RISK ASSESSMENT FORM

Job Location:	Toilets	Permits Required	Yes/No
		1. Permit To work	
		2.WAH & FHRA	
Dept :	Production	3. Confined Space Entry	
		4. Hot Work Permit	
Job Title :	Toilets and showers cleaning	5. Excavation Permit	
		6. LOTOTO Permit	

Contact Nos:
1. Shift Co's- 0773271888 2.Secrutity No- 0382400226 3.Radio Call.

EMERGENCIES ONLY: 4: Toll Free No. - 08002(5040

Supervisor's Name: Harriet Mudal Signature:

Revision 1: Name Signature

Revision 2: Name Signature

Revision 3: Name Signature

Revision 4: Name Signature

N+1 Name: Moses Ogwang Signature:

Mandatory PPE: Safety Overall, Helmet, Safety goggles and Safety boots

GUIDELINE FOR RISK RATING

SEVERITY	PROBABILITY	1	2	3	4	5
		Very Unlikely	Unlikely	Likely	Very Likely	Almost Certain
		Never Heard of in an industry	Heard of Incident in Similar Industry	Incident has occurred in Lafarge group	Happens several times per year in Lafarge group	Happens several times per year in BU
0	No Injury	0	0	0	0	0
1	First Aid	1	2	3	4	5
2	Medical Injury	2	4	6	8	10
3	Lost Time Injury	3	6	9	12	15
4	Permanent Disable	4	8	12	16	20
5	Fatality	5	10	15	20	25

No.	JOB STEPS	HAZARD (Anything that has the potential to cause harm)		HAZARD EFFECT (What will be the effects to one or the environment)	RISK LEVEL (H,M,L)				HAZARD MITIGATION *1. Elimination 2. Substitution/ Isolation 3. Engineering (Scaffolds etc) 4. Administrative (Permits) 5. PPE*	Residual Risk (H,M,L) Risk Rating = Severity x Probability			
		SAFETY HAZARDS	HEALTH HAZARDS		Prob.	Severity	Risk Level	H/M/L		Prob.	Severity	Risk Level	HML
1	Cleaning/Mopping	Slippery floor Over bending	Causes falling Back pain	Injuries/Joint dislocation, Spinal cord diseases	3	2	6	M	Use of safety boot, Use long brush for scrabbing, Use leather glooves	2	1	2	L
2	Scrabbing/washing of the toilets	faeces, Water, Scrabber	Too much smell Water irritation, Scrabber cuts	Stomach disorder, Skin rashes, Injuries	3	3	9	H	Use respirators, Use of glooves	2	1	2	L

TASK TEAM REVIEW & ACKNOWLEDGEMENT

NO	NAME	COMPANY	Experience @ HIMA	First Time on the task (Y/N)	Emergency Response Discussed (Y/N)	PPE in good Condition (Y/N)	DATE SIGN	DATE SIGN	DATE SIGN	DATE SIGN	DATE SIGN
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

	CONDITION OF WORKING TOOLS & EQUIP.	
1		Scrabbers
2		Moopers
3		Toilet brush
4		Liquid Soap
5		JIK
6		Vim
7		Harpic
8		Urinal Balls
9		
10		