**ENSA General Risk Assessment** 

Please upload this document to your Teams channel to be reviewed by the ENSA Student Activities Team.

General risk assessments should be updated annually with reviews to be carried out after 1st July.

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| --- | --- |
| **Club/Society Name:** |  |
| **Activity:** |  |
| **Your name:** |  | **Office holder position** |  |
| **Date of activity:** |  | **End date:** |  |
| **Start time:** |  | **End time:** |  |
| **Location:** |  |
| **Summary of activity:** |  |

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|  |  |  | **Risk Rating = Severity x Likelihood** | **Likelihood** |  |  |  |
| **Potential Severity** |   | **1** | **2** | **3** | **4** | **5** |   | **Likelihood** |
| 1 | Minor, first aid or minimal loss - treated on site |   | **Severity** | **1** | **1** | **2** | **3** | **4** | **5** |   | 1 | Very unlikely |
| 2 | Minor, some damage - off site treatment required  |   | **2** | **2** | **4** | **6** | **8** | **10** |   | 2 | Unlikely |
| 3 | Substantial loss or damage - some hospital stay  |   | **3** | **3** | **6** | **9** | **12** | **15** |   | 3 | Likely |
| 4 | Long Term injury requiring rehab, major loss |   | **4** | **4** | **8** | **12** | **16** | **20** |   | 4 | Very Likely |
| 5 | Catastrophic, Fatality, disablement |   | **5** | **5** | **10** | **15** | **20** | **25** |   | 5 | Almost certain |

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| --- | --- | --- | --- | --- | --- | --- |
| **Hazards Identified** | **Who/how may be harmed?** | **Existing Controls** | **Risk** **Rating** | **Additional Controls****(If low risk none required)** | **Residual Risk** | **Owner****(Who is doing the additional control?)** |
| **S** | **L** | **SxL** | **S** | **L** | **SxL** |
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Committee Member Signature: Date:

Head of Student Activities Signature: Date: