## Appendix 1 – Self Assessment

Toolbox 1 – Capacity			
Position	Description of performance	Comment	
1	There is no evidence or knowledge as to how the current capacity was calculated.Staff not conversant with how to calculate capacities or the use of P and S factors.		
2	Some knowledge of how to calculate capacities using the entry, holding and exit figures.No recognition of the relevance of P and S factors or reduction of capacity applied even though defects have been identified.		
3	Good understanding of the relevant parts of the capacity calculations. Evidence that the relevant indicative questions (See SGSA Safety Management Guide) have been used in identifying the P and S factors, but there is no record of the way in which the factors have been applied.	The capacity of Cambridge United FC North and Habbin stands have been recalculated in recent years and due consideration given to the Green Guide. The indicative questions have been used as part of the P&S factor calculation, but not recorded in a manner to identify how they have been applied.	
4	Clear evidence and experience of calculating capacities. Clear evidence that the P and S factors have been used in calculating the capacity and the Green Guide methodology has been recorded.	Although the P and S factors have been used to calculate capacities, and some evidence exists, future calculations will record the methodology in more detail to provide evidence of the process.	
5	Clear and concise capacity calculations have been recorded and are regularly reviewed by experienced staff. A clear audit trail for the whole process.		
	Toolbox 2 - SAG Performance		
1	SAG meetings are not held or are very infrequent appropriate to the risks. Lack of interest in process.		
2	Meetings are held but many core members of the group are not regular attendees or send deputies who are not empowered to make decisions on their behalf. Low levels of interest.		
3	Although meetings are held, with regular attendees, the ability of the group to influence the performance of the club is diminished by not identifying actions that need to be taken. Effective leadership of the group by the Chair.		
4	SAG meetings are regularly held appropriate to the risks. The certifying authority identifies actions that need to be taken, records the findings but does not ensure that actions are followed through to completion. Effective leadership by the Chair and effective participation from members of the group.	SAG meetings have regularly taken place as evidenced by the body of agendas, minutes etc. Where actions have been required by the certificating authority, documentary evidence exists in most cases to prove they have been carried out. The chair provides leadership and ensures full participation from all attendees.	
5	Regular meetings with all groups represented, where actions are identified, recorded and acted upon, with good audit trails. Effective leadership from the Chair and keen		

	interest from the group.	
	Toolbox 3 - Safety Certification	
1	Although a safety certificate is in force the conditions, or the procedures in any operations manual required under the safety certificate, are out of date in respect with current circumstances.	
2	The certificate, and operations manual where one is required under the safety certificate, has/have been reviewed on an ad hoc basis, but no amendments have been issued where changes have been identified.	
3	The certificate, and operations manual where one is required under the safety certificate, is the subject of an annual review but any amendments are not immediately made or changes recorded.	A review of the certificate is scheduled in the SAG agendas. Due to other pressures, the changes identified by the most recent review took some months to be incorporated into the safety certificate. This is the first time such a delay has occurred, but prevents a level 4 score at the present time. The previous version of the safety certificate is kept on record to provide a record of any changes.
4	Annual review of certificate, and operations manual where one is required under the safety certificate, with amendments issued immediately to ensure that the certificate is up to date.	
5	A dynamic review of the certificate and operations manual where one is required under the safety certificate, is undertaken,-The club fully aware of the conditions that apply to it and where an operations manual is in place the local authority is kept aware of any proposed changes. Amendments issued immediately after changes and public notices issued to advise of the amendment to the safety certificate.	
	Toolbox 4 – Monitoring	
1	Local authority does not undertake any form of monitoring of compliance with the safety certificate.	
2	No risk assessments undertaken to inform frequency of inspections. Inspections limited to single statutory visit. No prescribed forms for inspections and no record of results conveyed back to the club or retained on file.	
3	Risk assessed match DPI's are undertaken but no planned annual inspection, covering all aspects of the spectator safety is made. Forms are used to record results.	
4	A programme of risk assessed DPI's planned and annual inspection undertaken, with issues being identified but not followed up to completion.	
5	Programme of risk assessed DPI's and inspections using comprehensive report forms. All issues identified, communicated to the club and followed through to completion. Comprehensive audit trails.	There is a plan for annual inspections and DPIs issued at the beginning of the year by the SAG chair. This is communicated to the enforcement staff for implementation. The completed

