## RISK ASSESSMENT - ULAW STANDARD RISK ASSESSMENT

**health & Safety Risk Assessment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ACTIVITY:** | ***Insert Activity Type*** | **LOCATION:** | ***Insert Site*** | **ASSESSMENT NUMBER:** | **RA/ *Enter Number*** |
| **ASSESSOR:** | ***Insert Name*** | **DATE:** | ***Date of Assessment*** | **REVIEW DATE:** | ***Date of Review*** |



**PART A – Hazard Identification and Risk Assessment**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ref** | **Hazard** | **Potential Harm** | **Existing Risk**  **Control Measures** | **Level of Risk** | | | **Additional control measures** | **Residual risk** | | | **Person responsible** | **Target completion date** |
| Prob-ability | Severity | Risk Score | Prob-ability | Severity | Risk Score |
| ***EG*** | ***Over Crowding which restrict safe movement.*** | ***All personnel attending the event*** | ***Number of visitors allowed agreed by the capacity of the rooms*** | ***3*** | ***3*** | ***9*** | ***Numbers on the day must be monitored*** | ***2*** | ***2*** | ***4*** | ***JM*** | ***Up to and including Day of Event*** |
| 01 |  |  |  |  |  |  |  |  |  |  |  |  |
| 02 |  |  |  |  |  |  |  |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |  |  |  |  |  |
| 05 |  |  |  |  |  |  |  |  |  |  |  |  |
| 06 |  |  |  |  |  |  |  |  |  |  |  |  |
| 07 |  |  |  |  |  |  |  |  |  |  |  |  |
| 08 |  |  |  |  |  |  |  |  |  |  |  |  |
| 09 |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |

**PART B – Action Plan**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **action plan** | | | | |
| **Ref No** | **Further action required** | **Action by whom** | **Action by when** | **Action Completed** |
| ***EG*** | ***Areas where events are to take place are to be inspected by before the event to check for any defects or conditions that might give rise to slips, trips or falls. Any problems identified will need prompt action.*** | ***Facilities team*** | ***The day before*** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

| **Hazard(s)** | **Who is at risk?** | **Likelihood** | **Severity** | **Risk Rating** | **Planned control measures** | **Likelihood** | **Severity** | **Risk Rating** | **Further Action(s)**  **Required?** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***EG: Vehicles*** | ***All visitors at risk of injury from contact with moving vehicles.*** | ***1*** | ***3*** | ***4*** | ***The University of law and Visitors organisers will have a list of attendees, and account for them at specified times during the visit.***  ***Visitors will be supervised during the course of the visit.***  ***Access to car park will be restricted.*** | ***1*** | ***3*** | ***4*** |  |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |