

A toolkit for green space volunteers

Templates for community groups volunteering in council parks and open spaces



Basingstoke
and Deane

Contents

	Page
Safety plan for green space volunteer tasks	3
PPE and first aid checklist	7
Tool inventory and maintenance checklist	8
Tool store safety checklist	9
Work party safety checklist	10
Activity plan	11
Risk assessment	12
Risk matrix	13
Volunteer hours example return	14
Community Payback task checklist	15
GDPR and photography individual consent form	16
Photography and filming visitor group consent form	17

Key to symbols



Groups are required to complete this form



Groups are required to submit this to the council after every work party/ event



Groups may find this template useful for planning or group management



Groups are required to submit this to the council quarterly



The council safety checklist for monitoring purposes



Groups are required to submit this to the council annually

Safety plan for green space volunteer tasks



Site name:	Grid reference:
Address:	Emergency access points:
Nearest A&E hospital:	Nearest landline:
Supervisor(s):	First aider(s):
Brief task description:	
Start time:	Expected finish time:
Checklist for session: Tools PPE First aid kit and water Accident book At work signs Bin bags/ litter picker Sharps kit Dog poo bags/ nitrile gloves Risk assessments/ safety plan Hand wipes/ sanitiser gel Tissue/ loo roll Sun cream Brew kit	Tools count:
Weather conditions:	Number of volunteers:
Completed by:	Date:

To report any dangerous/ hazardous issues on site, such as fly-tipping, dangerous trees or sharps, please contact the council via phone on 01256 844844 or online at www.basingstoke.gov.uk/report

Health, safety and wellbeing routine for volunteer tasks

Before activity

1. Activity overview:

- Explain the tasks to be carried out and why they are important.

2. Health and safety briefing:

- Review the risk assessment and discuss the main hazards for today's activity with the group, as well as any risks specific to certain volunteers (list hazards here):

3. Tools and equipment:

- Explain use of tools/ equipment to new volunteers/ refresh current volunteers
- Discuss use of gloves and safe working distances
- Explain where to keep tools when not in use and what to do with faulty items

4. In case of emergency/first aid:

- Communicate location of first aid kit and identify on-site first aiders for the activity
- Explain that information for emergency services is detailed overleaf in case leader is injured
- Request that any medical conditions that may require immediate assistance be made known to the Work Party Leader after the briefing (e.g. allergies/ diabetes)
- Remind all volunteers to have their volunteer 'medicards' in their right back pocket if they have them, or to let you know where to find them in case of emergency

5. Comfort break:

- Inform the group roughly what time the session runs until and when break time is
- Inform participants where the toilets are, or where to go wild!

6. Photos:

- Explain that you might be taking photos and people can tell you if they would rather not be in them. Be sure to get written consent from those happy to be featured.
- Remember to take 'before' photos to document your efforts!

7. Participants:

- Introduce group if new participants attend and buddy them up with someone suitable
- All to sign to say received health and safety talk and to include emergency number
- Check up on participants regularly to ensure they are happy and well!

After activity

8. Debrief:

- Count the tools back in and check they match what was brought out
- Ensure site is left tidy, with stumps cut down to ground level and arisings piled neatly
- Share with the group any interesting finds/lessons learned
- Remember to take after photos of the work you have completed!
- THANK ALL VOLUNTEERS!

Attendance list

Safety is everybody's responsibility, not just the supervisor's. Please write your name in the table below to confirm you understand the safety briefing and will follow the instructions given to ensure everyone has an enjoyable time. If you would like someone to be contacted in case of emergency, please also include their number below (this will be redacted at the end of session).

Date

	Name	Emergency contact number	Name	Emergency contact number
1			14	
2			15	
3			16	
4			17	
5			18	
6			19	
7			20	
8			21	
9			22	
10			23	
11			24	
12			25	
13			26	

Basingstoke and Deane Borough Council is the data controller for the personal information you provide on this form. You can contact the council by phone on 01256 844844, via email to customer.service@basingstoke.gov.uk or by writing to us at Civic Offices, London Road, Basingstoke RG21 4AH. The council's Data Protection Officer can be contacted at dpo@basingstoke.gov.uk. The personal information you provide will be used to keep a record of the safety briefing for this activity for three years. We will not disclose any information to other organisations unless we are required by law to do so or to prevent fraud. Your personal details will only be held as long as is needed for this purpose and in accordance with our retention policy. For further details on how your information is used, how we maintain the security of your information and your rights, including how to access information we hold on you and how to complain if you have any concerns about how your personal details are processed, please visit www.basingstoke.gov.uk or email dpo@basingstoke.gov.uk.

Additional risks

Use this section to make a note of any new additional hazards on site that have appeared recently and/or don't feature in your generic risk assessments.

