

RISK ASSESSMENT FORM

Form RA23

Assessment No: RA23	Location / Dept: On Site	Further assessments required:	Persons involved in or affected by the task:	Special Groups: (Where individual assessments will be required)
Assessment Date: 26/09/07	Assessor's Name: Jayne Jowett	Fire <input type="checkbox"/>	Employees <input checked="" type="checkbox"/>	Nursing and Expectant Mothers <input type="checkbox"/>
Task / Activity / Area Assessed:		COSHH <input type="checkbox"/>	Visitors <input type="checkbox"/>	Young Persons <input type="checkbox"/>
Removing hanging basket linings using a ladder to access the baskets & snipers to cut the tie wraps		Manual Handling <input checked="" type="checkbox"/>	Contractors <input checked="" type="checkbox"/>	Disabled <input type="checkbox"/>
		Display Screen Equipment <input type="checkbox"/>	Members of the public <input type="checkbox"/>	Service Users <input type="checkbox"/>
		Nursing and Expectant Mothers <input type="checkbox"/>	Others <input type="checkbox"/>	
		Young Persons <input type="checkbox"/>		

Hazards Identified	Worst Case Outcome	Current Control Measures in Place	Likelihood	Score	Rating
Ladder could slip causing injury to Gardener	Severe Inj 8	Gardener uses warning cones around the immediate site of activity.	Remote 1	8	Low
Gardener could fall off ladder causing injury	Severe Inj 8	Gardner has an assistant through out the activity to hold the ladder and to receive the hanging basket lining when the Gardener passes it down to him.	Remote 1	8	Low
Gardener could strain himself lifting the hanging basket	Lost time Inj 5	Gardener & Assistant wear the relevant protective clothing. Gardener secures the ladder to the lamppost prior to mounting.	Remote 1	5	Low
Gardener could cut himself	Lost time Inj 5	An industrial ladder is used which conforms to H&S / legal requirements.	Remote 1	5	Low
Public could be injured from falling basket/equipment	Severe Inj 8	Gardener positions the ladder so that has he mounts it he is outside the perimeter of the hanging basket to avoid it falling on him or the Assistant. Gardener avoids undertaking the task in wet / slippery / windy conditions Gardener trained in manual handling.	Remote 1	8	Low

Worst Case Outcome

Likelihood given precautions in place

10	8	5	3	1		10	8	5	2	1
Fatality	Severe injury	Lost time injury	Minor injury	No injury		Certain / imminent	Very likely	Likely	Unlikely	Remote

Risk Rating Table		
High 50-100	Medium 20-49	Low 1-19

RISK ASSESSMENT FORM

Form RA

Action required (note any temporary action / control measures required):	Action Review Date	Action Completed (Name and title) / Date
None other than to regularly monitor the situation		
Further actions that may require longer term consideration:	Action Review Date	Action Completed (Name and title) / Date

If any issues are outstanding from the 'Action Review' date, detail the reasons:

Signature:

Date: 26/09/07

Assessment Review Date (as required): 26/09/08

Assessment Review Date (as required):

New risk assessment required: Yes / ~~No~~

New risk assessment required: Yes / No

Completed by (Name):

Completed by (Name):

Signature:

Signature: