|  |
| --- |
| ***General Guidance****Original risk assessments must be kept for a period of 7 years. On completion a hard copy should be printed off and placed in your local/site health and safety folder*.*Instructions for Use: Please remove this section once you have completed the assessment as it is guidance for completing the assessment.* |

|  |  |
| --- | --- |
| **Risk** | Mod Roc |

| **What are the hazards?** | **Who might be harmed and how?** | **What are you already doing (existing Control Measures)?** | **Do you need to do anything else to manage this risk (Additional Control Measures)?** | **Action by whom?** | **Action by when?** | **Done** |
| --- | --- | --- | --- | --- | --- | --- |
| *Dust* | *Teaching staff, children, other classroom staff.**Inhalation, skin irritation, allergies.* | *Ventilation, hand washing, protective clothing………..* |  |  | *,,/,,/….* |  |
| Use of cutting tools |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Risk Assessor | Signature | Date |
| Responsible Manager | Signature | Date |

|  |  |  |
| --- | --- | --- |
| **Date Reviewed** | **Signature** | **Role** |
|  |  |  |
|  |  |  |

**Action Plan for Risk Assessment**

Action Plan to be completed based on the findings of the risk assessment. The following actions are to be undertaken to reduce the risk level as far as reasonably practical and to ensure that all of the standard controls and local arrangements are in place.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No | Hazard not fully controlled | Performance Status | Action required | Person Responsible | Target Date | Date of Completion  |
| High |
| Medium |
| Low |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Responsible Manager | Signature | Date |