



Homerton College, Cambridge, Risk Assessment Form

Department or activity under assessment:

Activity or Task	List the significant hazard(s). ¹	Describe what could go wrong – that is, say who might be hurt and how. ²	Is the risk high, medium or low? ³	Please list the control measures which will reduce the likelihood of this happening. ⁴	Suggest here any further actions which may be beneficial. Say who will carry them out and by when. ⁵

Explanatory notes:

- ¹ Hazards are activities which contain actual or potential elements of danger. Eliminating hazards by the use of an alternative work method should always be your first consideration.
- ² Please explain how an accident, incident or health condition could arise. All events which are '**reasonably foreseeable**' must be considered.
- ³ How likely is this event to occur? Is there a low, medium or high probability? When a 'high risk' activity is identified a further more detailed task/site specific risk assessment may be required. Examples of high risk activities are: working in a confined space e.g. a sewer or working at heights e.g. on extendable ladders.
- ⁴ When deciding on suitable control measures, you should ensure that you are complying with all relevant College policy and guidance documents, and that you have considered the hierarchy of control measures. In order to comply with legislation, we must also take all steps which are '**reasonably practicable**' to reduce risk. This means that we should take all steps which are (in terms of time, cost and trouble) reasonable in relation to the reduction of risk achieved.
5. IF THE CONTROL MEASURES LISTED DO NOT SEEM ADEQUATE FOR THE RISK YOU ARE FACING DO NOT START THIS TASK – SPEAK TO YOUR SUPERVISOR.

Important! It is essential to check regularly that the control measures specified in this risk assessment are actually being used in practice. All control measures should be reviewed regularly to ensure their effectiveness. Any specialist emergency or first aid procedures should be specified here.

If any Standard Operating Procedure (SOP) is required, please specify it here or attach it to this form. Any specialist training required should also be specified here:

Is special monitoring (e.g. hearing test, hand-arm vibration, eye test, and health surveillance) required? If so, please enter details in the end column 'Suggested Further Action' - the University Occupational Health Service may be able to offer the service you require.

What personal protective equipment (PPE) is required (e.g. overalls, gloves, respiratory protection, eye protection, safety footwear? You must ensure that any PPE specified is suitable for the purpose and compatible with all other PPE issued and needing to be worn. Each item of PPE needing to be worn to mitigate against the hazards that have been listed should be specified in the control measure column.

Please complete this section to confirm that this constitutes a reasonable and proportionate assessment of risk.

Name of assessor:	Signature:	Date:	Name of supervisor:	Signature:	Date:
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This assessment should be reviewed regularly (usually every 12 months), or earlier if there is a material change to the process, the equipment, location or relevant legislation. It should also be reviewed when new people are involved, or after an accident or incident has taken place.

Reviewed by (name)	Signature	Date	Indicate changes here