

ORBIS ENVIRONMENTAL AND SAFETY – RISK ASSESSMENT FORM

This is a free example of a Workplace Risk Assessment Template. For further information or guidance on completing Risk Assessments, or for help if you find a problem and don't know what to do about it, please email Ryan, our Safety Specialist: rdavies@orbisenvironmental.com



Risk Assessment Template

Prompt List – Hazards to be considered during the Risk Assessment	Severity and Likelihood Scores examples				
	Severity	Score	Likelihood	Score	
Adverse weather Asbestos Biological agents/risks (e.g. Legionella) Cleaning operations Chemicals / Biological – COSHH Compressed air/Pressure systems Confined spaces Electricity Falls/working from a height Fire / Flammables / Explosives Noise Hot & cold surfaces Hot Works Radiation Electro Magnetic Field Extreme Environmental conditions Lone Working Manual handling Lifting Operations Ergonomics Slippery or uneven flooring (trip hazards) Stacking Pallets and other equipment Stored energy Traffic/FLT routes/movement Use of hand tools and Vibration Moving Parts	Fatality, irreversible health damage or multiple casualties, massive or total equipment or infrastructure loss / Operation shut down or loss of production capabilities	5	Almost Certain / <1 in 100 chance / Once every week for daily activities	5	
	Disability or ill health / Severe damage to equipment or infrastructure / extensive disruption to business activities	4	Probable / >1 in 100 chance / Once every month for daily activities	4	
	Serious injury or illness / Significant damage to equipment or infrastructure / Significant disruption to business activities	3	Likely / >1 in 1000 chance / Once every 4 years for daily activities	3	
	Significant Minor injury or illness / Minor damage to equipment or infrastructure / slight disruption to business activities	2	Possible / >1 in 10,000 chance / Once every 10 years for daily activities	2	
	No noticeable harm / Minimal Loss / Minimal disruption to business activities	1	Unlikely / less than 1 in 100,000 chance / Once every 100 years for daily activities	1	
<p>'Significant injury' includes: laceration, burn, concussion, serious sprain, minor fracture, etc. 'Significant illness' includes: dermatitis, minor work-related musculoskeletal conditions, partial hearing loss, etc. 'Serious injury' includes: fracture or dislocation (other than fingers, thumbs or toes), amputation, loss of sight, penetration or burn to eye, serious electric shock, asphyxia, or any injury leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours. 'Serious illness' includes requiring medical treatment after chemical or biological or radiological exposure, severe musculoskeletal conditions, severe dermatitis, asthma, etc. For likelihoods in between the listed values, use the higher likelihood to estimate risk.</p>					
Risk Score (RS): Severity X Likelihood; >12 – High Risk; 6 to 12 – Medium Risk; <6 – Low risk	5	10	15	20	25
	4	8	12	16	20
	3	6	9	12	15
	2	4	6	8	10
	1	2	3	4	5

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Hazard Identification. Include all Controlled and uncontrolled hazards and existing controls. If the Risk Score is High, implement further controls or close the outstanding actions before commencing work. Redo the assessment until a suitable Residual Risk Score of 12 or below is achieved.										
Activity and significant hazard / risk.	Person(s) at risk and how many	Existing control measures	Severity	Likelihood	Risk Score	Further Controls / Action required / Responsibility	Severity	Likelihood	Residual Risk Score	Further action required? (Y/N)
<i>e.g. – Cleaning yard area – Working in cold weather. Hypothermia, Frostbite.</i>	Yard Workers X 2	<ul style="list-style-type: none"> <i>Provision of regular comfort breaks at least hourly</i> <i>Provision of winter weather clothing including weatherproof insulated high vis coat and trousers</i> <i>Provision of Insulated protective PPE including Gloves and Steel toecap footwear</i> <i>In extreme weather, work should be avoided.</i> <i>Employees trained in symptoms of Hypothermia and frostbite, as well as adequate first aid</i> 	2	2	4	<i>No further controls needed</i>	2	2	4	
Person(s) completing assessment:										
Position:										

Corrective Action Plan

Action	Responsibility	Target completion date	Date Completed