

POLICY FOR HEALTH, SAFETY AND WELFARE

PART C ARRANGEMENTS

SECTION 1

MANAGING HEALTH AND SAFETY (Including General Risk Assessment)

March 2008

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MANAGING HEALTH AND SAFETY

1. INTRODUCTION

Good management and leadership are vital in ensuring effective service delivery and high levels of health and safety in the council. As these are key components of successful health and safety performance, this section applies to the whole council, including **all employees and activities**.

Health and safety is not about stopping people from doing things, spoiling people's fun or creating a risk free society by banning all hazardous activities. It is about doing our best to make sure we do our job reasonably safely. This section of the council's Health, Safety and Welfare Policy explains what is necessary to manage health and safety effectively and in line with legislation.

As well as describing methods of general health and safety management, this document clarifies some specific issues relating to risk assessment for:

- new and expectant mothers
- young people and
- temporary workers,

who may be at more risk than most.

The Health and Safety Commission, the Government agency responsible for protecting people's health and safety at work, states that sensible risk management is about:

- Ensuring that workers and the public are properly protected,
- Ensuring that those who create risks manage them responsibly and understand that failure to manage real risks responsibly is likely to lead to robust (legal) action
- Enabling individuals to understand that as well as the right to protection, they also have to exercise responsibility.

2. DEFINITIONS

A "**hazard**" is something with the potential to cause harm.

A "**risk**" the chance, high, medium or low, that somebody could be harmed by a hazard, together with an indication of how serious the harm could be.

A "**risk assessment**" is a systematic examination of work activities and premises. The risk assessment will identify the hazards, evaluate the risks involved taking into account any precautions in place, and facilitate an action plan.

“**Control measures**” are the procedures that are put in place after a risk assessment to avoid risks or reduce them to an acceptable level.

3. RISK ASSESSMENT

A risk assessment is a careful examination of what could cause harm to people, to determine whether enough precautions have been taken or more should be done to prevent harm. Everyone has a right to be protected from harm caused by failure to take reasonable control measures. Risk assessments don't always have to be long, complex documents; the most important thing is that they are fit for purpose and are acted upon.

Chief Officers must ensure that risk assessments are completed for all activities under their control where a member of staff or other person may evaluate a significant hazard.

Chief Officers must also ensure that each assessor (the person who does the risk assessment) is competent (see section 13 for information). This means that they must have good knowledge of the activity to be assessed, has understanding of how to complete risk assessments, and is fully aware of any specific legal requirements relevant to the work activity. **A risk assessment does not have to be perfect – but it must be suitable and sufficient. You need to be able to show that:**

- A proper check was made;
- You dealt with all the obvious significant hazards, taking into account the number of people who could be involved;
- You asked who might be affected by the hazards;
- The precautions are reasonable, and the remaining risk is low; and
- You involved your staff or their representatives in the process.

The following list gives some examples of hazards which may need to be considered when carrying out risk assessments. It is **not** a comprehensive list but is given to illustrate the extensive nature of the hazards which may need to be taken into account.

- Fall of person or object from height
- Fall of person on same level
- Manual handling
- Use of machines
- Operation of vehicles
- Fire, including static electricity
- Electricity
- Drowning
- Excavation work
- Stored energy
- Explosions (chemicals/dust)
- Contact with cold/hot surfaces
- Compressed air
- Mechanical lifting operations
- Noise
- Biological agents
- Ionising radiation
 - Non-ionising radiation
- Vibration

- Hand tools
- Adverse weather
- Chemicals/substances
- Stacking
- Housekeeping
- Lighting
- Confined spaces
- Cleaning

For complex activities it can be useful to break down the activity into its component parts, for example, circular saw use could comprise of:

- normal operating
- cleaning
- breakdown
- setting/adjustment
- lubrication
- overhaul
- installation
- dismantling

Risk Assessments **must** be recorded. You can use the general risk assessment form, the HSE Risk Assessment form or use any other suitable format to show the safe working procedures. **What is important is that risks and control measures are clearly identified.**

Forms for recording risk assessments are provided in **Appendix 1** (general risk assessment) and **Appendix 2** (detailed risk assessment). Risk assessments must be kept for at least 5 years, although for some services, such as those dealing with children, it might be necessary to keep them for longer, and local arrangements should be made.

Equalities - In considering the issue of who might be harmed, assessors must remember to consider any significant risks related to a person's age, disability, gender etc. These must be included in the risk assessment and suitable control measures put in place.

