

RISK ASSESSMENT AND STANDARD OPERATING PROCEDURE

1. PERSON CARRYING OUT ASSESSMENT					
Name		Position		Date	
2. DESCRIPTION OF ACTIVITY (include storage, transport and disposal if relevant)					
3. LOCATION					
Campus		Building		Room	
4. HAZARD SUMMARY					
Accessibility		Mechanical			
Manual Handling		Hazardous Substances			
Electrical		Noise			
Working at height		Extreme temperature			
Falling objects		Pressure/steam			
Trip hazards		Other			
Lone Working Permitted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Permit-to-Work required for planned maintenance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
				N/A <input type="checkbox"/>	
5. Who might be harmed and how?					
Staff / students <input type="checkbox"/>		Cleaners, engineers etc <input type="checkbox"/>			
Support staff <input type="checkbox"/>		Other			
6. How often is the process being carried out?					
Once a day <input type="checkbox"/> Once a week <input type="checkbox"/> Once a month <input type="checkbox"/> Every 6 months <input type="checkbox"/> Annually <input type="checkbox"/>					
Other – give details					
7. Brief description of the procedure			Existing precautions (Controls)		Is risk high, medium or low?

