



# General Risk Assessment

## Form RA1

(Refer to Notes for Guidance before completing this form)

<b>School Assessment No:</b>	INF_ex_1
<b>Title of Activity:</b>	Events in Informatics space
<b>Location(s) of Work:</b>	Informatics space
<b>Brief Description of Work:</b>	
Hazards we would expect event organisers to cover for any event held in the Informatics Forum and example controls.	

**Hazard Identification:** Identify all the hazards; evaluate the risks (low / medium / high); describe all existing control measures and identify any further measures required. Specific hazards should be assessed on a separate risk assessment form and cross-referenced with this document. Specific assessments are available for hazardous substances, biological agents, display screen equipment, manual handling operations and fieldwork. See <http://www.ed.ac.uk/schools-departments/health-safety/risk-assessments-checklists/risk-assessments> for details.

<b>Hazard(s)</b>	<b>Present Risk Evaluation</b>  (threat to life/body)  L/M/H	<b>Control Measures</b> (i.e., alternative work methods / mechanical aids / engineering controls, etc.)	<b>Risk Evaluation after control</b>  (chances of life/bodythreat now)  L/M/H
Overcrowding  (crushing, tripping)	M	Ensure area is suitable for numbers of attendees and fire exit routes are clear.	L
Fire	H	Nearest exit routes to be notified to attendees at start of event. Non-Informatics regulars should be guided out of the building by a nominated person/Steward. Steward should report any issues to the Assembly Coordinator (Uni.	L

		<p>Security) at the main entrance to the building.</p> <p>Attendees to leave the building by the nearest fire exit without delay.</p> <p>For events above or below the ground floor: Persons incapable of using stairs should be guided to the nearest refuge point and then a team sent to bring the emergency lift to the level for evacuation, or a call made to Uni. Security requesting the assistance of their evac team (note: response time will be variable and perhaps up to one hour)</p> <p>Any fire related injuries should be dealt with by a First Aider then Ambulance. Security should be notified and location provided.</p> <p>Attendees should not re-enter the building until the all-clear has been given by the Fire Controller at the main Forum entrance.</p> <p>Fire Assembly point is the entry to Geo. Sq. gardens.</p>	
Slips, trips	M	<p>Floor surfaces to be kept clear and appropriate footwear to be worn (e.g. no socks on a slick floor surface such as vinyl).</p> <p>Cables and other trip hazards minimised (taping down or moving hazards to avoid risk of entanglement)</p> <p>Injuries to be treated by a competent person or First Aider.</p> <p>Escalate serious issues to Emergency services. Security should be notified and location given.</p>	L
Spills	M	<p>Floor surfaces kept clear of liquids. Containers to be used and stored on a sensible surface.</p> <p>Mops and buckets can be found in</p>	L

		<p>the Cleaners' store.</p> <p>Large spillages can be limited by using the wet pickup vacuum</p> <p>Injuries to be treated by a competent person or First Aider.</p> <p>Escalate serious issues to Emergency services. Security should be notified and location given.</p>	
Allergic reactions	H	<p>Food and other substances to which people may commonly be allergic requires to be properly identified.</p> <p>In the event of someone taking an allergic reaction: If the patient carries their own medicine assist them to find it and to administer.</p> <p>If no medicine is available a call to the Emergency services should be made immediately. Security should be notified and location given.</p> <p>Responsible person or First Aider to monitor response levels and be prepared to treat for anxiety/ unconsciousness/CPR until relieved by medical professional.</p>	M
Electrical shocks	H	<p>Items should be inspected before use and identified as safe for use (PAT label, or assesment by competent individual). Failed items should not be used.</p> <p>Faulty items, circuits etc,, should be shutdown before attempting any patient recovery.</p> <p>Injuries to be treated by a knowledgeable competent person or First Aider.</p> <p>A defibrillator is available and should be brought to site in case of requirement. First Aider or responsible person may be required to provide CPR until relieved by</p>	L

		<p>medical professional.</p> <p>Escalate serious issues to Emergency services. Security should be notified and location given.</p>	
Cuts	M	<p>Cuts should be dealt with using local First Aid facilities and administered by a competent person/First Aider</p> <p>Escalate serious issues to Emergency services. Security should be notified and location given.</p>	L
Security	L	<p>Organiser should ensure attendees do not wander unnecessarily through areas not part of the event space.</p> <p>Attendees should be identified in such a manner as to easily recognise intruders (either by being known; being on an invited list; being vouchsafed by other known attendees; carrying ID lanyards/bracelets).</p> <p>All non-Informatics attendees should be escorted out of the building by their host. None should be left in the building unattended.</p> <p>Intruders should be notified to Security by telephone and their location identified also a call to Police if there is a concern about the behaviour.</p>	L
<p>Hazards your event is bringing with it?</p> <p>List the hazards here</p>	?	<p>Provide procedures to ensure other hazards your event might bring do not cause harm to attendees or to any other occupants of the building.</p> <p>Consider: Noise; Substances harmful to Health; Fire risks; electrical current requirements; etc;;;</p> <p>Escalate serious issues to Emergency services. Security should be notified and location given.</p>	L (hopefully)

*\*Continue on separate sheet if necessary*

**Engineering Controls:** *Tick relevant boxes*

Guarding		Extraction (LEV)		Interlocks		Enclosure	
Other relevant information (incl. testing frequency if appropriate):							
Note any special guarding you might need. Barriers, covers, etc.,							

**Personal Protective Equipment (PPE):** Identify all necessary PPE.

Eye / Face		Hand /Arm		Feet / Legs		Respiratory	
Body (clothing)		Hearing		Other (Specify)			
Specify the grade(s) of PPE to be worn:							
Specify when during the activity the item(s) of PPE must be worn:							

**Non-disposable items of PPE must be inspected regularly and records retained for inspection**

**Persons at Risk: Identify all those who may be at risk.**

Academic staff		Technical staff		P'Grad students		U'Grad students	
Maintenance staff		Office staff		Cleaning staff		Emergency personnel	
Contractors		Visitors		Others			

**Additional Information:** Identify any additional information relevant to the activity, including supervision, training requirements, special emergency procedures, requirement for health surveillance etc.

<p>Contact list:</p> <p>Event Organiser: [Name]; [contact procedure/tel. No.]</p> <p>Responsible Person: [Name]; [contact procedure/tel. No.]</p> <p>First Aiders: [Name]; [contact procedure/tel. No.]</p> <p>Fire Stewards :[Name]; [contact procedure/tel. No.]</p> <p>Emergency evacuation team (2 people min.): [Names]; [contact procedure/tel. No.]</p> <p>Emergency contact numbers:</p> <p>Security – 0131 650 2222 (or 2222 from any internal phone)</p> <p>Emergency Services – 999 from a mobile phone , or 9999 from any internal number.</p>
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Security MUST also be informed when calling an ambulance.

Give accurate location information to both parties. Ideally send someone to main door to guide helpers back to the victim

Locations of useful equipment:

Cleaning equipment – Cleaner’s closet ground floor (store in the corridor to Ladies toilet); wet pick up vacuum – base of main Forum stair

First Aid kit – Every pantry area on every floor

First Aid Room – Beside Reception (requires door key to have been previously arranged with Reception))

Defibrillator – Reception waiting area

**Assessment carried out by:**

Name:	{Person submitting the assessment}	Date:	
Signature:		Review Date:	

Name:	(Person responsible for checking the assessment (Event Organiser))	Date:	
Signature:		Review Date:	