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Research Project Risk Assessment

Risk is defined by reference to the potential physical or psychological harm, discomfort or stress that the research project might generate. You must consider if you are: working alone, in unsatisfactory working conditions, potential harassment situations, working in vulnerable situations, effect on participants and others, travel, etc.

Please ensure that your Project Supervisor has signed this form before submission.

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| Name of Project Proposer: | Shubh Ravishankar Gawhade |
| Matriculation No.: | 2202875 |
| Programme: | Game Design and Production |
| Module Code: | ART410 |
| Project Supervisor: | Martin Zeilinger |
| Project title: | One-Way Ride |

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| **Purpose / Method of Work** | |
| Design research related to various games, talks, books, movies and other applied knowledge will be explored to frame the design choices which would be implemented in the game.  Personal Desktops will be used to work with licensed softwares to create different components such as 3D, 2D and other assets that will be combined to create a digital games media. | |
| **Fieldwork** (work conducted somewhere other than **your home** or **a University facility**.) | |
| What fieldwork will your project involve, and where will it take place? (if applicable) | |
| **MANUAL HANDLING RISK** | |
| Has a manual handling risk been identified? Yes / No  Is the risk considered to be …Low / Medium / High  Is a further detailed assessment required? Yes / No  If the answer to the above question is YES a separate manual handling assessment will be required to fulfil the requirements of the Manual Handling Operations Regulations 1992. | |
| **PERSONAL PROTECTIVE EQUIPMENT (if required)** | |
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| Is training and instruction required? Yes / No  Is there need for special accommodation? Yes / No | Is there need for test/examination? Yes / No  Is all P. P. E. compatible? Yes / No |

**HAZARDS** - Please identify any hazards that may be involved in your project work. Provide information on the hazard, who will be affected and the steps you will take to reduce the risk.

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| **Main Hazards Identified** | **Risk Level** | **Who Will Be Affected** | **Control Measures to Reduce the Risk** |
| Headaches, Eye strain and Fatigue. | High | Everyone working on the game. | Regular breaks, not too long online meetings and more in-person meetings. |
| Burnout. | Medium | Everyone. | Reduction and balance of workload. |

**Hazards** may include – but are not limited to – working near water, at height, on rugged terrain or near traffic; situations where your personal safety may be at risk; difficulty of access to working locations; severe weather conditions; use of non-standard, unfamiliar or potentially dangerous equipment. **Control measures** may include supervision; use of appropriate clothing or safety equipment; seeking training or task-specific safety briefings before starting work.  
(See the Abertay University “Health and Safety” web site for further guidance.)

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| **CHEMICALS/MATERIALS INVOLVED** | **HSC NO.** | **ASSESSMENT DATE** |  | **SPECIFIC WORK EQUIPMENT PROVIDED** |
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| **SPECIFIC LEGISLATIVE REQUIREMENTS** |  | **LEVEL OF SKILL/TRAINING REQUIRED** |
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**Please confirm that:**

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|  | Yes/No/NA |
| I have identified the possible hazards involved and/or the use of non-standard equipment, and have listed appropriate control measures above | Yes |
| I have consulted the Abertay University “Health and Safety” web site, including (if fieldwork is involved) the UCEA Guidance on Fieldwork | Yes |
| When performing fieldwork, I will avoid lone working – I will be accompanied at all times by at least one other person (friend, student, colleague etc.) | NA |
| Before conducting fieldwork, I will provide my supervisor or the school office with an itinerary, including my contact details, and information on when and where the fieldwork will be conducted. During fieldwork, I will keep regular contact with my supervisor or the school office | NA |

**SIGNATURES**

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| Proposer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: 17/01/2023 |
| Project Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: |