4. IMPLEMENTING CONTROL MEASURES

Carrying out and recording the risk assessment is not the end of the process. Control measures must be implemented and monitored, to ensure that they are successfully controlling the risks. Writing down the results of the risk assessment, and sharing them with staff helps with this.

If you find that there are many improvements that you could make, big and small, do not try to do everything at once. Make a plan of action to deal with

the most important things first. Health and safety inspectors acknowledge the efforts of businesses that are clearly trying to make improvements. Prioritise and tackle the most important things first. As you complete each action, tick it off the action plan. A good plan of action often includes a range of activities, such as:

- easy improvements that can be done quickly, perhaps as a temporary solution until more permanent controls are in place (although if you use these, be careful not to forget further improvements later)
- long-term solutions to those risks most likely to cause accidents or ill health
- long-term solutions to those risks with the worst potential consequences
- arrangements for training employees on the main risks that remain and how they are controlled
- regular checks to make sure that the control measures stay in place; and
- clear responsibilities – who will lead on what action, and by when.

In deciding what actions to take to control risks, it is useful to consider the hierarchy of controls set out by the HSE. This is a list of controls, in order of preference and effectiveness in reducing risk.

- i. Elimination (e.g. buying ready sawn timber rather than using a circular saw)
- ii. Substitution by something less hazardous and risky.
- iii. Enclosure (enclose it in a way that eliminates or controls the risk).
- iv. Guarding/segregation of people.
- v. Safe system of work that reduces the risk to an acceptable level.
- vi. Written procedures that are known and understood by those affected.
- vii. Adequate supervision.
- viii. Identification of Training needs.
- ix. Information/instruction (Signs, handouts)
- x. Personal Protective Equipment.

5. INFORMATION FOR EMPLOYEES

Employees have to be told of the results of risk assessments that affect their area of work. This usually takes the form of a list of instructions or a safe working procedure. Managers must make sure that they have told all their employees what each of them needs to know to do the job safely, and that the employees have understood what they have been told. It might be necessary to take extra

steps to deal with language or literacy difficulties or employees with disabilities. If the information is passed on at a meeting, a record of the meeting should be kept including details of attendance.

6. REVIEWING RISK ASSESSMENTS

Barnet Council is a dynamic organisation, and change is common. To keep up with this, and changes in health and safety law, we must make sure that our safety procedures are always up to date.

When a risk assessment is written, a date must be set for a review. This should not be more than 5 years after the original assessment, but is often likely to be less, as change is so common and frequent. Risk assessments also need reviewing when there is reason to suspect that they are no longer valid (for example, if there has been an accident or serious near miss), or a change in the law or good practice.

Very often, the review will conclude that no extra precautions are needed and it is only necessary to note the review date, and confirm it is still valid. If the review finds that improvements are needed, they must be communicated and implemented as soon as possible. If the assessor identifies that it is dangerous to life or limb for the activity to continue without a new control being in place the Chief Officer must ensure the activity is suspended until the situation has been resolved.

7. ASSESSMENT UNDER OTHER REGULATIONS

If a risk assessment has already been completed under some other legislation, (for example a COSHH assessment) there is **no need** to repeat the process by carrying out a general risk assessment, but it must be recorded that one has been completed.

8. RECORD KEEPING

Recording and sharing the results of risk assessments helps to make sure that they are properly implemented. Copies of risk assessments must be made available to relevant staff and that the original is stored safely for inspection by the HSE, Health and Safety Officers and Trade Union appointed Health and Safety Representatives if required. Appendices 1, 2 and 3 are model risk assessment forms.

When writing down results, keep it simple, for example:

Risk identified	Action taken
Tripping over rubbish	<ul style="list-style-type: none"> • bins provided • staff instructed • weekly housekeeping checks

9. HEALTH SURVEILLANCE

Health surveillance is a term for tests that employers make where there is a likelihood that the work activity could result in an identifiable disease or health condition, and that testing is likely to help control that disease or condition. This includes eye testing for Display Screen users and regular health checks for drivers of heavy vehicles.

Health Surveillance is needed where a risk assessment identifies that:

- There is an identifiable disease or adverse health condition related to the work concerned.
- Valid techniques are available to detect indication of the disease or condition.
- There is a reasonable likelihood that the disease or condition may occur under the particular conditions of work and
- Surveillance is likely to further the protection for the health of the employees to be covered.

