# **TEARFUND RISK ASSESSMENT**

Note: Read the guidance notes before you proceed with this risk assessment and do get in touch with your local Tearfund staff member for assistance.

| Name of volunteer   |  |       |  |  |  |
|---|--|-------|--|--|--|
| Contact details   |  |       |  |  |  |
| Date prepared   | Review date  |       |  |  |  |
| Venue/Location details/Address  |  |       |  |  |  |
|   |  |       |  |  |  |
| What volunteering activity/event is taking place here?  |  |       |  |  |  |
| Describe in more detail where this activity takes place (room style, te   | Describe in more detail where this activity takes place (room style, temporary, fixed etc) |       |  |  |  |
| Lead volunteer/organiser assessing venue/location (not to be signed off until risk assessment is completed)   |  |       |  |  |  |
| Signature of assessor   | Date   |       |  |  |  |
| Name (printed)  |  |       |  |  |  |
| Location  | Tel.   | Email |  |  |  |
| The lead volunteer/organiser to delete* as appropriate and sign the form  |  |       |  |  |  |
| *ACCEPTANCE: I am satisfied that the activity may continue  | *AN ACTION PLAN: I am satisfied pending action plan  |       |  |  |  |
| *PROHIBITION: I am not satisfied that the risk(s) identified are acceptable without additional control measures being in place. I have therefore taken action to prevent the activity continuing. |  |       |  |  |  |
| Signature of lead volunteer   | Name (printed)   | Date  |  |  |  |



#### STEP 1

How can people get injured? Use this list as a check and add other items, unique to your event, if necessary. Step back and consider any other hazards which could affect you. Involve managers, staff, volunteers and where necessary safety professionals in deciding what is to be included. The scope of the hazards listed below is further defined in the 'Worked Hazard Examples' guidance which can be found at www.hse.gov.uk/risk/

#### Hazards

| 1. Access/Egress (obstructions)              | 13. Hand tools                                  | 25. Transport (forklift trucks, vehicles, tractors etc) |
|--|---|---|
| 2. Animals                                   | 14. Hazardous substances (COSHH)                | 26. Violence (attack and public disorder)               |
| 3. Asbestos                                  | 15. Heights (incl. ladders, scaffolding)        | 27. Weather (hot/cold/lightning etc)                    |
| 4. Audience control                          | 16. Lifting equipment                           | 28. Working environment (incl. temporary workplaces)    |
| 5. Compressed gas/cryogenics (storage & use) | 17. Lone working                                | 29. Working patterns/work organisation                  |
| 6. Confined spaces                           | 18. Manual handling                             | 30. Workshop equipment                                  |
| 7. Construction work                         | 19. Noise exposure (equipment/music/headphones) | 31. Hot working   |
| 8. Display screen equipment (DSE)            | 20. Office equipment                            | 32. Working with contractors                            |
| 9. Electricity (incl. portable appliances)   | 21. Pressure systems                            | 33. Use of power tools                                  |
| 10. Fire (building fire safety)              | 22. Radiation (RF, microwave etc)               | 34. Live working with electricity                       |
| 11. Flammable materials                      | 23. Slipping, tripping, falling                 | 35. Soldering   |
| 12. Food hygiene                             | 24. Storage (racks, shelves etc)                | 36. Building/location hazards                           |

#### Groups particularly at risk

The presence of any of the following groups may affect the level of risk (due to vulnerability, lack of knowledge etc) associated with the hazards you have identified above. Extra safety controls may be necessary. Indicate all the groups relevant to this risk assessment.

| Children (incl. unauthorised access) | Contractors/sub-contractors/staff from other departments |  |
|--------------------------------------|--|--|
| Pregnant women and nursing mothers   | Individuals with disabilities or medical conditions      |  |
| New volunteers                       | Members of the public                                    |  |
| Young persons, inexperienced workers | Other (please specify)                                   |  |



## STEP 2

Transfer the details of the hazards identified in Step 1. Then assess the risks from the hazards identified on the previous page by completing the form below. (Copy this page as many times as necessary to assess all the hazards.)

| What could cause HARM?<br>(List here the things you have noted on the<br>previous page) | WHO might be harmed and HOW?<br>(Always give particular consideration to<br>people with special needs) | EXISTING CONTROL MEASURES<br>(What do you do already to stop these people<br>getting hurt?) | EXISTING RISK<br>High/Medium/Low<br>(See Table 1 to help you) | FURTHER ACTIONS<br>REQUIRED?<br>(Yes/No) |
|---|--|---|---|--|
|   |  |   |   |  |
|   |  |   |   |  |
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|   |  |   |   |  |



## STEP 3

ACTION PLAN - Transfer the details of the hazards requiring further action, as identified in Step 2. Then complete the Action Plan form below.

| What FURTHER ACTIONS are required to reduce the risks to the lowest level reasonably practicable?  (Particularly for high or medium risks) | WHO is RESPONSIBLE for ensuring these further actions are carried out? | WHEN are these further<br>actions required to be<br>completed? | SIGN-OFF here when<br>further actions are<br>completed | Are there any other actions now required?<br>(Does the risk assessment need to be<br>reviewed?) |
|--|--|--|--|---|
|  |  |  |  |   |
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|  |  |  |  |   |
|  |  |  |  |   |
|  |  |  |  |   |
|  |  |  |  |   |
|  |  |  |  |   |



## TABLE 1

Risk analysis/priority of action matrix
Ensure that the significant findings of the risk assessment are communicated to all people involved in the event who may be affected by the activities.

| SEVERITY   | LIKELIHOOD   |   |   |   |   |  |  |
|--|--|---|---|---|---|--|--|
|  | 1, VERY UNLIKELY<br>(Freak event – no known history) | 2, UNLIKELY<br>(Unlikely sequence<br>of events) | 3, POSSIBLE<br>(Foreseeable under unusual<br>circumstances) | 4, LIKELY<br>(Easily foreseeable –<br>odd incident may have occurred) | 5, VERY LIKELY<br>(Common occurrence – aware of<br>incidents) |  |  |
| 1, NEGLIGIBLE<br>(No visible injury – no pain)                           | Low  | Low   | Low   | Low   | Low   |  |  |
| 2, SLIGHT<br>(Minor cuts, bruises –<br>no long-term effects)             | Low  | Low   | Low   | Medium  | Medium  |  |  |
| B, MODERATE<br>(Heavy bruising, deep flesh<br>wound; lost time accident) | Low  | Low   | Medium  | High  | High  |  |  |
| 4, SEVERE<br>(Lost time accidents and major<br>njuries)                  | Low  | Medium  | High  | High  | High  |  |  |
| 5, VERY SEVERE<br>(Long-term disability or death)                        | Low  | Medium  | High  | High  | High  |  |  |

