**Risk Assessment**

| Workplace |  | | **Department** | |  |
| --- | --- | --- | --- | --- | --- |
| Risk Assessor |  | | | | |
| Room/Area |  | | | | |
| Task/Activity | Using a computer | | | | |
| Date |  | **Review Date** | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Description of Hazard Drinking a liquid whilst next to a computer and spilling it.  Electrical Shock  Damage to eyes  Damage to back | | | |
| Consequence of Hazard~~Low~~  Medium  ~~High~~ | | | |
| Persons at Risk User of the computer. | | | |
| **Types of accident/harm to persons at risk**  Equipment and clothes could become dirty  Possible electrocution | | | |
| Please mark appropriate number (1 = very low, 5 = very high) and Risk Priority Rating | | | |
| **Likelihood :** ~~1~~  2 ~~3 4 5~~ | | | **Severity :** 1 ~~2 3~~ (Low, medium, high) |
| **Risk (Likelihood x Severity)** | | 2 | |
| **Risk Priority Rating** | | High (9 – 15) Medium (4 – 9) Low (1 – 4) | |
| Recommended Control MeasuresDon’t drink next to a computer.Don’t bring a drink into the IT roomTake regular breaks from the screenMove about and stretch limbs and back when not using the machine | | | |
| **Review/Evaluation** | | | |
| **Signature of Manager** |  | | |
| **Name of Manager** |  | | |
| **Date** |  | | |