|  |  |
| --- | --- |
| **AREA / ACTIVITY / TASK BEING ASSESSED:** |  |
| **DEPARTMENT:** |  |
| **SERVICE:** |  |
| **REFERENCE NO.** | **VERSION** | **DATE OF ASSESSMENT** | **DATE OF NEXT REVIEW** |
|  |  |  |  |
| **Description of operations and scope of assessment:*** Activities,
* Environment(s)
* Equipment, materials etc.
 |  |
| **Address / Location where assessment conducted:** |  |
| **Legislation /** **Management standards** | Health and Safety at Work Act 1974Management of Health and Safety at Work Regulations 1999 |

|  |  |  |
| --- | --- | --- |
| **Name of Risk Assessor(s)** | **Job Title:** | **Signature(s) of Risk Assessor(s)** |
|  |  |  |
|  |  |  |
|  |  |  |

| **Item index No.** | **Identify Hazard(s)** | **Who/What is likely to be harmed and how?** | **Existing / Current Control Measures** | **Risk Rating as per Matrix** | **Further actions required to reduce risk** **&****person responsible for action** | **Residual risk(s) as per matrix after additional controls** |
| --- | --- | --- | --- | --- | --- | --- |
| **0.** | **Describe what may have the potential to cause harm/damage:*** **Work Activities**
* **Equipment**
* **Substances**
* **Environment**
* **People**

**etc** | PupilsStaffVisitorsVehiclesetc | What are we doing to prevent harm/damage? | **TRIVIALR****LOW**MEDIUMHIGH | Use the risk action levels on the Matrix as guidance to prioritise risk control measures | **TRIVIALR****LOW**MEDIUMHIGH |
| **1.** |  |  |  |  |  |  |
| **2.** |  |  |  |  |  |  |
| **3.** |  |  |  |  |  |  |
| **4.** |  |  |  |  |  |  |
| **5.** |  |  |  |  |  |  |
| **6.** |  |  |  |  |  |  |
| **7.** |  |  |  |  |  |  |
| **8.** |  |  |  |  |  |  |
| **9.** |  |  |  |  |  |  |
| **10.** |  |  |  |  |  |  |

| **MANAGEMENT ACTION PLAN** |
| --- |
| **AREA / ACTIVITY / TASK BEING ASSESSED:** |  |
| **Further actions necessary to control or reduce risk** | **Action by** | **Priority for action based on level of residual risk** | **Target completion date** | **Actual completion date** | **Comments** | **Initials** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Certain**Expect accident/incident to occur |  |  |  |  |
| **Highly Likely**A high chance that accident/incident will occur |  | MR |  |  |
| **Likely**Moderate chance that accident/incident will occur |  |  |  | HR |
| **Unlikely**Minor probability that accident/incident will occur | **TR** | **LR** | MR |  |
| **Negligible**So little chance that accident/incident will occur that the risk is close to zero |  |  |  |  |
|  |  |  |  |  |
| **Risk Action Levels:** | Trivial Loss | Minor Injury | Over 7 Day Injury | **Major Injury** |
| **TRIVIAL RISK (TR)** | * No personal injury
* Minor inconvenience
 | * First Aid treatment only
* Scratches, minor cuts, bruises
* Temporary ill health
* Nausea, headache,
* Minor damage to property
* Reduced Service
 | * Injuries that require medical treatment such as a broken finger, thumb or toe, lacerations requiring stitches.
* Serious strains, sprains or bruising.
* Minor burns.
* Loss of service
 | * Fracture
* Amputation
* Loss of sight/hearing
* Injury, burns or loss of consciousness from electric shock

**OR** **Fatality**Immediate or through a condition that will eventually lead to death |
| No further action required. |
| **LOW RISK (LR)** |
| Consider reducing risk if little or no cost (time/money/effort) involved. |
| **MEDIUM RISK (MR)** |
| Consider new/additional controls, to reduce the risk to as low as is reasonably practicable. |
| **HIGH RISK (HR)** |
| New/additional controls must be introduced immediately to reduce the risk to an acceptable level. No new work should proceed. |

**LIKELIHOOD OF OCCURRENCE**

**SEVERITY**

**EVALUATION MATRIX**