RISK ASSESSMENT

[Company / Business Name]

Activity / area assessed	**[e.g. Office, warehouse, school trip, event]**
Assessed by	**[Name, role]**
Date of assessment	**[DD/MM/YYYY]**
Review date	**[DD/MM/YYYY]**

Risk = Likelihood (1–5) × Severity (1–5)

Low 1–6
Medium 8–12
High 15–25

#	Hazard	Who might be harmed and how	Controls already in place	L	S	Risk	Further action needed	Action by	By when	Done
1	Slips, trips and falls	Staff and visitors: injuries from wet floors, cables, clutter	Spills cleaned at once; cables covered; good lighting	2	3	6	Weekly walk-round check of walkways	[Manager]		
2	Manual handling	Staff lifting boxes: back injuries	Trolley available; light loads	3	3	9	Short manual handling training for new staff	[Supervisor]		
3	Fire	Everyone on site: burns, smoke inhalation	Alarms, extinguishers, marked exits	2	5	10	Fire drill every 6 months; test alarm weekly	[Fire warden]		
4	Electrical equipment	Staff: shocks, burns from faulty plugs or leads	Visual checks by users	2	4	8	Book inspection/testing of portable equipment	[Office manager]		
5	Screen work (DSE)	Office staff: eye strain, back and neck pain	Adjustable chairs	3	2	6	Workstation checklist for each user; regular breaks	[Each user]		
6	Work-related stress	Staff: anxiety, illness from workload	Open-door policy	2	3	6	Regular 1-to-1s; review workload	[Manager]		
7										
8										
9										
10										
11										
12										
13										
14										

Likelihood: 1 very unlikely … 5 almost certain. Severity: 1 minor first aid … 5 fatal or permanent injury. Type L and S in the yellow cells; the risk score and colour update automatically.

Steps: identify hazards → decide who might be harmed and how → evaluate the risk and decide on controls → record your findings → review and update.

Signed: _____ Date: _____