

# Risk Assessment Form

*Draft for Review*

Location/ Topic	Gt Budworth	Completed by	R Collier	Undertaken by	
Ref No	Rev 2 2016	This reference number is to be provided by the Health & Safety Manager		Date	04-07-16

Activity / Instance	Hazard / Risk	Initial Risk Evaluation			Detail of Control Measure	Existing? (Y/N)	Proposed? (Action date)	Managed by	Residual Risk Evaluation		
		L	S	RR					L	S	RR
Tubs and Planters on the Highway	Access for emergency vehicle	3	3	9	Residents to ensure planers no more than 1 M from property and of a reasonable size –	Y	On going	Residents	1	5	5
	Vehicles colliding with tubs and planters / damage / injury	3	4	12	Residents to ensure planers no more than 1 M from property and of a reasonable size –	Y	On going	Residents	1	4	4
	Pedestrians forced into road –				Planters etc to be within 1M of property						
	Push chairs wheel chairs etc forced into road	2	5	10	Residents to have adequate insurance provisions	Y	On going	Residents			
	Loss or damage to assets				Highlight risk to residents via letter and updates in the bulletin						
	Unable to use assets, cost of repair / replacement	4	4	12	Asset register in place with appropriate insurance cover	Y	On going	Parish Clerk	4	2	8
	Damage to third party property as a consequence of PC activity	3	3	9	Insurance cover in place	Y	On going	Parish Clerk	3	2	6

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Poor financial control Loss of money, theft / dishonesty	PC service failure, impact to reputation	2	7	14	Finance controls in place, regular review via finance committee, TAX and VAT risks are mitigated.	Y	On going	Chair of Finance Committee	1	7	7
Ensure activities are within legal powers applicable to PC	Bad practice identified by external audit, legal challenge, loss of reputation	2	7	14	Appropriate committee in place with TOR for each committee	Y	On going	All Clir	1	7	7
Obligations under employment law	Legal challenge / tribunal	2	5	10	Managed via staffing committee	Y	On going	Chair of staffing Committee	1	5	5

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Likelihood Severity	1					2					3					4					5																													
	Improbable					Unlikely					Even chance					Likely					Almost certain																													
	Negligible					Slight					Moderate					High					Very high																													
	(no or trivial injury/illness or loss/damage)										(minor injury/illness requiring first aid or slight loss/damage)										(reportable over 3 day injury/illness or moderate loss/damage)										(reportable major injury/illness or serious loss/damage)										(one or more deaths or widespread loss/damage)									

**Likelihood**

5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	6	10
1	1	2	3	4	5
	1	2	3	4	5

High	17 - 25
Medium	9 - 16
Low	1 - 8

complete risk assessment overleaf

Identify People at Risk (tick and provide details)	
Residents	<input checked="" type="checkbox"/> Residents of Great Budworth
Contractors	<input checked="" type="checkbox"/>
Members of the public	<input checked="" type="checkbox"/> Visitors to the village
Young people	<input checked="" type="checkbox"/> As above
Visitors	<input checked="" type="checkbox"/> As above
<b>Additional Assessments Required</b> (tick if applicable to activity being assessed)	

**WHEN COMPLETED, FORWARD AN ELECTRONIC COPY TO THE HEALTH AND SAFETY MANAGER**

