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**Using Office Kitchen Equipment Risk Assessment Form** RA Ref No: Off1

<b>Assessor</b>	<b>Job Title</b>	<b>Assessment Date</b>	<b>Review Dates / Initials</b>
A.N Other	Office Manager	22 <sup>nd</sup> Jan 2013	21 <sup>st</sup> Jan 2014

**Equipment assessed/location:** Office kitchen

Persons at risk	Details	Required action
Staff	All office staff	Review the risk
Contractors		

Hz No.	Hazard description	How are persons affected?	Existing controls	Further controls / action
1	Fire	Overloaded electrical circuits or faulty kettles/toasters/microwaves etc can ignite and cause fires	None	Ensure entire electrical system is checked – overdue for 5 year inspection. Carry out regular checks on small appliances to check for signs of overheating
2	Slips	Liquids or foodstuffs dropped on the floor can cause staff members to slip and injure themselves	None	Send memo to every staff member reminding them to clear any spillages
3	Burns and scalds	Contact with hot food or liquids can cause burns or scalds	Staff expected to use normal kitchen sense.	
4	Falling objects	Crockery or food/drink containers fall from poorly stacked shelves or cupboards	Staff expected to use normal kitchen sense.	Tea/coffee/sugar to be placed at low level for easy access by wheelchair user
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<b>Probability (P)</b>	5=very likely, 4=likely, 3=quite possible, 2=possible, 1=unlikely	
<b>Severity (S)</b>	5=fatal, 4=severe, 3=moderate, 2=slight, 1=negligible	
<b>Risk (R)</b>	0-8=low risk, no action required. 9-15=medium risk, ensure action	16-25=high risk, stop operation & implement control measures