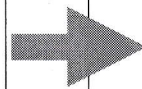


# RISK ASSESSMENT FORM

Form RA2

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                          |                                                                                                  |                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>Risk Assessment Number:</b> (eg 2016SEPTBOARDWALK)<br>MAY<br>2018 <del>APR</del> BOARDWALK                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                       | <b>Date Of Assessment:</b> <del>30th April 2018</del> 12th May 2018                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                          |                                                                                                  |                                                |
| <b>Task / Work Activity / Work Area Assessed:</b> BOARDWALK at Broad Haven Slash Pond SA62 3JR: carpark entrance to picnic area                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                       | <b>People Involved In Making This Assessment:</b> Ben Dave, Tom Howard, Ella Fletcher                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                          |                                                                                                  |                                                |
| <b>Supplementary Checklist Used In Respect Of:</b> <i>If there is a significant risk in any of these areas /or any other/- a separate Risk Assessment should be completed</i>                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                          |                                                                                                  |                                                |
| <b>New And Expectant Mothers</b> <input type="checkbox"/> <b>Fire safety</b> <input type="checkbox"/> <b>Young Persons</b> <input type="checkbox"/> <b>Substances Hazardous To Health</b> <input type="checkbox"/> <b>Display Screens</b> <input type="checkbox"/> <b>Manual Handling</b> <input type="checkbox"/>                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                          |                                                                                                  |                                                |
| <b>ASK YOURSELF:</b><br>Persons Affected By The Activity<br>Hazards that may be present<br>* Employees<br>* Contractors<br>* Public * Children<br>* Other vulnerable People/wheelchairs<br>Could there be:<br>Moving or flying objects<br>Falling materials<br>Moving objects<br>Protruding objects<br>Sharp or jagged edges<br>Can things be caught in<br>Pinch points<br>What are the risks of a fall<br>Fire<br>Spills<br>Slippery surfaces<br>is there contact with:<br>Chemicals<br>Electricity<br>Heat or Cold<br>Gases or Fumes<br>Oxygen deficiency | <b>2. What Hazards Have Been Identified?</b><br><b>Trips falls slips</b><br>A fall from/off the boardwalk<br>Slip on wet /mossy decking boards<br>Trip hazards<br>Litter/debris<br>Water pools under boardwalk<br><b>Falling Materials protruding Objects</b><br>Pinch points<br>Dry wood – fire risk | <b>3. What Control Measures Already In Place</b><br>Boardwalk is at low height , maximum distance to ground 18"<br>Barriers at 12" and up to 36"<br>Kick boards<br>Trees Cut back<br>Deck boards kept free of moss<br>Boards are screwed in place<br>Boards are in solid condition<br>Bins provided in carpark/litterfree area<br>Caution signs in place<br>Trees cut back/hanging branches/weeds trimmed<br>Barriers./deckboards smooth-no sharp edges/splinters.<br>Deckboards are immobile<br>Water surrounding boardwalk<br>No ashtrays/no ignition sources | <b>4. Further Control Measures Identified As Necessary – what else could be done?</b><br>New 'caution/contact if danger to report' signs | <b>5. Action on measures listed in Col. 4</b><br>Allocated to (Name)<br>For completion by (Date) | <b>6. Work Completed</b><br>Date And Signature |





| Persons Affected By The Activity                                                                                                                                                                                              | ASK YOURSELF .<br>What Hazards Have Been Identified?<br>TODAY                 | 3. Control Measures Already In Place if different to above | 4. Further Control Measures Identified As Necessary – what needs to be done?                                                                                            | 5. Action on measures listed in Col. 4<br>Allocated to (Name) | For completion by (Date) | 6. Work Completed<br>Date And Signature |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------|-----------------------------------------|
| <ul style="list-style-type: none"> <li>* Employees</li> <li>* Contractors</li> <li>* Public</li> <li>* New &amp; Expectant Mothers</li> <li>* Children</li> <li>* Young Persons</li> <li>* Other vulnerable people</li> </ul> | <p>Kick board next to 1st landing after top viewing platform - come loose</p> |                                                            | Screw back on                                                                                                                                                           | B. Redhorn                                                    | 10/5/18                  | 15/5/18<br>Ben Dore                     |
| <p>Delete inappropriate entries. Add any affected people not listed.</p>                                                                                                                                                      | <p>Top handrail screw 1 post down from landing with Billy's bench</p>         |                                                            | Cut it off and re-screw                                                                                                                                                 |                                                               |                          |                                         |
| <p>7. People allocated actions in col. 4 and target dates approved by Manager / Supervisor;<br/>Name; B. DARE</p> <p>Signature; Ben Dore</p>                                                                                  |                                                                               |                                                            | <p>8. Details Of Further Control Measures Required (Column 4) transferred to the Control Measures Action Record:</p> <p>YES / NO <u>YES</u></p> <p>On Date: 12/5/18</p> |                                                               |                          |                                         |

## MONTHLY

[illegible]

A Risk Assessment is a document detailing considerations of a particular area. Once the initial considerations have been made – “the risks”, the control measures are considered i.e. what is there already in place to minimize that risk?

**A Risk Assessment REVIEW** is your role in this task – read over each risk and check that the control measures are still in place.

IDENTIFY, RECORD & ACTION any remedial action that is required.