

Badger H&S Risk Assessment Form

Ref Number	Risk Assessment	Location	Date	Assessor(s)
Description of process, a	ctivity or task to be risk assessed			
Describe the location who the activities are taking place	ere			
Describe the activities being performed				
Describe the equipment and/or (if applicable) substances being used				
Describe the people involved in these activitie (and others who might be affected)				

Author or Department	Issue Date	Version	Document Ref	Approved By	Approval Date	Next Review
T.Hood	March 2019	V2.1	H&S-F-001	S.Barnes	March 2019	March 2022



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No	Description of Hazard and Hazardous Event	Who might be harmed	What risk controls are currently in place	Current Risk Rating		ing	Are further controls needed?	Completion date and by whom	Residual Risk Rating		
			•	L	C	R			L	С	R
1											
<u>2</u>											
<u>3</u>											
<u>4</u>											
<u>5</u>											
<u>6</u>											
7											

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Additional Comments		
I have completed this risk assessment to the best of my knowledge and ability with the information available at the time of the	Cianad.	
said assessment and with the input of colleagues and service users (where applicable)	Signed:	
	Date:	
	Review Date	
	(within 12 months):	

Risk Calculation

Likelihood that hazardous event will occur 1 = Very unlikely 2 = Unlikely 3 = Fairly Unlikely 4 = Likely 5 = Very likely	Risk rating 20 – 25 Stop activity and take immediate action 15 – 16 Urgent action, take immediate action and stop activity if necessary, maintain existing controls rigorously
Consequence of hazardous event 1 = Insignificant – no injury 2 = Minor – Minor injuries needing first aid 3 = Moderate – Up to 3 days absence 4 = Major – More than 7 days absence 5 = Catastrophic - Death	8-12 Action – improve within specified timescale 3-6 Monitor – look to improve at next review or if there is a significant change 1-2 No action – no further action but unsure controls are maintained and reviewed

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