

RISK ASSESSMENT FORM

Assessors name		Date	
Description of process, activity or task to be risk assessed			
Describe the location where the activities are taking place			
Describe the activities being performed			
Describe the equipment and/or substances being used			
Describe the people involved in these activities (and others who might be affected)			



RISK ASSESSMENT FORM

Description of hazard and hazardous event		Who might be harmed?	What risk controls are currently in place?	Current risk rating			Are further controls needed?	Date to be completed by	Residual risk rating		
				L	C	R			L	C	R
Location											
Activities											
Equipment and substances											

RISK ASSESSMENT FORM

RISK RATING CALCULATOR

Likelihood that hazardous event will occur	
1	Very unlikely
2	Unlikely
3	Fairly likely
4	Likely
5	Very likely

Consequence of hazardous event	
1	Insignificant - no injury
2	Minor - minor injuries needing first aid
3	Moderate - up to three days' absence
4	Major - more than seven days' absence
5	Catastrophic - death

ACTION LEVEL TABLE

Risk Rating	Action
20 - 25	Stop - stop activity and take immediate action
15 - 16	Urgent action - take immediate action and stop activity if necessary, maintain existing controls rigorously
8 - 12	Action - improve within specified timescale
3 - 6	Monitor - look to improve at next review or if there is significant change
1 - 2	No action - no further action but ensure controls are maintained and reviewed

