

# General risk assessment form

## Details of organisation

**1** Name of organisation

Assessment undertaken by

**2** Address

Postcode

**3** Date

Review date

**4** Area assessed

## Risk 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)

### Severity

1 = Low (minor cuts and bruises)

2 = Medium (serious injury or incapacitated for 3 days or more)

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**



Beaufort House, Brunswick Road,  
Gloucester GL1 1JZ

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