standard inspection and DPI forms a soon as practicable and (unless urge next SAG meeting. Inspections and for record and audit purposes.   1 No written procedures in place for overseeing the certification process.   2 Unwritten set of procedures is in place for overseeing the certification process.   3 Written procedures are produced and communicated to all staff.   4 Comprehensive procedures are issued to all staff. They are reviewed at least annually and updated as necessary. All staff receives training and all actions are	ent) matters raised at the DPIs are electronically filed cation, called the 'Hub,' for cedures etc. They are
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for record and audit purposes.   Toolbox 5 – Procedures   1 No written procedures in place for overseeing the certification process.   2 Unwritten set of procedures is in place for overseeing the certification process. Staff actions do not always follow the procedures. The authority has a web based appli the storage of all standard forms/pro accessible to all.   3 Written procedures are produced and communicated to all staff. The authority has a web based appli the storage of all standard forms/pro accessible to all.   4 Comprehensive procedures are issued to all staff. They are reviewed at least Staff has received training internally,	cation, called the 'Hub,' for cedures etc. They are
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documented. Planning College. All Hub documen Actions are NOTfully documented.	ough the Emergency
5 There is a process for the annual review of procedures, with senior staff overseeing the process, monitoring actions and clear audit trails are produced.	
Toolbox 6 - SAG Governance	
1 A SAG has not been formally established.	
2 The group has been formed. No terms of reference have been produced. Lack of audit trails.	
3 Terms of reference established. Agendas for meetings. No real compliance with the identified roles and responsibilities. Lack of clarity in identifying issues in minutes or on action notes. Audit trails exist.	
Request agenda items (approx two weeks) before meetings. Timely (approx two weeks) minutes reflect the identification of required actions; these are followed through to completion.	shortages will inevitably
5 Strong leadership which regularly reviews the performance of the group against the terms of reference. Annual review of terms of reference. Effective administration of the group. Strong support from the group.	
Toolbox 7 – Policy	
1 Although policy on safety certification may have been determined, it has not been promulgated. Staff lacks guidance.	
2 Policy document is in place but staff have not been fully briefed or trained in their respective roles.	
3 Policy clearly documented and communicated to all staff. Monitoring of performance against policy not regularly undertaken.	

4	Regular review of policy and performance undertaken by senior staff. Policies amended where considered necessary. Changes to policy immediately communicated to all staff.	Regular reviews of policy and performance are undertaken by senior staff. Policies reviewed as part of the process of re- examining all documents on the Hub. Changes to policy are communicated to staff once the process has been completed.
5	Senior staff regularly reviews all the policies and adapt in a dynamic way. Policies are communicated to all staff.	Previous comments about the management of documents on the Hub relevant.
	Toolbox 8 - Training and Expertis	Se
1	Staff lack experience or formal training. Little support.	
2	Staff have received training but lack of relevant experience does not give them confidence to act with authority. Therefore they are unable to make effective judgements.	
3	Identified that staff are inexperienced with only limited training. Resources are allocated, including time, to ensure that more guidance and support given to staff	
4	Experienced staff who has received appropriate training. They receive a good deal of support to undertake roles. Regularly monitored by way of performance and quality of reports.	All staff involved with safety of sports grounds work is relatively senior and experienced. Comments on training in Toolbox 5 are relevant. Reports submitted to chair for comment.
5	Confidence in the ability of the staff. They are well trained, experienced and are clearly capable of dealing with all issues within their delegated authority. A commitment from LA to support staff in carrying out the role	
-	Toolbox 9 - Enforcement	
1	No enforcement policy and enforcement processes developed. No staff guidance issued or training given. No willingness to enforce relevant sports ground safety standards.	
2	Staff lack experience in their role. Unsure of policies to follow through poor communication. Poor documentation. Lack of process to issue prohibitions.	
3	Policy and process on enforcement is promulgated. Staff not fully trained or supported in their roles. Documentation is not in accordance with regulators code.	
4	Safety at Sports Grounds policy and process, communicated to staff. Staff is experienced and confident to carry out enforcement. Documentation, including audit trails, has scope for improvement.	All staff involved with safety of sports grounds work is relatively senior and experienced with law enforcement duties, due to the demands of the 'day job' as trading standards officers.
5	A defined policy is implemented and applied by experienced staff. Regular monitoring of performance against agreed criteria. Clear audit trails. A process has been established to enable enforcement action to be taken when appropriate.	There is a corporate enforcement policy that is held on the Hub for reference. All sports grounds related regulatory activities are recorded on the same case management system as other investigations.
	Toolbox 10 - Business Continuity and Resilie	ence Planning
1	No business continuity or resilience planning in place for safety certification process.	
2	No formal planning in place although staff have experience which will enable them to 'plug the gaps'.	

3	A plan is in place but it has never been tested. Staff not given the opportunity to act at a higher level to test the resilience of the system or their own abilities. There is no process for learning lessons from any incidents and developing contingency plans.	
4	Plans are in place but have not been tested. Staff are trained and experienced to ensure service delivery continues but formal processes are not in place. Staff flexibility leads to a higher degree of resilience.	
5	Staff trained and experienced in all of the roles that they could be expected to perform. Plans are regularly reviewed and tested to ensure resilience. Staff is confident in their abilities to ensure continuity. Plans and processes comply with recognised standards.	There has been a programme of business continuity and resilience built in for the past three years. Safety of sports grounds forms part of the local authority risk register which is regularly reviewed and updated. Although the service has engaged in a progression of emergency exercises to test plans, nothing has been specifically related to safety of sports grounds work. Nevertheless, in addition to the chair, there are three officers with full experience available to take on any role should circumstances dictate.