



# **Risk Assessment Form**

Procedure	Slips, Trips and Falls

Name(s) of person performing the work	Users (Staff & Contractors & Visitors & Tenants & Licensee's)		
Name & position of assessor	Khwaja Islam & Laboratory Manager	Signature	
Date of assessment	01/10/2018	RA Number	BioE 0031

## **Outline of procedure / activity:**

Statistics show slipping and tripping to be the single most common cause of injuries in UK workplace, relating to over a third of all major injuries reported. Also slip, trip and falls make up a high proportion of the university accident. Therefore the University have statutory duty and common-law obligations in relation to the health and safety of their employees and premises. There are elements of the following legislation that affect slips and trips:

- The Health & Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Workplace (Health, Safety and Welfare) Regulations 1992

University must therefore do all they can to ensure that they do not put people at risk. Some of the main causes of slips, trips and falls in the workplace are as follows:

- Uneven floor surface
- Unsuitable floor coverings
- Wet floors
- Changes in levels
- Trailing cables
- Poor lighting
- Poor housekeeping





# **Potential hazards**

Substance or item handled	Associated Hazard (s)	Existing Control Measures	Risk (L/M/H)	Further Action required	Risk (L/M/H)
Floors and Pedestrian traffic routes	Slipperiness Holes Protrusions Changes in level	Chemical and slip-resistant laboratory floors. Areas usually kept free of obstructions unless clearly marked. No changes in level and if so clearly sign-posted. No cables crossing pedestrian routes and use cable guards to cover cables when required. Routine inspection by Facilities Team.	М	No further action required if the existing control measures are adhered to.	М
Stairs	Uneven height of steps Lack of handrails Lack of non-slip and visible nosing	Step of equal height and depth. Stair railings in place on either side. Nosing in good condition. Non-slippery steps. Good visibility. Routine inspection by Facilities Team.	М	No further action required if the existing control measures are adhered to.	М
Surface contamination	Accidental chemical spillages in laboratory Food and drink spillages	Spillages to be cleaned immediately. If the floor is wet a use appropriate sign to let people know the floor is still wet. Routine inspection by Carillion estates.	М	No further action required if the existing control measures are adhered to.	М





Cleaning	Inappropriate cleaning products	Correct cleaning products are used and also according to manufacturer's	М	No further action required if the existing control measures	М
	No or unclear	instruction. The floors are cleaned in		are adhered to.	
	hazard/warning signs	sections to maintain a dry route through			
		the area.			
		Routine inspection by Carillion estates.			
Human factors	Staff ill-informed of	Staff and students are responsible to clear	М	No further action required if	М
	responsibility for cleaning	up spillages and to report accidents, near		the existing control measures	
	up spillages and general	misses to DSO.		are adhered to.	
	housekeeping	They are informed at their health &			
	Lack of documented	safety induction and lab induction.			
	accidents				
Footwear	Open-toe shoes worn by	Open toe shoes/sandals are forbidden in	М	No further action required if	М
	laboratory workers	the laboratory. Staff to choose suitable		the existing control measures	
		footwear for work. Surface dry and free		are adhered to.	
		of contamination. They are informed at			
		their health & safety induction and lab			
		induction.			
Housekeeping	Trailing cables	Cable guards to be used when required.	М	No further action required if	М
	Obstruction e.g. boxes,	Floors and stairs clear of obstruction.		the existing control measures	
	litter.	Routine inspection by Facilities Team.		are adhered to.	





#### Persons potentially at risk:

All employers, visitors, students, tenants, licensees and contractors

#### Action in event of an accident or emergency:

**Fire**: Fire safety procedure. **Spillages**: Clean up immediately and laboratory use the spillage kit provided.

## Arrangements for monitoring effectiveness of control:

1. Monthly inspection of lab and offices by the BioEscalator support team.





**Review of the Risk Assessment**:

Date of review	Name of reviewer	
Date of next review	Signature	

Have the control measures been effective in controlling the risk?

Yes	No

Have there been any changes in the procedure or in the information available which affect the estimated level of risk from the listed substances

Yes	No

What changes to the control measures are required?





#### **Declaration by Tenants/Licensees/Technicians**:

I confirm that I have read this Risk Assessment and that I understand the hazards and risks involved and will follow all of the safety procedures stated. Where PPE has been identified as a control measure, I will ensure that it is worn.

#### **Declaration by Laboratory Manager (LM):**

I confirm that the tenant/licensee/technician who has signed below is competent to undertake the work. My counter-signature indicates that I am happy for the work to proceed.

Name (Please print)	Signature	LM Countersignature	Date





Name (Please print)	Signature	LM Countersignature	Date