**RISK ASSESSMENT**

**Deadline: 7th October 2016**

Mandatory

**Stand Number:**

**Stand Name:**

Assess each potential risk using the following guidelines

**Severity:**

**High = 3:** Fatality or major injury causing long-term disability

**Medium = 2:** Injury or illness causing short-term disability

**Low = 1:** Other injury or illness

**Likelihood:**

**High = 3:** Certain or near certain

**Medium = 2:** Reasonably likely

**Low = 1:** Very seldom of never

**Risk Matrix:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Likelihood** | | | | |
| **Severity** |  | **H** | **M** | **L** |
| **H** | **9** | **6** | **3** |
| **M** | **6** | **4** | **2** |
| **L** | **3** | **2** | **1** |

**Risk Rating:**

**6 – 9 =** High risk – action required to reduce risk

**3 – 4 =** Medium risk – seek to further reduce risk

**1 – 2 =** Low risk – no action but continue to monitor

Please use the form on the following page for each recognised risk.

**FORM 3 – RISK ASSESSMENT - CONTINUED**

Mandatory Mandatory

**Deadline: 7th October 2016**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Stand Number:**  **Stand Name**: | | **Date:** | | | | **Assessor:** | | | |
| Hazard | To whom | Uncontrolled risk rating | | | Control risk by | Residual risk rating | | | Further action needed |
|  |  | **S** | **L** | **R** |  | **S** | **L** | **R** |  |
| E.g. Trip- Electrical wires from laptop | E.g. Staff and Delegates | **1** | **1** | **1** | E.g. Observation by all staff during stand sign off | **1** | **1** | **1** | E.g. Monitor area at all times |
|  |  | **☐** | **☐** | **☐** |  | **☐** | **☐** | **☐** |  |
|  |  | **☐** | **☐** | **☐** |  | **☐** | **☐** | **☐** |  |
|  |  | **☐** | **☐** | **☐** |  | **☐** | **☐** | **☐** |  |
|  |  | **☐** | **☐** | **☐** |  | **☐** | **☐** | **☐** |  |

S = Severity L = Likelihood R = Risk Rating

\*Please return to [exhibition@sapusers.org](mailto:exhibition@sapusers.org) by7th October