**Shows Logo and words University of Portsmouth and Faculty of Creative Cultural IndustriesUNIVERSITY OF PORTSMOUTH RISK ASSESSMENT FORM**

**FACULTY OF CREATIVE AND CULTURAL INDUSTRIES**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME**  *(Must be a member of the RA team)* |  | | | | | **EMAIL** |  | | | | |
| **STATUS**  *(please circle/highlight and, if ‘other, please specify)* | Staff | Student | | Other: | **DEPARTMENT/SCHOOL/OTHER:**  *(if ‘other’ please specify)* | | | |  | | |
| **TUTOR/PROJECT SUPERVISOR/MANAGER:** | | | |  | | |
| **Equipment / Props / Materials / Additional Items Needed for event/activity** |  | | | | | | | | | | |
| **Brief description of event/activity**  *(please describe what ‘action’ is taking place i.e. static, movement)* |  | | | | | | | | | | |
| **Location of event/activity**  *(please include address and specific room where appropriate)* |  | | | | | | | **Date(s)/Time of event/activity:** | | **START:** | |
| **END:** | |
| **Risk Assessment Team, Other Members**  *(e.g. Students, staff or Health and Safety representative(s). At least one other required)* | **Name(s)**  *(printed)* | |  | | | **Nominated signatory(s)**  *(printed)* | | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initial risk assessment authorisation** | **Name** *(printed)* |  | **Date** |  |
| **Signature** |  |
| **Final risk assessment authorisation**  *(e.g by HoS or their nominee)* | **Name** *(printed)* |  | **Date** |  |
| **Signature** |  |
|  | *My signature above confirms that, at the time of signing and to the best of my knowledge, the appropriate assessment of the risk(s) identified by the applicant in this form has taken place.* | | | |

**Shows Logo and words University of Portsmouth and Faculty of Creative Cultural IndustriesUNIVERSITY OF PORTSMOUTH RISK ASSESSMENT FORM**

**FACULTY OF CREATIVE AND CULTURAL INDUSTRIES**

**RISK CALCULATION MATRIX**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | |
| ***Severity →***  ***Probability ↓*** | | **minor injury ~ 1** | | **lost time/ ill health ~ 2** | **major/ >7 days ~ 3** | **perm. disability/ sight loss ~ 4** | **fatality/**  **multiple fatalities ~ 5** |  |
|  |
| **Highly unlikely ~ 1** | | **1** | | **2** | **3** | **4** | **5** |  |
|  |
| **Unlikely ~ 2** | | **2** | | **4** | **6** | **8** | **10** |  |
|  |
| **Possible ~ 3** | | **3** | | **6** | **9** | **12** | **15** |  |
|  |
| **Probable ~ 4** | | **4** | | **8** | **12** | **16** | **20** |  |
|  |
| **Certain ~ 5** | | **5** | | **10** | **15** | **20** | **25** |  |
|  |
|  | | | | | | | | | |
| **Severity explained** | | | | | | | | | |
| minor injury | | | Injury requiring basic first aid, e.g. plaster or cold compress | | | | | | |
| lost time/ill health | | | Injury that requires medical treatment at hospital or GP | | | | | | |
| major/>7 days | | | An injury or work-related illness reportable under [*The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013*](http://www.hse.gov.uk/riddor/) | | | | | | |
| permanent disability/sight loss | | | Likely permanent disability/acute/chronic health effects | | | | | | |
| fatality/multiple fatalities | | | An injury/ill health that results in a fatality or fatalities | | | | | | |
|  | | | | | | | | | |
| **Probability explained** | | | | | | | | | |
| highly unlikely | | | Slight chance of an accident/incident happening; an unusual combination of factors would be required for this | | | | | | |
| unlikely | | | Slight chance of an accident/incident happening | | | | | | |
| possible | | | Unlikely to happen, but additional unforeseen factor(s) may result in an accident/incident happening | | | | | | |
| probable | | | Could possibly happen, but additional unforeseen factor(s) may result in an accident/incident happening | | | | | | |
| certain | | | A certainty of an accident/incident happening | | | | | | |
|  | | | | | | | | | |
| **NOTE** | **Calculate the ‘no control’ and ‘post-control’ scores by multiplying *Probability* by *Severity*.**  **For scores of 12 or more, contact your Course Leader or the Health and Safety Office for further advice.** Due to the serious nature of the ‘permanent disability/sight loss’ and ‘fatality/multiple fatalities’ factors, these have been given a ‘medium’ rating on the ‘unlikely’ probability. | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **Low Risk (L)** | **Medium Risk (M)** | **High Risk (H)** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **LITE - Manual Handling pre - Assessment:**  Lifting and moving equipment / props or additional items to location; when on location (to include any stage and activity of the filming event); and returning equipment/props or additional items | | | | | |
| Where possible MH should be avoided i.e. - use mechanical lifting aids.  The **L**oad, **I**ndividual, **T**ask, **E**nvironment (LITE) assessment below must be completed ***before*** collection of equipment/props/materials or additional items for your activity: This must be undertaken by a lead project member or producer to see if any Manual Handling is considered hazardous.  **If the MH *is* assessed to be hazardous (by answering YES to any of the questions below) then a separate and full MHRA will need to be completed and attached with this Risk Assessment.**  **Guidance** Give a full Briefing before the event.   * If equipment is over a certain weight, then provide correct training to lift properly. * Mark any heavy equipment clearly. * No individual should be asked or made to carry a piece of equipment if they feel it is too heavy for them, or that it would be unsafe to do so. Unusual or large loads should be carried between two people. * Take rest stops if needed during the moving, or change people doing the moving. * All team members and participants are made aware to be watchful of each other and say when they see others carrying out hazardous MH. * Any people not involved in original assessment will not be allowed to undertake MH for this activity   All team members and participants will have been shown an example of full MHRA so they are aware of what elements could pose a MH risk and what they as an individual can do to reduce risk as much as possible. | | | | | |
| **LOAD** | | If item is over 16 kg(female)/25 (male) kg and not carried at knuckle height and is carried by a single individual, then an additional MHRA is required | | | YES / NO |
| Is the item: is bulky, unwieldy, unstable, has contents that can move then additional MHRA required | | | YES / NO |
| **INDIVIDUAL** | | If people who will be undertaking MH for the activity have physical restrictions (existing injury; strength to weight of item ratio; age; pregnant) that will affect lifting the items then an additional MHRA is required. | | | YES / NO |
| **TASK** | | If task involves any movements such as : holding item away from trunk, twisting the trunk, stooping, excessive lifting/lowering, pushing/pulling, carrying distances; repetitive/prolonged physical activity and insufficient rest/recovery periods, that could lead to strain injuries to the spine or soft tissues then an additional MHRA is required | | | YES / NO |
| **ENVIRONMENT** | | If there are any environmental (space constraints; uneven, slippery, unstable floors; floors or work surfaces that vary in level; extremes of temperature, humidity, air movement) factors that could increase the risk of injury then additional MHRA will be required | | | YES / NO |
| **If you have answered YES to any of the questions above then you need to complete a FULL MHRA (Manual Handling Risk Assessment). Please provide attached to this Risk Assessment and sign and date below.** | | | | | |
| **SIGNED:** |  | | **DATE:** |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Ref. No.  or Task step** | **Identified hazards or injury causes (highlighting risks)**  ***(Injury focused – see check list)*** | **People at risk**  ***(i.e. Staff, students, public, contractors etc)*** | **Score – no controls**  ***(Probability x Severity = Calculation)*** | **Control Measures** | **Score – post-controls**  ***(Probability x Severity = Calculation)*** | **Further action required?** | **Action priority**  ***(H,M,L)*** |
| Risk Assessment (RA) Compliance | Not following RA could result in injuries, minor to major. | students, staff, team members, participants, public | 5 x 5 = 25  H | * All team members, participants, students, staff, public involved with the *activity* will have read, understood, and will follow, the control measures in the entire risk assessment, or sections relevant to that person’s role/activity. * Risks and control measures will be clearly explained when necessary. Expert UoP staff will be consulted when necessary where there is uncertainty regarding implementation of control measures. * If, during the *activity* or *event*, any person does not adhere to the RA: the *activity* or *event* will be suspended or cancelled, until this has been corrected and it is safe to continue. As per national Health and Safety law all staff/students must do the following:    + Follow the training you have received when using any work items your employer has given you   + Take reasonable care of your own and other people’s health and safety   + Co-operate with your employer on health and safety * Tell someone (your course/unit leader, employer, supervisor or H&S representative) if you think the work or inadequate precautions are putting anyone’s health and safety at risk | 2 x 5 = 10  Medium | Ensure all people involved in activity have understood the RA and follow the control measures | H |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |