

Task/Activity/Environment: Use of stage right/op stage staircase for access / crossover	Location: Stage right\OP	Date of Assessment: 14/12/17	Date for Review: JAN 2019
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Identify Hazards which could cause harm: No. Hazard 1 Small surface area on tread platform 2 Low light level 3 Performers Rushing 4 Steeps steps	Identify risks = what could go wrong if hazards cause harm: No. Risk 1 -4 Unable to place full foot on tread when going down the steps. 1-4 Slips, trips and falls occasionally cast/crew could find themselves unstable when in costume, unsuitable footwear or carrying props
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List groups of people who could be affected: Visiting artist, Hirers, mechanics staff, contractors	What numbers of people are involved?
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What existing precautions are in place to reduce risks? No. 1-4 Adequate Lighting, white nosing's on each step, handrails each side, caution signs. 1 - 4 Staff Training and awareness	Score the risk with these precautions in place: No. L X S = RS 2 X 4 = 8 2 x 3 = 6
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What additional actions are required to ensure precautions are implemented/effective or to reduce the risk further? 1-4 Inform the responsible person (i.e. visiting stage manager/tour manager) making them aware of the environment when using the steps and to pass this information on to the rest of the company.	What is the remaining risk after additional actions completed? No. L X S L = RS 2 x 3 = 6
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Who will be responsible for implementing these actions: Mechanics Duty Technician / Visiting Tour/ Stage Manger	By When: on going
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Score	Likelihood	Score	Severity	Total Score	Level of Risk	Action Required
0	Almost impossible	0	No injury	0-1	I=Insignificant	No action
1	Very Unlikely	1	First aid	2-6	L=Low	Review controls to remain effective
2	Unlikely < than 50/50 chance	2	< 3 days absence	If greater than 7, identify additional actions		
3	Likely > than 50/50 chance	3	> 3 days absence	8-16	M=Medium	Identify additional actions to reduce
4	Very Likely	4	Long term injury/ill health	20	H=High	Seek further advice
5	Virtually Certain	5	Death or disabling	25	C=Critical	STOP seek further advice

Completed by PRINT NAME:	Signed:
Completed by PRINT NAME:	Signed:
Completed by PRINT NAME:	Signed:
Manager Authentication PRINT NAME:	Signed: