

Unit: \_\_\_\_\_ Activity / Exercise: \_\_\_\_\_

Risk Assessment Number: _____	<b>GENERIC RA: YES/NO</b> (please delete as appropriate)
-------------------------------	----------------------------------------------------------

**Relevant Publications / Pamphlets/Procedures:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Assessor:  
\_\_\_\_\_

Date of Assessment:  
\_\_\_/\_\_\_/\_\_\_

Related RA's (eg Manual Handling)

\_\_\_\_\_

\_\_\_\_\_

The following steps relate to the Risk Assessment Process.

Ser	Activity <i>(step 1)</i>	Hazards Identified <i>(step 2)</i>	Existing Controls <i>(step 3)</i>	Residual Risk acceptable YES or NO <i>(step 4)</i>	Additional Controls <i>(step 5)</i>	Residual Risk Acceptable YES or NO <i>(step 6)</i>
	<i>(b)</i>	<i>(c)</i>	<i>(d)</i>	<i>(e)</i>	<i>(f)</i>	<i>(g)</i>
1						
2						
3						
4						
5						

6						
7						
8						
9						
10						
11						

**Details of person responsible for carrying out this Risk Assessment / Review**

<b>CONTROLS</b>	<b>NAME (print)</b>	<b>POST</b>	<b>DATE</b>	<b>SIGNATURE</b>
<b>Existing &amp; Additional Controls Agreed</b>				
<b>Additional Controls Implemented</b>				