Health Surveillance should be maintained during the employee's career unless the risk to which the member of staff is exposed and associated health effects are short term. Health Surveillance or examinations must only be carried out by a responsible and competent qualified person. Assessors who identify the need for health surveillance when completing a general risk assessment should seek expert advice from the Councils Occupational Health service, who will be able to confirm what health surveillance is necessary and how often. Where it is necessary to carry out health surveillance, records must be kept.

10. HEALTH AND SAFETY ASSISTANCE

Barnet Council employs a team of Health and Safety Professionals within the Resources Directorate. They are responsible for producing advice, keeping the council's policy up to date, and monitoring the council's health and safety performance.

11. PROCEDURES FOR SERIOUS AND IMMINENT DANGER

Risk Assessments will often identify events and situations where serious and imminent danger could arise. In most establishments, these are likely to include risks from:

- Fire
- Bomb
- Roof Leaks
- Burst Pipes
- Chemical Spillage
- Broken Glass
- Gas Leak
- Electrical Hazards
- Violence (see separate arrangement)
- Damaged Asbestos

Chief Officers must ensure that procedures dealing with risks, which may pose serious or imminent danger, are drafted and communicated to all staff. Communication can be in any appropriate form, including training, instruction, and notices displayed in workplaces. These procedures must:

- Enable people to stop work and immediately go to a place of safety, and
- Except for exceptional cases, prevent them from resuming work in any situation where there is still a serious and imminent danger. Any exceptions to this must be for good reasons and clearly set out in procedures.

Emergency procedures might also need to take account of responsibilities of specific employees. Some employees, such as fire wardens, have specific tasks to perform in the event of emergency. These employees need training so that they can help bring an emergency event under control without risking their own health and safety.

12. CO-OPERATION AND CO-ORDINATION

Co-operation and co-ordination means that employers that share premises also need to share information about risks that can affect the health and safety of each other's employees and procedures in place to control them. This will require exchange of information such as emergency procedures and risk assessments. Further information about the need for cooperation and coordination is contained in section 25 of the corporate health and safety policy – Working in Partnership. As an example, a self-employed contractor carrying out work on a Council site creates a shared workplace, even if only for a very short period.

13. CAPABILITIES AND TRAINING

Chief Officers may delegate specific tasks, such as risk assessment, to employees. Before doing so, Chief Officers should consider the capability of the employee and ensure the employee is provided with safety training, (for example, all assessors should attend suitable risk assessment training). The Health and

Safety Unit provides risk assessment and other health and safety training, contact them for more information.

Competence will reduce if skills are not used regularly. Therefore, Health and Safety training must be periodically repeated, especially for people who do not carry out risk assessments very often. Services must establish suitable periods for retraining of staff.

For information on health and safety training, contact the Health and safety Unit.

14. EMPLOYEES' DUTIES

Health and safety is everyone's responsibility, and while most of the duties are held by the council, the law expects employees to play their part by:

- Taking reasonable care for their own health and safety and that of others who may be affected by what they do or fail to do at work.
- Using all work items provided by their employer in accordance with training and the instructions they receive to enable them to use the item safely.
- Co-operating to help the employer to comply with statutory duties for health and safety.
- Reporting any work situation which might present a serious and imminent danger or any shortcomings in health and safety arrangements to the Chief Officer or their representative so that remedial action can be taken if necessary.

Services should ensure that employees receive adequate instructions and training to enable them to comply with their duties listed above.

15. NEW AND EXPECTANT MOTHERS

Health and safety law specifically requires employers to take particular account of risks to new and expectant mothers, Chief Officers must arrange for a risk assessment to be made on the work activities undertaken by new or expectant mothers. The phrase 'new or expectant mother' means a person who:

- Is pregnant,
- Has given birth within the previous six months or
- Is breastfeeding.

('Given birth' is defined as 'delivered a living child or, after 24 weeks of pregnancy, a stillborn child')

If the assessor identifies a significant risk which goes beyond the level of risk to be expected outside the workplace, the Premises Controller must take the following steps to remove her from the risk:

Step 1 Temporarily adjust her working conditions and/or hours of work. If this is not reasonable or would not avoid the risk go to step 2.

Step 2 Offer her suitable alternative work if any is available or if that is not feasible you must go to step 3.

Step 3 Suspend her from work (on paid leave) for as long as necessary to protect her or her child's safety and health.

These actions are necessary where the manager has received a medical certificate confirming pregnancy and a risk assessment reveals genuine concern. If there is any doubt advice should be sought from the Occupational Health Service.

