Risk Assessment Guidance

The assessor can assign values for the hazard severity (a) and likelihood of occurrence (b)
(taking into account the frequency and duration of exposure) on a scale of 1 to 5,
then multiply them together to give the rating band:

|  |  |
| --- | --- |
| Hazard Severity (a) | Likelihood of Occurrence (b) |
|
| 1 – Trivial (eg discomfort, slight bruising, self-help recovery)**2 – Minor** (eg small cut, abrasion, basic first aid need)**3 – Moderate** (eg strain, sprain, incapacitation > 3 days)**4 – Serious** (eg fracture, hospitalisation >24 hrs, incapacitation >4 weeks)**5 – Fatal** (single or multiple) | **1 – Remote** (almost never)**2 – Unlikely** (occurs rarely)**3 – Possible** (could occur, but uncommon)**4 – Likely** (recurrent but not frequent)**5 – Very likely** (occurs frequently) |

The risk rating (high, medium or low) indicates the level of
response required to be taken when designing the action plan.

**Trivial**

**Minor**

**Moderate**

**Serious**

**Fatal**

|  |
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| Rating Bands (a x b) |
| **LOW RISK****(1 – 8)** | **MEDIUM RISK****(9 - 12)** | **HIGH RISK****(15 - 25)** |
|  |  |  |
| Continue, but review periodically to ensure controls remain effective | Continue, but implement additional reasonably practicable controls where possible and monitor regularly  | -STOP THE ACTIVITY-Identify new controls. Activity must not proceed until risks are reduced to a low or medium level |

**Remote**

**Unlikely**

**Possible**

**Likely**

**Very likely**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** |
| **2** | **4** | **6** | **8** | **10** |
| **3** | **6** | **9** | **12** | **15** |
| **4** | **8** | **12** | **16** | **20** |
| **5** | **10** | **15** | **20** | **25** |

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| Risk Assessment Record |
| Risk Assessment of: | Assessor(s): | Date:  |
| Overview of activity / location / equipment / conditions being assessed: |  |
| Generic or specific assessment? | Context of assessment (delete as appropriate): planning stage  |

| # | Hazard(s) identified | Persons affected | Existing controls & measures | A | B | A x B | Additional controls required |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |
|  | Assessor signature: | Print name: | Review date: |

|  |
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| Risk Assessment Action Plan |
| Action Plan in respect of: | Prepared by: |
| Ref no. | Action to be taken, incl. Cost | By whom | Target date | Review date | Outcome at review date |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Responsible manager’s signature: | Responsible manager’s signature: |
| Print name: | Date: | Print name: | Date |