## General risk assessment form

Details of organisation							
1	Name of organisation	Assessment undertaken by					
2	Address						
		Postcode					
3	Date	Review date					
4	Area assessed						
Ris	k details						
	Under additional controls you should note the additional measures that are needed to reduce the risk to an acceptable level and record when they have been implemented.						

Hazards/risks/ persons affected	Existing controls	Likelihood (L)	Severity (S)	Risk rating (L x S)	Additional controls

## Likelihood

1 = Low (seldom)

2 = Medium (frequently)

3 = High (certain or near certain)

1 = Low (minor cuts and bruises)2 = Medium (serious injury or incapacitated for 3 days or more)

Severity

3 = High (fatality or a number of persons seriously injured)

**Risk Rating** 1 – 2 = low priority

3 - 4 = medium priority

6 - 9 = high priority

Risk details (continued)								
Hazards/risks/ persons affected	Existing controls	Likelihood L	Severity S	Risk rating L x S	Additional controls			
THIS FORM MAY BE COPIED								



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