



Risk Assessment Sheet

| | | | |
|---|--|--|-------------|
| WORKPLACE RISK ASSESSMENT NUMBER: | 001 | DATE: | May 2012 |
| LOCATION: | STAR CENTRE— Briefing Room | | |
| OPERATION/PROCESS/ ACTIVITY: | CLASSROOM | NOISE ASSESSMENT: | N/A |
| SUBSTANCES USED: | N/A | COSHH ASSESSMENT: (DANGEROUS MATERIALS) | N/A |
| MAIN HAZARDS IDENTIFIED: | Slips, trips and falls. Finger traps | | |
| OTHER POSSIBLE HAZARDS: | | | |
| EXPOSED PERSONS: | Schools and other groups, staff and contractors | | |
| FREQUENCY OF EXPOSURE: | Daily | LIKELY DURATION OF EXPOSURE: | Variable |
| CONTROL MEASURES (INSTRUCTION/INFORMATION/TRAINING/NEW PRACTICES) 1. Height of elevated surfaces kept to a minimum. 2. No children allowed in classroom without a member of staff or teacher present. 3. No running permitted in the classroom. | | | |
| MONITORING RESULTS: | Frequency: Annually Reported to: R. Thorpe | | |
| RISK ASSESSMENT: | Risk (probability) (0-10) x Hazard (severity) (0-10) = (0-100) 2 x 3= 6 | | |
| ASSESSOR: | Rebecca Thorpe | POSITION: | Coordinator |