Risk assessments for new or expectant mothers must be regularly reviewed. Although any hazards are likely to remain the same, the possibility of damage to the foetus as a result of a hazard will change at different stages of pregnancy. There are also different risks to consider for workers who are breastfeeding.

Management must ensure that workers who are breastfeeding are not exposed to risks that could damage the health and safety of the mother or child for as long as they continue to breastfeed. If a Service is properly controlling risks, it is unlikely that workers who continue breastfeeding will be exposed to risks that make it necessary to offer alternative work or given paid leave. Suitable rest facilities must be provided for pregnant or breastfeeding staff. These facilities should be conveniently situated in relation to sanitary facilities and where necessary include somewhere to lie down.

Management may need to give special consideration to new and expectant mothers who work at night. If the mother submits a doctor's certificate stating that night work could affect her health and safety the Chief Officer must either:

- Offer her suitable alternative daytime work if any is available or if that is not reasonable
- Suspend her from work (give her paid leave) for as long as is necessary to protect her health or safety.

The HSE publications

- ***New and Expectant Mothers at Work HS(G) 122 (ISBN 0-7176-0826-3)***
- ***A guide for new and expectant mothers who work IND (G) 373***

contain good advice on how Services can meet their legal duty and lists the hazards and risk a mother may encounter at work and how to avoid them. These include:

- Manual Handling
- Ionising Radiation
- Extremes of Cold or Heat
- Physical burdens
- Biological agents
- Chemicals
- Carbon Monoxide

16. CHILDREN AND YOUNG PEOPLE AT WORK

Definitions

There are certain precautions we have to take when looking after the health and safety of young people (below 18 years old) and children (below school leaving age). There are a few main reasons for this.

- So the parents or guardians can have knowledge of the risks,
- To take account of inexperience, lack of awareness of risks and immaturity of young people,
- To allow for possible size and strength differences between adults and young people,
- To make sure we comply with laws that prohibit young people from certain jobs.

Risk Assessments

Specific risk assessments are needed before employing young people. If there are young people already at work a risk assessment must be carried out immediately.

As well as these requirements Services assessments should give particular consideration to:

- the layout of the workplace and workstations
- exposure to physical, biological and chemical agents
- the form, range and use of equipment and the way in which it is handled
- the organisation of processes and activities
- the extent of the health and safety training provided or to be provided to young persons; and
- risks from agents, processes and work listed in the Annex to Council Directive 94/33/EC on the protection of young people at

- work, (Ionising Radiation, work in high pressured atmospheres, some biological and chemical agents, etc).
- Restrictions also exist on work with asbestos, lead and compounds thereof, work involving structural collapse or high voltage electrical hazards, woodworking machines, agricultural machinery; meat slicing machines, piece work and involving payment by results etc. The assessment must be recorded.

To assist Service Areas, the form attached at **Appendix 3** can be used as an aide-memoir.

Information for employees and parents or guardians

As well as providing employees with clear information on health and safety risks and control measures, managers must give the same information to the parents or guardians of a child (a person under 17 years old).

Restrictions on employment of young persons

In addition, Service Areas may not employ young persons where the work:

- a) is beyond their physical or psychological capacity
- b) involves harmful exposure to agents which are toxic or carcinogenic, cause inheritable genetic damage or harm to the unborn child or which in any other way chronically affect human health
- c) involves harmful exposure to radiation
- d) involving the risk of accidents which it may reasonably be assumed cannot be recognised or avoided by young persons owing to their insufficient attention to safety or lack of experience or training, or
- e) involves a risk to health from extreme cold or heat, noise or vibration

The above prohibitions on employment of young people do not apply where the work is part of the young persons training, carried out under the supervision of a competent person, and where risks are reduced to lowest level that is reasonably practicable.

17. TEMPORARY WORKERS

Services must inform temporary workers and where applicable their employer or employment agency of any special skills, qualifications, or requirements that are needed to enable them to function safely and without risk to health while working. This information should be given before the employee commences work. Any requirement for health surveillance must be similarly notified.

18. EDUCATIONAL, CULTURAL AND RECREATIONAL VISITS

Several areas of the council now offer visits as part of their service delivery, for example,

- Educational visits run by schools,
- Cultural visits to museums,
- Concerts, social events and recreational and therapeutic visits organised as part of a person's care plan.

These activities are becoming a more common part of the council's work activity, and need to be carefully managed, as they often involve hazards and risks that are less predictable and out of the direct control of the council. They also have been subject of several high profile health and safety prosecutions over recent years. This means that particularly careful risk assessment is required, from the planning stage, to the visit itself, and afterwards to learn lessons.

