

RISK ASSESSMENT for PRACTICAL ACTIVITIES

◆ **Practical Activity:** a brief description of what is planned.

◆ **Who would do this activity?**

Teacher Yr 8/9 Yr 10 Yr 10-12

◆ **What are the possible Risks?**

List the **Hazards** present in this activity that could pose a **Risk**.
Give each Risk a **Risk Rating** (eg High Risk, Medium Risk, Low Risk).

Consider:

- Chemical
- Thermal
- Biological
- Sharps
- Electrical
- Radiation
- Other Hazards

Are any Designated Hazardous Substances used. Are MSDSs available for these?

◆ **Control Measures:**

Give details of how the **Risks** above will be **controlled**.

Control measures could include administrative controls eg instructions.

◆ **Facilities and Services needed to do this activity safely:**

Services	PPE	Safety Equipment
<input type="checkbox"/> Running Water <input type="checkbox"/> Gas <input type="checkbox"/> Good Ventilation <input type="checkbox"/> Exhaust ventilation <input type="checkbox"/> Other (specify) Notes:	<input type="checkbox"/> Apron <input type="checkbox"/> Safety Spectacles <input type="checkbox"/> Gloves Type <input type="checkbox"/> Other (specify) Notes:	<input type="checkbox"/> Fume Cupboard <input type="checkbox"/> Eyewash/ Shower <input type="checkbox"/> Other (specify) Notes:

◆ **Disposal of Wastes and Cleaning Up**

Sink with Water Bin Other (specify)

◆ **Risk Assessment indicates that this activity can be safely carried out. Yes/No**

◆ Risk Assessment by ◆ Position ◆ Date

◆ This Risk Assessment is due for revision on (date) / / .

◆ Reviewed by ◆ Position ◆ Date