

Health and Safety

Example Risk Assessment Form



Directorate: Corporate Resources		Team:				Location:			
Activity or Work Area Assessed: Thermal Comfort in Buildings		Assessors:				Date of Assessment:		Date for Review:	
Hazard	Who could be harmed and how?	Control measures already in place	L – Likelihood (1 – 4)	S – Severity (1 – 4)	Risk rating – Lx S = R (1 – 16)	Date of completion	Additional control measures If risk rating is 6 or above	Person responsible for implementing further controls	Date of completion
<p>Too hot</p> <p>Overheating</p> <p>Heat stroke</p> <p>Heat exhaustion</p> <p>Dehydration</p>	<p>Staff / Contractors / Visitors</p>	<p>Liquid refreshments readily available i.e. cold water.</p> <p>Relaxation of the dress code</p> <p>Check thermostats</p> <p>Stay away from direct sunlight.</p> <p>Use blinds to reduce sunlight entering the building.</p> <p>If applicable ensure air conditioning is switched on to maintain a comfortable temperature.</p> <p>Where air conditioning systems are not in place provide air circulating fans when appropriate</p>	2	2	4				

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Too cold Hypothermia Frost bite	Staff / Contractors / Visitors	Keep doors closed and block out draughts Check thermostats Ensure rooms are warm (at least 16°C) Wear several light layers of warm clothing Keep as active as possible e.g. consider walking up and down the stairs rather than use the lift. Wear warm comfortable shoes. Encourage the drinking of warm fluids such as soup and hot drinks Provision of changing facilities including showers and a place to change into warm, dry clothing.	2	2	4					

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State of the building	Staff / Contractors / Visitors	<p>Ensure the building is weather proof and in a good state of repair</p> <p>Ensure that equipment for thermal comfort such as boilers and air condition systems are in a good state of repair and maintained to the appropriate statutory standards</p> <p>Reduce draughts</p> <p>Ensure windows have blinds</p>	1	1	1					

Assessor Name	
Assessor Signature	

Manager/Head of Service Name	
Manager/Head of Service Signature	

This assessment must be shared with, and communicated to, all staff who conduct this activity and/or work in the area assessed.

Risk Rating:

		Severity			
		1-Trivial	2-Minor	3.Serious	4.Major
Likelihood	4-Very Likely	4 L	8 M	12 H	16 C
	3-Likely	3 L	6 M	9 H	12 H
	2-Possible	2 L	4 L	6 M	8 M
	1-Remote	1 L	2 L	3 L	4 L

Critical (16)	Immediate	Stop. Do not undertake the activity-critical risk, too high and unacceptable. Controls need to be implemented and the risk rating reduced to an acceptable level before the activity can recommence
High (9 -12)	1 week	Require immediate attention to bring the risk down to an acceptable level
Medium (6 - 8)	1 month	Review existing controls and consider additional ones. Regular monitoring required
Low (1 – 4)	3 months	Continue with the existing controls, operations requires monitoring

Hazard: Something that has the potential to cause harm

Likelihood: The likelihood of the hazard causing harm

Risk rating is calculated by multiplying the likelihood by the severity:

e.g. a likely chance of an accident resulting in a major injury = 3 x 4 = 12

therefore, a medium risk – within 1 month - review existing controls and consider additional ones. Regular monitoring required.