

RISK ASSESSMENT
For North Somerset Show 2019

THIS RISK ASSESSMENT FORM IS TO BE COMPLETED WHERE NO PREVIOUS ASSESSMENT EXISTS OR HAS BEEN UNDERTAKEN. WHERE TASK SPECIFIC RISK ASSESSMENTS AND METHOD STATEMENTS HAVE BEEN COMPLETED WITHIN THE LAST 9 MONTHS PLEASE FORWARD COPIES.

Name of Company:		Date of Assessment:	
Assessment Completed By:		Tel :	
HAZARDS:			
<i>Tick Box</i>		<i>Tick Box</i>	
Working At Height		Heat/Cold e.g. Hot Food/Ovens	
Falling Objects		Noise/Vibration	
Slippery/Uneven/Worn Floors/Surfaces		Lighting	
Slips and Trips e.g. Guy Ropes		Compressed/Pressurised Systems	
Manual Handling e.g. Loading/Unloading		Substances/Materials e.g. Bleaches/Cleaning Materials/Cooking Oils etc	
Machine Operation		Fire/Explosion	
Vehicle Movement		Electricity e.g. Electric Shock	
Mechanical Lifting		Hot Work	
Hand Tools		Other (Please specify):	
Adverse Weather Conditions			
PERSONS AT RISK: Please Circle all as Appropriate		Employees/Members of the Public/Engineers/Operatives/Contractors. Others (Please specify):	
EXISTING CONTROLS: Consider: Isolation Procedures, Safe Systems of Work, Training, Method Statements, Maintenance, Statutory Testing, Guards, Signs & Notices, PPE. Fire Extinguishers/Blankets, No Smoking.			
Hazard Rating = Probable Frequency x Severity		Risk Rating = Hazard Rating x Control Rating	
RISK EVALUATION: Please Tick Either A) or B)			
<i>Tick Box</i>			
A)	The Existing Controls detailed above adequately control the risks.		
B)	The Existing Controls do not adequately control the risks and changes or additional controls are required. Please complete Additional Controls box below.		
ADDITIONAL CONTROLS: Consider: Isolation Procedures, Safe Systems of Work, Training, Method Statements, Maintenance, Statutory Testing, Guards, Signs & Notices, PPE. Fire Extinguishers/Blankets, No Smoking.			
RE- EVALUATION OF RISK:			
<i>Tick Box</i>			
The Existing Controls together with the Additional Controls detailed above adequately control the risks.			
COPY INFORMATION REQUIRED/ATTACHED			
As Applicable:		<i>Tick Box</i>	<i>Tick Box</i>
Safe Gas Installation Certificate		Other (Please specify):	
Electrical Wiring Installation			
Fire Retardant Material Certification			
PAT Test Register			
Public Liability Insurance Certificate			

Hazard Rating		Control Rating		Risk Rating	
Probable Frequency		Severity		0 - 5	Satisfactory
1	Improbable occurrence	1	Trivial injury	6 - 15	Some action necessary
2	Possible occurrence	2	Minor injury	16 - 25	Immediate action necessary
3	Occasional occurrence	3	Over 3-day injury		
4	Frequent occurrence	4	Major injury		
5	Common occurrence	5	Death		
		0.00	Completely foolproof		
		0.25	Complete protection		
		0.50	Protection with safe working practices & PPE		
		0.75	Safe working practice		
		1.00	No protection		