**Safe Operating Procedure**

**SOP1: (title)**

**Introduction**

1. **Hazards**

**General**

**Machinery**

1. **Causes of Accidents or Injury**

**General**

**Machinery**

1. **Precautions**

**Training Acknowledgement**

Training has been given in **SOP1: (title)**

The elements of the training covered work:

1. Hazards
* General
* Machinery
1. Causes of Accidents or Injury
* General
* Machinery
1. Precautions

This is to confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has read and understood SOP1: (title)

Training was given by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Training was received by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_

The operative was observed and has been assessed to be competent by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_

A copy of this training acknowledgement must be filed with the employee’s training records.

**GENERAL RISK ASSESSMENT FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **College/Department** |  | **Date of Risk Assessment** |  |
| **Name of person carrying out assessment** |  | **Job Title** |  |
| **DESCRIPTION** Give details of the process, task, activity, event etc. being risk assessed  |  |
| **HAZARD** **IDENTIFICATION****Hazard -** something with the potential to cause harm within the process, task etc. you are assessing.**NB:** Consider things that you can “foresee” / imagine going wrong and how this could happen? | **Ref:** | **Hazard** | **Who and How Many can be harmed?**e.g. student, staff, contractors etc. | **How can they be harmed?** Describe |
| A |  |  |  |
| B |  |  |  |
| C |  |  |  |
| D |  |  |  |
| E |  |  |  |
| F |  |  |  |
| G |  |  |  |
|  |
| **EXSITING CONTROL MEASURES IN PLACE**What control measures are already in place to reduce the risk of the hazard becoming a reality? Refer to the hazards identified above i.e. A B C D etc. | **Ref:** | You may combine some of the hazards together if one control measure addresses more than one hazard e.g. A, C & E to save repeating the same information  |
| A |  |
| B |  |
| C |  |
| D |  |
| E |  |
| F |  |
| G |  |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **RISK ASSESSMENT SCORE**Use the consequence (table 1a) and likelihood (table 1b) tables overleaf to calculate the risk score (table 1c)**NB**: Take into account existing controls  | **Risk** | **Consequence (1-5)** | **X** | **Likelihood (1 - 5)** | **=** | **Risk Score (1-25)** |
| A |  |  |  |  |  |
| B |  |  |  |  |  |
| C |  |  |  |  |  |
| D |  |  |  |  |  |
| E |  |  |  |  |  |
| F |  |  |  |  |  |
| G |  |  |  |  |  |

|  |
| --- |
| **ACTION PLAN – things that need to happen now to control / reduce risk further**  |
| **Risk** | **Further Action Required To Control Risk** | **By Whom** | **Date Complete** |
| A |  |  |  |
| B |  |  |  |
| C |  |  |  |
| D |  |  |  |
| E |  |  |  |
| F |  |  |  |
| G |  |  |  |
| **NB:** When actions are complete they need to be transferred to the section above as now being ‘control measures already in place’. The risk rating scores may also need to be amended to acknowledge that these additional controls measures are now in place. |

|  |
| --- |
| **ASSESSMENT SIGN OFF**  |
| **Assessor’s Signature** |  |  |
| **Manager’s Name** |  | **Manager’s Signature**  |  |
| **Date signed** |  | **Local monitoring to be performed by:** |  |
| **Review Period:** **(please circle as appropriate**) |  continuous daily weekly monthly annually after significant change |
| **Risk Assessment Review Dates:** |  |  | **Copies of Assessment to: (please identify)** |  |

**Table 1a Consequence Scoring Matrix**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |   |   | **Consequence** |   |   |
| **Hazard Descriptor** | **ref** | **1** | **2** | **3** | **4** | **5** |
| **Insignificant** | **Minor** | **Moderate** | **Major** | **Catastrophic** |
| **Injury** | a | Minor injury not requiring first aid treatment | Minor injury (e.g. cut, bruise) / illness (e.g. faint) requiring first aid treatment | Moderate injury (e.g. sprain strain, fractures) / ill health / absent from work/studies for more than 3 days butless than 7 days | Major / multiple injuries / long-term incapacity / disability / absent from work/studies for 7 days or more | Serious injury / multiple persons injured / permanent incapacity / fatality |
| **Student Experience** | b | Unsatisfactory experience (resolved) | Unsatisfactory experience (readily resolved)  | Miss-managed (short term effects) | Miss-managed (long term effects) | Totally unsatisfactory outcome or experience |
| **Complaint / Claim Potential**  | c | Locally resolved complaint | Justified complaint | Below excess claim / justified complaint involving lack of appropriate care | Claim above excess level / multiple justified complaints  | Multiple claims or single major claim |
| **Objectives / Projects**  | d | Insignificant costs increase / schedule slippage /barely noticeable reduction in scope or quality | <5% over budget / schedule slippage / minor reduction in quality / scope | 5-10% over budget / schedule slippage / reduction in scope of quality requiring client approval | 1-25% over budget / schedule slippage / doesn't meet secondary objectives | >25% over budget / schedule slippage / doesn't meet primary objectives |
| **Service / Business Interruption** | e | Loss / interruption <1 hour | Loss / interruption >8 hours | Loss / interruption >1 day | Loss / interruption >1 week | Permanent loss of service or facility |
| **Human Resources / Organisational Development** | f | Short-term low staffing level / temporary reduction in service quality <1 day | Ongoing low staffing level reduction in service quality | Late delivery of key objectives / services due to lack of staff (e.g. recruitment, retention, sickness) . Minor error due to insufficient training / ongoing unsafe staffing level | Uncertain delivery of key objective/service due to lack of staff | Non-delivery of key objective/service due to lack of staff / loss of key staff / very high turnover |
| **Staff****Experience** | b | Unsatisfactory experience (resolved) | Unsatisfactory experience (readily resolved)  | Miss-managed (short term effects) | Miss-managed (long term effects) | Totally unsatisfactory outcome or experience |
| **Financial**  | g | Small loss >£100 | Loss >£1,000 | Loss >£10,000 | Loss >£100,000 | Loss>£1,000,000 |
| **Inspection / Audit** | h | Minor recommendations / minor non-compliance with standards | Recommendations given / non-compliance with standards | Challenging recommendations / non-compliance | Enforcement Action / multiple challenging recommendations / major non-compliance | Prosecution / severely critical report |
| **Adverse Publicity / Reputation**  | i | Rumours | Local Media(short-term) | Local Media(long-term) | National Media<3 days | National Media>3 daysMP concern (Questions in House) |

**Table 1b Likelihood Score**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |
| **Descriptor** | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost Certain** |
| **Frequency** | Not expected to occur for years | Expected to occur at least annually | Expected to occur at least monthly | Expected to occur at least weekly | Expected to occur at least daily |
| **Probability** | < 1% | 1 – 5% | 6 – 20% | 21 – 50% | > 50% |
| Will only occur in exceptional circumstances | Unlikely to occur | Reasonable chance of occurring | Likely to occur | More likely to occur than not |

**Table 1c** **Risk Score**

|  |  |
| --- | --- |
| Likelihood | Consequence |
| **1****Insignificant** | **2****Minor** | **3****Moderate** | **4****Major** | **5****Catastrophic** |
| **1 - Rare** | **1** | **2** | **3** | **4** | **5** |
| **2 - Unlikely** | **2** | **4** | **6** | **8** | **10** |
| **3 - Possible** | **3** | **6** | **9** | **12** | **15** |
| **4 - Likely** | **4** | **8** | **12** | **16** | **20** |
| **5 - Almost** **Certain** | **5** | **10** | **15** | **20** | **25** |