# Risk Assessment Catering

Directorate: <Enter Directorate> Service/Location: <Enter team and location> Task: <enter task>

| Hazard:  Activity/  Equipment/  Process | Possible injury/ harm | To whom | Before Controls Likelihood | Severity | Risk Rating | Existing Controls | After Controls Likelihood | Severity | Risk Rating | Further Controls | By whom and when |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Work equipment ;**  **Lifting Equipment** | Death & Serious Injury, from collapse, trapping & falling objects | User and others | **2** | **5** | **10** | * Training, instruction & supervision; * Maintenance & inspection (detail): * Separation of work area from others; * SOP (list) * PPE (list) * Signage |  |  |  |  |  |
| **Powered Equipment** | Serious Injury, from amputation, trapping, electrocution & cut | User | **3** | **3** | **9** | * Training, instruction & supervision * Maintenance & Inspection (detail) * Isolators & emergency stops * Separation of work area and pedestrians; * Method statements (list) * PPE (list) * Signage. |  |  |  |  |  |
| **Hand Equipment** | Injury from cuts | Users | **4** | **2** | **8** | * Training, instruction & supervision; * Maintenance (detail) * SOP (list) * PPE (list) |  |  |  |  |  |
| **Manual Handling** | Musculoskeletal Injuries | Staff | **4** | **2** | **8** | * Training, instruction & supervision; * Substitution with mechanical handling (detail): * Smaller loads; * Reduction in frequency of lifting (detail) * SOP (list) * PEE (list) |  |  |  |  |  |
| **Hazardous Substances: e.g. cleaning chemicals** | Serious injury from long and short-term exposure, burns, dermatitis, breathing problems, fire and explosion. | Staff | **3** | **3** | **9** | * Training, instruction & supervision; * Inspection (detail): * Use of specialist contractors (detail): * Substitution of substance with less hazardous product (detail); * COSHH assessments; * Storage (detail): * Separation of work area; * SOP (list): * PPE (list) * Signage |  |  |  |  |  |
| **Handling of hot food & equipment** | Burns and scalds | Staff | **5** | **3** | **15** | * Training, instruction & supervision; * Inspection and maintenance (detail); * SOP (list): * PPE (list) * Signage. |  |  |  |  |  |
| **Movement around work area** | Slips, trips & falls | Staff | **5** | **3** | **15** | * Training, instruction & supervision; * Inspection and maintenance (detail): * SOP (list): * PPE (list): * Signage |  |  |  |  |  |
| **Environment** | Injury and discomfort from, heat, cold, & tiredness. | Staff | **5** | **2** | **10** | * Training, instruction & supervision; * Provision of welfare facilities; * Ventilation; * SOP (list) * PPE (list) |  |  |  |  |  |
| **Infectious Diseases** | Sickness and ill health | Customers/  Clients | **2** | **2** | **4** | * Training, instruction & supervision * Hazard analysis assessments * Good food hygiene practices * Infectious disease protocols * Temporary exclusion of unwell staff |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

**Name of Assessor:** <enter name>  **Date:** <enter date>

**Position:** <enter title> **Review Date:** <enter date>

**Managers Signature:** <enter signature / managers name>  **Date**: <enter date>