Date

Hazard	Potential harm	Person(s) at risk	How to prevent harm during today's session	Notes (e.g. transfer hazard to generic risk assessment permanently/ Inform council)

PPE and first aid checklist



Group:

First aid appointed person:

Date:

Completed by:

Item	Total number	Number in good condition	Number to be replaced/ ordered	Comments
PPE				
Gloves – children				
Gloves – normal				
Gloves – gauntlet				
Gloves – nitrile				
Safety glasses/ goggles				
Hard hats				
Ear defenders				
High vis vest				
Welfare kit				
Sun cream				
Antibac wipes				
Antibac gel				
Insect repellent				
Site safety				
Hazard signs				
Hazard tape				
Sharps kits				
First aid kit				
Medium sterile dressings				
Large sterile dressings				
Triangular bandages				
Safety pins				
Sterile eye pads				
Waterproof plasters				
Alcohol-free wipes				
Adhesive tape				
Nitrile disposable gloves				
Finger dressings				
Resuscitator face shield				
Foil blanket				
Hydrogel burn dressing				
Shears				
Conforming bandage				
Sterile eyewash				
Survival bag				

Tool inventory and maintenance checklist



Group:

Date:

Completed by:

Tool	Quantity	Condition	Cleaned/ oiled/ sharpened			Comments/ replacements
			✓	✓	✗	
<i>e.g. Loppers</i>	5	<i>4x good 1x broken</i>	✓	✓	✗	<i>1 pair to be replaced</i>

Tool store safety checklist



Group:

Date:

Completed by:

Hazard	Yes/ no N/A	Comments If you answer <i>no</i> , explain the issue identified
Accessibility: Are areas unobstructed and floor surfaces clear?		
Slips and trips: Is the flooring in good condition? Is/are there any litter/ spillages? Are there any trailing cables/straps?		
Lighting: Is lighting satisfactory?		
Overcrowding: Is there enough space to move around safely?		
Manual handling: Are the weight of loads known? Are heavy loads stored at lower levels? Can volunteers handle the loads safely/ lift together?		
COSHH: Is safety information available for chemicals/ aerosols that require COSHH assessments? Are COSHH materials stored safely?		
Property and surrounds: Is the store secure? Do volunteers feel safe when accessing it?		

Work party safety checklist



Group:

Work party leader:

Date:

Completed by:

Action	Yes/ no N/A	Comments
Health, safety and wellbeing routine		
Activity overview given		
Main hazards explained		
Tools talk undertaken		
First aiders identified		
First aid kit location identified		
Medical conditions/ volunteer medicard		
Comfort break discussed		
New participants introduced/ buddy up		
Record keeping		
Safety plan completed		
Risk assessments on site		
Accident book on site		
Attendance list signed		
Site safety		
At work signs up		
Area cordoned off (machinery)		
Tools stored safely on site		
PPE available and used		
Site left tidy/ safe before leaving		

Activity plan



Activity date:		Activity time:	
Location:			
Supervisor: (Consider ratios of supervisor:volunteer for safety)		First aider(s):	
Task description:			
Aims for the day:			
Tools required:			
Personal Protective Equipment required:			
Other equipment/ materials required:			
Risk assessments required (please tick):			
Site risk assessment	Volunteer work party	Scrub clearance	
Woodland management	Working in water	Ecological surveying	
Pond-dipping	Minibeast hunting	Bat walk	
Guided walk	Other (please state)		
Completed by:			Date:

Risk assessment



Location:

Hazard	Potential harm	Person(s) at risk	Precautions and control measures	Likelihood of occurrence	Hazard severity	Risk factor	Person(s) responsible
Risk Assessment for:			Assessment undertaken by:		Last updated on:		
			Name: Signed: Date:		Date: Date: Date:		

*Groups do not have to use this layout, but must produce risk assessments for all activities. **Existing risk assessments must be reviewed and submitted to the council annually. Any new risk assessments produced for activities that haven't previously been carried out by the group must be submitted to – and approved by – the council before the task/ event goes ahead.

Risk matrix



Risk matrix				Hazard severity				
				1	2	3	4	5
				Low	Slight	Moderate	High	Severe
Doing this activity every day:				Minor injury not requiring first aid	Moderate injury resulting in first aid	Injury or disease resulting in >7 days off work	Death or major injury to one individual	Multiple death
Likelihood of occurrence	1	Unlikely	Injury may occur less than once in a lifetime	1	2	3	4	5
	2	Possible	Injury may occur less than once in a year	2	4	6	8	10
	3	Occasional	Injury may occur two-three times per year	3	6	9	12	15
	4	Likely	Injury may occur more than three times per year	4	8	12	16	20
	5	Very likely	Injury is probably going to occur	5	10	15	20	25

	If control measures are followed as described, risk factor is low enough to continue
	Hazard carries a moderate level of risk. Attempt to eliminate or isolate hazard; if this can't be done, decide whether task is essential and who is competent to ensure it is carried out safely. Additional control measures may be necessary
	Hazard is very high risk. Unless it can be isolated/eliminated, do not carry out task. Find alternative solution.

