

# The United Reformed Church

## Risk assessment template and guidance



Risk assessment of:

Assessor:

Date:

Overview of activity/005 Tc 0.005 Tw -23.479 -3.6 T3 (k:)23.5l2.4 (9 (v)-1 (i)-2 (e)8.9779 0 ms)2.2 (c)-15(9 (v.2 (c)-- <<//)284 (9 23. (/)q0.99 /P5Tc 0.0

+ D ] D U G V L G H	Reason(s) identified	Existing controls (how the risk is being mitigated)	a	b	(a) x (b)	Additional controls required

# Risk Assessment Record

The assessor can assign values for the 'hazard severity' and 'likelihood of occurrence' on scales of 1 – 5 to aid with rating risks:

Hazard Severity (a)

1: Trivial (eg discomfort, scratch, slight bruising)

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3: Moderate (eg strain, sprain, incapacitation > three days)

4: Serious (eg fracture, amputation, hospitalisation > 24 hours)

5: Fatal

Likelihood of Occurrence (b)

1: Remote (almost never)

2: Unlikely (occurs rarely)

3: Unlikely (occurs occasionally)

4: Unlikely (occurs frequently)

5: Likely (occurs often)

The risk rating (high, medium or low) indicates the response to be taken for the assessed risks.

# Risk Assessment Action Plan

Action plan in respect of:

Prepared by:

Ref number	Action to be taken, including cost	By whom	Target date	Review date	Outcome at review date
1					
2					
3					
4					
5					
6					

Signed:

Date:



## Step three

Evaluate the risks and decide what precautions need to be put in place

Think about what measures are already in place and decide whether additional ones need to be put in place. Where possible, ask staff and those who take part in the activity if they have any concerns or ideas about how things could be managed more safely.

Stage one – severity of harm that could be caused (a)

When deciding on a score for the severity of the outcome, try to avoid always choosing the worst-case scenario. For example, if someone tripped on a trailing cable, they could in theory fall and bang their head, experience a blood clot and end up dying, so you might be tempted to record the severity as 'fatal'. Indeed, you may conclude that any injury could in theory be fatal. However, any action needed if everything ends up as a 'high risk'. Instead, a more realistic approach is needed.

It is useful to know something about the people who are going to be involved in an activity.

For instance, for an individual with a rare blood disorder the consequences of a slight bump could be much more serious than for other people. It may be that risk assessments should be done in respect of particular individuals with additional needs or disabilities.

A helpful guide is the following in relation to severity:

1. Trivial eg scratch, slight bruising
2. An injury that would take three days to heal/recover from eg sprain
3. Major injury eg amputation, fracture, hospitalisation over 24 hours
4. Fatal.

Stage two – likelihood (b)

It has been found useful to allocate a numerical value to assist in determining levels of risk.

So, in terms of likelihood, it will be as follows:

1. Remote – highly unlikely
2. Unlikely – may occur rarely
3. Possible – could occur, but is uncommon
4. Likely – probable it could occur
5. Very likely – frequently occurs, more certain than not.

Stage three – combining severity and likelihood

You then need to multiply the likelihood of harm by the severity. So for instance, if your assessment concludes that it is possible (3) some harm would be caused and that the severity of harm being caused would amount to a major (4) injury then this would make it 3 x 4 equalling 12.

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If you consult the table below you will see that a score of 9-12 calculates as a medium risk and you should therefore implement additional controls. If, however, your score was 15 or over, you should not proceed with the activity before additional controls have been implemented.

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This is a crucial stage as it provides proof that a risk assessment was carried out. Of equal importance, it also helps to crystallise your thoughts and is a way of ensuring accountability for tasks that have been agreed as needing doing.

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,W LV LPSRUWDQW LI \RX KDYH LGHQWL¿HG DFWLRQ SRLQWV that this is checked upon and the risk assessment amended and updated. Failure to carry out FRQWURO PHDVXUHV E\ WKH GDWHV VSHFL¿HG FRXOG REYLR WR KDSSHQ GXULQJ WKH LGHQWL¿HG DFWLYLW\