Services that organise and provide visits of this nature must have robust local procedure to ensure that this risk assessment is carried out and properly implemented by a competent person.

The Children's Service and Adult Social Services have detailed procedures that can be used as an example. These are available on the Barnet intranet site.

19. FURTHER INFORMATION

Management of health and safety, especially risk assessment, is a very wide area of work, and getting the correct information is crucial. The HSE is a good source of information, and their Risk Management site <http://www.hse.gov.uk/risk/index.htm> contains useful resources, including risk assessment examples for various workplaces and activities.

Another useful source of information is trade associations. Most have specific information about health and safety aspects of the particular trade, and many have forums where members can discuss issues, including good practice in risk assessment.

As with all aspects of health and safety management, the most important thing is getting the right information which is up to date and relevant. If you are having difficulty with this, or need advice about the risk assessment process, contact the **Health and Safety Unit on 020 8359 7960**.

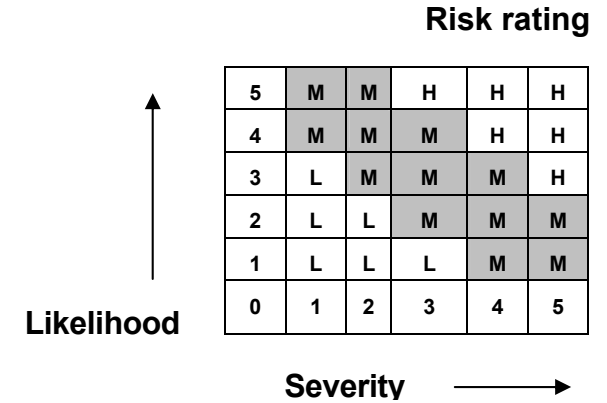
20. MANAGEMENT CHECKLIST

Management issue	Yes/no with comments
Have risk assessments been carried out for all work activities, with records kept of the assessment and review date?	
Has the risk assessment raised any equalities issues, such as age, disability, ethnic group, faith, gender or sexual orientation?	
Have control measures been properly implemented, with priority and timescales set?	
Has information about control measures been passed to employees in a suitable way to ensure that they understand the message?	
Are risk assessments reviewed regularly?	
Does your service carry out any health surveillance? If so, are records kept and lessons learned from the results of the surveillance?	
Are there suitable procedures for serious and imminent danger? Are they communicated to employees, visitors etc.?	
Co-operation and Co-ordination – if the workplace is shared with another employer, is there clear communication of hazards, risks control measures and emergency procedures?	
Capabilities and Training – are all assessors competent to carry out risk assessments? Do you ensure that workers are competent for a task before doing it?	
Employees Duties – is there a system for monitoring employees' health and safety performance? Have staff been made aware of their duties?	
Have specific risk assessments been carried out for temporary workers, new and expectant mothers and children and young people at work	

APPENDIX 1 - RISK ASSESSMENT FORM – GENERAL RISKS

Please complete all parts of the form, and continue on a separate sheet if necessary. The areas in yellow are for advice, and will help in the risk assessment process. If you have questions about this form or how to do a risk assessment, contact the Health and Safety Unit on 020 8359 7960.

Activity / Location	
Date of this assessment	Date of last assessment



What are the hazards?	Who might be harmed and how?	Risk priority (High/Medium/Low)
<p>A hazard is something with potential to cause harm, either long term or short term. Identify hazards by:</p> <ul style="list-style-type: none"> • Workplace inspections • Asking employees for their views • Getting information about good practice from a trade association • Examining accident and sickness statistics 	<p>Identify groups of people, especially:</p> <ul style="list-style-type: none"> • Workers with particular needs (young people, new and expectant mothers, employees with a disability) • Home workers, part time workers, lone workers etc. • Members of the public, clients and visitors • Other employers sharing the workplace 	<p>See above and consider the seriousness of possible injury, disruption to service delivery, cost of reducing the risk, duration of risk, and set priority.</p>

APPENDIX 1 - RISK ASSESSMENT FORM – GENERAL RISKS

What are we already doing to control the risk?	What further action is necessary?	Action		
		By whom?	By when?	Date completed
List the control measures currently in place, including information, instructions, training, supervision, monitoring, PPE, signs etc.	What more could be done to control the risk? <ul style="list-style-type: none"> What do other employers do with similar risks? What is best practice? 	Who has the task been given to?	What is the target date?	Keep a record of when it has been done

Assessment carried out by (name and designation)	Review date:
	Reviews are needed to make sure the risk assessment is up-to-date, if there is a change in law or good practice, or if there is reason to believe that it is no longer valid.