Volunteer hours example return



Quarter		External funding											
Group name	The slashers	Name of funder	Date funding applied for	Amount applied for	Successful?	Amount secured	What funding is for						
Number of active volunteers in your group:	8	Flowers for All	23.4.18	£360	Y	£250	Spring bulbs						
Person completing report	Charlie Hindle	Outdoor Charitable Trust	25.6.18	£800	N	£0	Survey Equipment						
Date of activity	Activity	Number of Conservation Group volunteers	Number of hours worked	Total number of Conservation Group hours (no. of vols x hrs)	Number of Community Payback attendees	Number of hours worked	Total number of Community Payback hours (no. of people x hrs)	Number of Corporate Volunteer attendees	Number of hours worked	Total number of Corporate Volunteer hours (no. of people x hrs)	Number of visitors attending activity/ event	Number of school children attending activity/ event	Comments
4.4.18	Work party	7	3	21			0			0			
18.4.18	Work party with Payback	6	3	18	5	3	15			0			
20.5.18	Corporate work party	2	5	10			0	12	5	60			Mars Finance team
30.5.18	Tools maintenance	2	3	6									
6.6.18	Bat walk	3	1.5	4.5			0			0	16		
12.6.18	School site visit and bug hunt	4	2	8			0			0		32	Fairview Primary Year 3
14.6.18	Committee meeting	6	2	12			0			0			
18.6.18	Site visit with BDBC	3	1.5	4.5			0			0			
24.6.18	Funding research	1	2	2			0			0			
	Totals	34	23	86	5	3	15	12	5	60	16	32	

Community Payback task checklist



Site	Date	Time

Contact details		
Basingstoke and Deane BC (weekdays)		
Volunteer Group Supervisor (weekend)		
Community Payback Coordinator* (weekdays)		
Community Payback Supervisors (weekend)		

*Payback will contact group supervisor for the task during the week to confirm details for Saturday

Session Plan	
Description:	
Map/photos (if necessary):	
Standard equipment provided by Payback: PPE Bow saws Loppers Shears Rakes Wheelbarrows Forks/ spades Litter pickers/ bin bags	Optional equipment requested for session: e.g. tree poppers Optional powered equipment requested (by prior arrangement): e.g. strimmer
Details for Payback Team Supervisor	
Arisings:	
Additional risks:	
Toilets:	
Site details	
Address:	
Directions:	
Parking/ access:	
Map (if necessary):	

*Only groups who have booked Community Payback need to complete this form in advance of their session and submit to the council.

GDPR and photography individual consent form



Insert group logo here

GDPR consent

We currently hold your name and contact details for the purpose of arranging meetings, organising events, sharing minutes, developing actions and general communications.

We will only hold this information for as long as you wish to participate in the group activities. We only share the contact information with other members of the group through an email distribution list.

We need your consent to:

- continue holding any contact information we have about you
- share that contact information with the rest of the group as required.

Please confirm below the contact details you are happy for the group to hold, for the purpose of participating in the group activities:

Print name	
Email	
Telephone number	
Address	
Date	

If at any time you wish to cease being a member of the group, you can contact us by email or phone and we will delete all the contact information we hold:

(Insert email and phone number contact for group admin)

Photography and filming individual consent

In order for this group to comply with data protection and confidentiality regulations, it is necessary for us to obtain written consent to use photographs and video footage that features you, or a child in your care, in our communications.

You should only agree to us using your photograph or film featuring you if you feel completely happy with us doing so and you are under no pressure or obligation to sign this consent form.

Photograph/video distribution: Your photograph or appearance in this video footage may be used in any group communications, including printed material and social media.

Please tick box and sign below to confirm consent

IF UNDER 16 ONLY AND AT THE ABOVE ADDRESS	Name of child(ren)	
	Age of child(ren)	
	Parent/ Guardian name	

I understand that still and moving images and audio will be stored electronically in accordance with data protection laws. I have the right to withdraw this consent at any time by contacting the group by email or phone (details as above).

Signed (NB parent or guardian if under 16)	
---	--

Photography and filming visitor group consent form



Insert group logo here

Date photos taken:		Location photos taken:				
Group contact (if applicable)	Organisation (if applicable)	Contact telephone number	Contact email	Contact email		
<p>In order for this group to comply with data protection and confidentiality regulations, it is necessary for us to obtain written consent to use photographs and video footage that features you, or a child in your care, in our communications. Everyone in the photos or video must give details and sign below. You should only agree to us using your photograph, or film featuring you, if you feel completely happy with us doing so and you are under no pressure or obligation to sign this consent form.</p> <p>Photograph/ video distribution: Your photograph or appearance in this video footage may be used in any group communications, including printed material and social media.</p> <p>I understand that still and moving images and audio will be stored electronically in accordance with data protection laws. I have the right to withdraw this consent at any time by contacting (insert email and phone number contact for group admin) <i>Please tick box below and sign to confirm:</i></p>						
Print name (of person in photograph/ video)	Address	Telephone number	IF UNDER 16 ONLY		Tick box for consent	Signed (parent or guardian if under 16)
			Age of person	Parent/ guardian name		

www.basingstoke.gov.uk | 01256 844844

customer.service@basingstoke.gov.uk

  @BasingstokeGov

If you need this information in a different format, for example large print, CD or braille, please contact the council.

©Basingstoke and Deane Borough Council December 2022

