



Example Risk Assessment Form



		LIKELIHOOD				
		VERY UNLIKELY	UNLIKELY	LIKELY	HIGH LIKELY	ALMOST CERTAIN
SEVERITY	NEGLIGIBLE	LOW	LOW	LOW	LOW	LOW
	MINOR	LOW	LOW	LOW	MEDIUM	MEDIUM
	SERIOUS	LOW	MEDIUM	MEDIUM	MEDIUM	HIGH
	SEVERE	LOW	MEDIUM	MEDIUM	HIGH	HIGH
	VERY SEVERE	MEDIUM	MEDIUM	HIGH	HIGH	HIGH

Risk Assessment for (Activity/Process/Operation) **Highway Verge Inspections/Works**

Service	Environment Services	Team / Section	County Highways		
Assessment Date	Insert Today's Date	Review Date	Insert 6-month review date	Reference Number	1

What are the hazards <i>(i.e. what can cause harm)</i>	Who might be harmed and how? <i>(e.g. employees, pupils, members of the public, etc. and the significant risk(s))?</i>	What existing control measures are in place to reduce / prevent the risk? <i>(i.e. what are you already doing?)</i>	Considering existing controls, what is the current risk level <i>(i.e. high, medium or low – use the matrix above)</i>	Further Action to be taken to control the risk? <i>(i.e. only record action/additional controls measures you are going to implement)</i>	Assigned to	Completed by whom & when
Vehicular Traffic. Fast moving and other traffic.	Employee/General Public. Struck by Vehicle. Accidental collision with traffic during access/egress, parking or when working directly adjacent to a road. Risk of serious injury or death.	Restricted to only work adjacent to carriageways that are restricted to 40mph or less. Pre-plan your journey and parking location. Park off road wherever safe and where possible in formal laybys. If not possible, park safely and in a manner that ensures other highway users can pass safely. High visibility clothing, as provided, to be worn at all times	M	Periodic checks and reminders.		

		<p>(minimum high visibility jacket and safety shoes/boots).</p> <p>Minimise time spent close to carriageways.</p> <p>Be aware of large vehicles, machinery and traffic in the vicinity of the site.</p> <p>Avoid undertaking any works near a carriageway before 9:30am or after 3:30 pm (peak times).</p> <p>No works to be undertaken at night or when visibility is poor.</p> <p>No lone working under any circumstances.</p> <p>Always remain vigilant and observant to the road and others working.</p>			
<p>Slips, trips and falls from uneven and/or sloped ground.</p> <p>Falling due to uneven ground in verge or due to debris under foot, animal burrows, dense vegetation.</p>	<p>Employee/General Public.</p> <p>Slips, trips, fall, strains and sprains, cuts, broken bones or head injury.</p>	<p>Review PPE requirements before setting off.</p> <p>Consider weather at time of inspection/visit.</p> <p>Be familiar with the area you are going to be working on and take note of any potential hazards that you might come into contact with, for example a ditch course.</p> <p>Be alert for open/damaged manhole covers or other</p>	L	Periodic checks and reminders.	

		hazardous voids/excavations and report these to project team.				
Pedestrian traffic.	Employee / General public struck by work equipment, forced into the road. Verbal/physical abuse.	Footways to be kept clear of any obstructions or works equipment/tools. Instructed to remain non-confrontational and report incidents to project team.	L	Periodic checks and reminders.		
Using Slash Hook.	Employee / General public. Being struck by a slash hook causing injury.	Slash Hooks must not to be used.	L	Periodic checks and reminders.		
Working at height.	Employee / General Public. Falls from height.	There should be no working at height under any circumstances.	L	Periodic checks and reminders.		
Underground and overhead services.	Employee / General Public Contact with underground / overhead services.	Carry out pre-visit assessment of overhead services in the area. Visual checks for location of services, clear distance maintained. No digging or excavation within the verge under any circumstances.	L	Periodic checks and reminders.		
Manual Handling.	Employee. Muscular sprains and strains.	Safe lifting and moving methods explained.	L	Periodic checks and reminders.		

		<p>Avoid carrying any heavy weights. Do not lift or handle more than can be easily managed.</p> <p>Restrict the amount of bending/stooping</p> <p>Personal capabilities explained.</p> <p>Assistance available if beyond personal capabilities.</p>			
Working Alone/ remote working.	<p>Employee / General Public.</p> <p>Verbal / physical abuse.</p> <p>Work injury.</p>	<p>No lone working under any circumstances.</p> <p>Instructed to remain non-confrontational and report incidents to project team.</p>	L	Periodic checks and reminders.	
Working near water including ditch course or ordinary water course.	<p>Employee.</p> <p>Leptospirosis (Weils Disease).</p> <p>Hypothermia.</p> <p>Slips, trips, falls.</p>	<p>Avoid any works next to water and maintain a safe distance.</p> <p>Be familiar with the area you are going to be working on and take note of any potential hazards that you might come into contact with, for example a ditch course.</p> <p>No works to be undertaken at night or when visibility is poor.</p>	L	Periodic checks and reminders.	
Environmental, weather including: ice, snow, mud, fog flooding, heavy rain and sunlight.	<p>Employee.</p> <p>Falls due to ice, snow or mud.</p>	<p>Reschedule the site visit to when the weather is better.</p> <p>Appropriate PPE must be worn (e.g., warm hi-vis coat).</p>	L	Periodic checks and reminders.	

	Low temperatures causing ill health e.g., hypothermia, pneumonia. Risk of sunburn.	Wear appropriate clothing – gloves hat body warmers etc. Remain covered and protected from sunlight, use sunscreen, keep hydrated.			
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Name of Assessor	Insert Name Here	Signature	Insert Signature Here
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Name of Manager responsible for activity / process	Insert Name Here	Signature	Insert Signature Here
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Risk Assessment Review Log

Only use this log to confirm that there have been no changes to the current assessment; otherwise an updated risk assessment must be done

Initial Review Date			
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Next Review Date	12 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	24 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	36 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

Initial Review Date	48 months from initial review		
Assessor's Signature		Date:	
Signature of Responsible Manager		Date:	

EXAMPLE

Risk Assessment(s) for (Activity/Process/Operation)	
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This form can be used to record and demonstrate that the above risk assessment(s) has been provided to relevant employees (as below) to inform them of the risk assessment findings (i.e. the hazards, risks, and control measures associated with their work).

Name of Persons involved in the Activity/ Process/ Operation	Signature	Date