APPENDIX 1 - RISK ASSESSMENT FORM – GENERAL RISKS**Key to risk rating**

Likelihood	
1. Improbable	So unlikely that probability is close to zero
2. Remote	Unlikely, though conceivable
3. Possible	Could occur some time
4. Probable	Not surprised. Will occur several times..
5. Likely/frequent	Occurs repeatedly/event only to be expected.
Severity	
1. Minor injury:	Cuts, bruises etc unlikely to result in sick leave
2. Moderate injuries:	Likely to result in 1-3 days sick leave
3. Major injuries:	More than 3 days sick leave – notifiable to HSE
4. Death	
5. Multiple deaths	
Action	
H – High:	Action immediately
M – Medium:	Action within 12 months
L – Low:	Action when reasonably practicable

APPENDIX 2 – DETAILED RISK ASSESSMENT ADVICE

This appendix provides more detailed guidance on using the general risk assessment form. It can be used to help assessors to understand the process of risk assessment, and ensure that all the questions are answered accurately. This will help ensure consistency in risk assessments. Guidance is provided here, but if you have any more questions, do not hesitate to contact the Health and Safety Unit on 020 8359 7960.

What are the hazards?

In order to achieve a suitable and sufficient risk assessment it is essential to identify all the hazards associated with the activity. In all cases team consultation is a powerful aid. A walk around the workplace can also assist you to spot hazards as can manufacturers' instructions on datasheets.

Who might be harmed and how?

When considering whether or not employees are at risk consider all occupations at the establishment e.g. in a school: Teachers, Technicians, Clerical Staff, Cleaners, Caretaking, and Teaching Assistants. Also, think about any groups of people that might be at risk, for example, people with disabilities, children or visitors to the site. The risk assessment will need to address any particular groups and the special risks they might be exposed to.

Risk priority

To work out the priority of the risk (high, medium or low), use the key to risk rating provided in appendix 1. This is a way of comparing the likelihood of a hazard resulting in injury against the severity of that likely injury.

If this process reveals a risk that is extremely high, it may be necessary to take immediate measures to remove it, in order to protect people from harm.

What are we already doing to control the risk?

List all existing controls for each hazard. These may include:

<ul style="list-style-type: none"> • Guarding/Segregation of People • Safe methods of work • Cleaning procedures • Containment • Enclosure • Ventilation local and dilution • in-house training • external training • instructions given and recorded 	<ul style="list-style-type: none"> • Exclude certain persons • Supervision • Personal Protection Equipment • Safety signs and notices • Written Safe Systems of Work • Written Procedures • Reference Material • Lesson Plans • Schemes of Work
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What further action is necessary?

This is the part of the process where the action plan is made. Having considered and evaluated the risk, the assessor identifies control measures. Control measures must be sufficient to remove the risk or reduce it to an acceptable level. Consider these questions:

- Do the precautions meet the standards set by legislation?
- Do the precautions comply with recognised standards and represent good practice?
- Do the precautions reduce the risk as far as is reasonably practicable?

Action:

By whom? – clearly set out who each task has been allocated to. This might sound simple, but as with any management function, it is essential to choose a competent person for a task. The implementation of control measures might be as simple as changing a light bulb, or it could be very complicated and involve influencing people and managing precautions. think about this when allocating tasks.

By when? - the timescale for improvements depends on a number of factors, including the severity of the likely injury and the priority rating of the risk. Do not forget to think of how easily an improvement can be made; if a low priority risk can be resolved cheaply and quickly, then do so now, rather than waiting until other more complicated risks have been managed.

Date completed – always keep a record of the improvements you have made and when. This will help with keeping the risk assessment up to date. It will also help to judge whether control measures have been successful, for example, in reducing accident or sickness rates.

APPENDIX 3 – RISK ASSESSMENT FOR YOUNG PEOPLE

Date:				Task/premises:			
Assessed by:				Specific location:			
Activity/Plant/ Materials etc.	Specific hazard(s) Presented	Characteristics that would put a young person particularly at risk	<u>Likelihood</u>	Worst case outcome	Risk OK (Y/N)	<u>Control measures/comments</u>	Discussed with parents /guardian (when and by whom)
Review Date:							
Person responsible for review:							