

Example of a risk assessment form

	<h1 style="margin: 0;">Risk Assessment</h1>									
Reference Number		Issue Number			Service					
Activity										
Persons affected	Numbers of those exposed		Employees			Contractors			Members of public	
	Human Behaviour Consider if there are any issues which could be significant in assessing this activity which relates to possible increased risk due to Human Behaviour. <i>E.g. members of public ignoring signage and barriers</i>		List these: Eg. Failure to adhere to policy & procedures. Aggression from members of the public. Lack of experience in dealing with volatile violent situations. Individuals under the influence of alcohol or drugs. Communication failure through intoxication. Mental Health		Vulnerable Staff Are there any staff who may be particularly vulnerable and at risk. e.g. young persons (under 18); new and expectant mothers, staff with disabilities or health conditions that might increase risk.		List these: Note - personal risk assessment should be carried out			
	Occupational Health Consider if there are any issues which could be significant in relation to occupational health <i>e.g. hearing loss, stress and musculoskeletal damage</i>		List these		Other Vulnerable Persons Are there service users or visitors who may be particularly vulnerable and at risk e.g. children or adults with physical or learning disabilities		A personal risk assessment should be considered.			

Summary of Control Measures		-							
Hazard	Hazard effect	Person affected (e.g. children/staff)	Severity	Likelihood	Risk	Control measures to minimize risk	Severity	Likelihood	Risk
						-			
						-			
						-			
						-			
						-			
						-			

Most Likely Severity: – 5 = Multiple deaths could be caused 4 = One death or permanent disablement, or multiple major injuries could be caused. 3 = Hazard capable of causing major injury (impairment lasting more than 1 month) 2 = Hazard can cause equipment damage, illness or injury (with impairment lasting between 3 days and 1 month) 1 = Hazard cannot result in serious injury or illness, unlikely to require more than minor first aid	Likelihood / Probability:– 5 = Probably will occur in the next six months 4 = Probably will occur in the next year 3 = Probably will occur in the next 5 years 2 = May occur in the next 5 years 1 = Unlikely to ever occur	Degree of Residual Risk: – 16 – 25 High (Unacceptable. Task must not be carried out without additional controls) 8 – 15 Medium (Task may need to be monitored) 1 – 7 Low
Final assessment or comments	Overall Residual Risk XX	

Is the overall risk acceptable		Yes		No	If yes , work can be commenced. If no , task must be re-evaluated.			
Initial assessment by (Name)					Signature		Date	
Assessment approved by					Signature		Date	
Assessment review by					Signature		Date	

Assessment must be reviewed when there any changes to environment, procedures, equipment or new employees who may have different capability.

Think Safe, Work Safe, Stay Safe

Risk Assessment Reference & Title			By signing below, you are confirming that you have read & understood this Risk Assessment, and you agree to follow the controls specified when completing the task.		
Date	Name	Signature	Date	Name	Signature