

Risk Assessment for individual member of staff (Transferrable Risk)

Assessment conducted by:	Job title:	Who are covered by this assessment:
Staff member's name:	Job title:	
Date of assessment:	Review interval:	Date of next review:

Concern:

All hazards should be entered below

What are the hazards?	Who might be harmed & how?	Controls: What will you be doing already?	<div></div>	<div></div>	<div></div>	What further action is necessary?	Actions: Who/When	Done?



High/Unacceptable



Medium/Further controls required



Low/Adequately controlled