**Risk Assessment based on Risk Matrix**

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| Risk Assessment Form for Practicum  |
| Department / Facility:  | Location/s of Lab/Room:  |
| Name of Laboratory/Room:  | Name of PI/Supervisor:  |
| Name of Activity / Experiment:  |
| Reference (if applicable): |
| **1. Hazard Identification** | **2. Risk Assessment** | **3. Risk Control** |
| No. | Description / Details of Steps in Activity | Equipment Used | Hazardous Agents / Materials Used/ Hazards | Possible Accident / Ill Health & Person-at-Risk | Existing Risk Control | Severity | Likelihood (Probability) | Risk | Additional Risk Control | Person Responsible | Remarks |
|  | Travel to the site of field work at Bedok and Jurong East estates0 | NA | Traffic on the road | Road traffic accidents may injure interviewers | * Observe Highway Code for interviewer who drive
* Practice road safety (e.g. do not jaywalk)
 | 3 | 1 | 3 |  |  |  |
| Weather | Interviewers may slip and fall on wet surfaces | * Check weather forecast beforehand
* Bring along umbrellas
* Do not run on wet surfaces
 | 1 | 2 | 2 |  |  |  |
| Risk of electrocution from lighting | Seek shelter if there is lightning | 3 | 1 | 3 |  |  |  |
| Neighbourhood | Killer litter may injure interviewers | Walk under shelter (awnings) as far as possible | 2 | 2 | 4 |  |  |  |
| Interviewers may contract dengue | * Avoid dengue clusters
* Apply mosquitoe repellent
 | 3 | 1 | 3 |  |  |  |
| Interviewers may be injured in a fire | Know fire safety evacuation plan | 1 | 2 | 2 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

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| **Likelihood****Severity** | **Very Likely****(3)** | **Possible****(2)** | **Unlikely****(1)** | **Risk** | **Decision Process** |
| **Low****(1)** | **3** | **2** | **1** | **<3** | **Risk Acceptable** |
| **Medium****(2)** | **6** | **4** | **2** | **3,4** | **Consider appropriate risk control measure/s** |
| **High****(3)** | **9** | **6** | **3** | **>4** | **Risk control measure/s a requirement** |

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| **Conducted By** |  |   | **Approved By** |   |   |   |  |
|   |  |   |   |   |   |   |  |
|   |  |   | Name |   |   |   |  |
|   |  |   |   |   |   |   |  |
| Prepared by: |   |   | Signature |   |   |   |  |
| PI /Supervisor Signature:  |   |   |   |   |   |   |  |
| Date:  |   |   | Approval date |   |  | Next Revision date |  |