

Risk Assessment

NOTE: Before completing this risk assessment please see guidance notes towards the end of the document.



Date:	
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Assessors Name:		Reference Number:		Review Date:	
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Endorsed By:		Signature:		Position:		Date:	
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Description of assessment	Waiting staff transporting food and drinks
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Location Details	Kitchen / Bar Area
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Identified Hazards	Who may be affected	Risk Level before control measures S x L = R				Existing control measures	Additional Control measures required	To be actioned by	Completion date	Final Risk level S x L = R			
		S	L	R	RR					S	L	R	RR
General Competence Accidents due lack of training and competence	Untrained Employees Contractors Visitors	4	4	16	VH	<ul style="list-style-type: none"> Hand Tools only to be used by trained, authorized and competent persons unless under supervision for training PPE – Safety Footwear, Ear Protection and Eye protection available at all times and zero tolerance attitude adopted for its use. Visual pre-use checks completed by user 	<ul style="list-style-type: none"> Regular safety briefings carried out The Risk Assessment contents to be communicated to all affected employees and signatures of understanding gained. 			4	1	4	L

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		S	L	R	RR					S	L	R	RR
Slips, Trips & Falls – Bar Area	Employees / Visitors / Customers	3	4	12	H	<ul style="list-style-type: none"> All walkways are to be kept clear of any obstructions Member of staff to carry out regular 'walk rounds' of the hall area to ensure customers bags and other items are clear of the walkways. Any torn or damaged carpet to be replaced / repaired to minimise risk of a trip. Any steps are to be highlighted by the use of yellow and black tape or adequate signage to warn of their presence. 	<p>Contents of this risk assessment to be communicated to all affected employees and signatures of understanding gained</p> <p>Regular Safety Briefings to take place</p>			3	1	3	L

Identified Hazards	Who may be affected	Risk Level before control measures S x L = R				Existing control measures	Additional Control measures required	To be actioned by	Completion date	Final Risk level S x L = R			
		S	L	R	RR					S	L	R	RR
Slips/Trips/Falls – Kitchen Area	Employees	3	4	12	H	<ul style="list-style-type: none"> Care to be taken when moving about in the kitchen and dining area. Spillages to be cleaned up immediately. Keep kitchen access clear at all times. 	Weekly site audits undertaken			3	1	3	L

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		S	L	R	RR					S	L	R	RR
Waiting on tables	Employees Visitors	3	4	12	H	<ul style="list-style-type: none"> Care to be taken when carrying food or hot drinks in the kitchen and bar area Spillages are cleaned up immediately Keep kitchen access clean at all times 				3	1	3	L

Identified Hazards	Who may be affected	Risk Level before control measures S x L = R				Existing control measures	Additional Control measures recommended	To be actioned by	Completion date	Final Risk level S x L = R			
		S	L	R	RR					S	L	R	RR
Handling Broken Glass & Crockery	Employees	4	3	12	H	<ul style="list-style-type: none"> Only carry what can be transported safely. Do not overload yourself or balance items precariously. Do not rush. Staff training and awareness First aid kits and trained first aiders provided 	Consider using plastic glasses			3	1	3	L

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Guidance Notes

SEVERITY	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
		1	2	3	4	5
	LIKELIHOOD					

LIKELIHOOD	
5	Almost Certain – Very High Risk
4	Probable – High Risk
3	50/50 – Medium Risk
2	Improbable – Low Risk
1	Almost impossible – Low Risk

SEVERITY	
5	Fatality – Very High Risk
4	Severe incapacity – High Risk
3	Absent 3 weeks – Medium Risk
2	Absent less than 1 day – Low Risk
1	Insignificant – Low Risk

1–4 LOW	5–9 MEDIUM	10–15 HIGH	16–25 VERY HIGH
Continue with existing control, however monitor for changes. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires attention to reduce the rating as well as regular ongoing monitoring. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires immediate attention to bring the risk down to an acceptable level. Implement the control measures required, within the timescales given in the risk assessment and continue to review working practices to reduce the probability of an accident to the lowest possible level.	Stop immediately – the risk is too high. Take immediate action to reduce the risk to the lowest level possible.

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Additional comments:

- 1. This risk assessment needs to be discussed with employees before they operate the plant/equipment to ensure compliance with all control measures through their understanding
- 2. Employees are to sign an acknowledgement sheet for their understanding of this risk assessment
- 3. The risk assessment is to be reviewed on an annual basis, or sooner if changes are made to the plant/equipment or working practices, or after an accident/near miss
- 4. This risk assessment must be approved by the nominated person for health and safety before being issued as a live document

Assessor 1 name:		Signature:		Date:	
Assessor 2 name:		Signature:		Date:	

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I, the undersigned, have been fully briefed on this risk assessment and other control measures in place to reduce the risk of injury to the lowest possible level. I fully understand my duties as an employee, to follow the control measures in this risk assessment and the method statement.				
Employee name	Job description	Date	Employee comments/recommendations	Signature