	LOW