

Risk Assessment

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| 1. **Activity or task to be assessed:**
 | Form No |  |
| Group/Service Area: |  | Work Activity or Task |  |
| Workplace/Team |  |  |  |
| Date of Assessment: |  | Date for Review |  |
| Name of Assessor(s): |  | Signature: |  |
| Manager/Headteacher: |  | Signature: |  |

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| 1. **Risk Matrix – This section is used for guidance to complete Section C Risk Level column**

**Hazard** is something with the **potential** to cause **harm**. **Risk** is the **likelihood** of someone being hurt multiplied by the **severity** of the occurrence. **Risk** **Level = likelihood x severity** |  | **PRIORITY OF ACTION**High 20 - 25 Unacceptable – Stop work or activity  until immediate improvements can be made.Medium 10 – 16 Tolerable but need to improve within a reasonable timescale, e.g., 1-3  months depending on the situation.Low 5 - 9 Adequate but look to improve by next review.Very Low 1 – 4 Residual risk acceptable. No further action required all the time the control measures are  maintained. |
| **5 x 5 RISK MATRIX** |
| Increasing consequence or severity è | 5 | **5 low** | **10 med** | **15 med** | **20 high** | **25 high** |
| 4 | **4 very low** | **8 low** | **12 med** | **16 med** | **20 high** |
| 3 | **3 very low** | **6 low** | **9 low** | **12 med** | **15 med** |
| 2 | **2 very low** | **4 very low** | **6 low** | **8 low** | **10 med** |
| 1 | **1 very low** | **2 very low** | **3 very low** | **4 very low** | **5 low** |
|  | 1 | 2 | 3 | 4 | 5 |
|  | Increasing likelihood or probability è |

**Score**

5

4

3

2

1

**Likelihood / Probability**

Very likely / Almost certain

Likely

Fairly likely / Possible

Unlikely

Very unlikely

**Description**

Event is expected to occur in most circumstances

Event will probably occur in most circumstances

Event could occur at some time

Event is not likely to occur in normal circumstances

Event may occur only in exceptional circumstances

**Score**

5

4

3

2

1

**Consequence/Severity**

Catastrophic / Severe / Fatality

Major injury / ill health

Moderate (over 7-day injury)

Minor injury / ill health

Insignificant / no injury

**Description**

Death or permanent disability to one or more persons

Hospital admission required, eg, broken arm or leg

Medical treatment required, over 7-day injury

First aid is required

Injuries not requiring first aid treatment

1. **Use Section B to identify risk level for each hazard**

**Record any guidance referred to here (e.g. Council arrangements, Codes of Practice, HSE web pages, British Standards etc.)**

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| What are the**Hazards?** | **Who might be harmed and how** | **What are you already doing****(Existing Controls)** | **Risk****Level****Use Risk Matrix above** | **What further actions****are necessary** | **Residual****Risk****Level****Use Risk Matrix above** | **Action** |
| **Who** | **When** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |

**If more hazards are identified, please add more rows**

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| **D. A Safe System of Work (SSOW) is a procedure, or set of procedures, that explains exactly how a work task should be carried out safely. It can be used to induct/train staff how to do a task. If a SSOW is needed it can be written below or in a separate document referenced below.** |

**E. Circulation List**

Please list people who have been informed of the assessment.

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| --- | --- | --- | --- |
| NAME | DESIGNATION | SIGNATURE | DATE |
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