

Risk Assessment Form						
1. TASK DESCRIPTION				2. DATE (MM/DD/YYYY)		
3. PREPARED BY						
a. Name (Last, First, M	iddle Initial)		b. Time	c. Title/Position		
d. Department e		e. Work Email		f. Telephone		
g. Supervisor Name h.		h. Task/Work Location		i. Signature of Preparer		
Five steps of Risk Man	agement: (1) Identify the ha (4) Implement co			o controls & make decisions numbers not equal to numbered items on	form)	
4. SUBTASK/SUBSTEP	5. HAZARD	6. INITIAL RISK	7. CONTROL	8. HOW TO IMPLEMENT/ WHO WILL IMPLEMENT	9. RESIDUAL RISK LEVEL	
OF MISSION/TASK		LEVEL				
Shutdown electric	Electrocution	Н	 Shut down power at the main electrical panel. Complete Lock-out/Tag-out procedures Place proper signage in the work area. Inform occupants before Wear proper PPE Verify that Proper certifications are current 	How: Power shall be terminated from the main power breaker. The electrician shall lock out and tag out the main panel. OSHE will provide a Fire Extinguisher Notification shall be provided two weeks prior. Who: MD Licensed Electrician (Facilities Management), OSHE safety staff, DCM staff	M	
Disable Sprinkler System	Fire	M	 Place the building on Fire watch Assign a dedicated individual for fire watch Provide Fire extinguishers Protect sprinkler heads from damage 	Inform AIG and the State Fire Marshal of impairments lasting longer than four hours Provide the Name of the employee and ensure they are aware of their role and responsibilities OSHE shall provide a fire extinguisher	L	



					Staff will provide sprinkler covers in the workplace Who:	
					How:	
					Who:	
					How:	
					Who:	
					How:	
					Who:	
	Add	litional entries for i	tems 5 through 9 a	re provided or		
10. OVERALL RESID			2.			
EXTREMEL		HIGH	·u).	MEDIU	м П.	ow
11. OVERALL SUPER					WI L	OVV
12. APPROVAL OR D	DISAPPROVAL OF MIS	SSION OR TASK	APPROVE	DISAPPRO	VE	
a. Name (Last, First, Middle Initial)		b. Rank/Grade	c. Duty Title/Position d. Signature of Ap		d. Signature of Approval Authority	
e. Additional Guidance:						
Page 1 of Pages Adobe Professional X						
		RISK ASSES	SSMENT WO	RKSHEET		e i Toressionar X
4. SUBTASK/SUBSTEP OF MISSION/TASK	5. HAZARD	6. INITIAL RISK LEVEL	7. CON	TROL	8. HOW TO IMPLEMENT/ WHO WILL IMPLEMENT	9. RESIDUAL RISK LEVEL
Cutting/torching	Fire, explosion	М	• Get a perm	hot work it	How:	
					Who:	



			T
		How:	
		Who: How:	
		now:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		Who:	
		How:	
		What	



RISK ASSESSMENT WORKSHEET

Risk Assessment Matrix Continuous, Likely: Occasional:	Seldom: Infrequent occurrences D H	Unlikely: Possible occurrences be improbable E M
Catastrophic: Death, unacceptable loss or damage, mission failure, or unit readiness eliminated Critical: Severe injury, illness, loss, or damage; significantly degraded unit readiness or mission capability III EHEH H Moderate: Minor injury, illness, loss, or damage; somewhat degraded unit readiness or mission capability III EHEH H III	Н	_
loss or damage, mission failure, or unit readiness eliminated I EH EH H Critical: Severe injury, illness, loss, or damage; significantly degraded unit readiness or mission capability II EHEH H H Moderate: Minor injury, illness, loss, or damage; somewhat degraded unit readiness or mission capability III EHEH H H III EHEH H H III EHEH H III EH		M L
or damage; significantly degraded unit readiness or mission capability II EHEH H Moderate: Minor injury, illness, loss, or damage; somewhat degraded unit readiness or mission capability III	M	L
or damage; somewhat degraded unit readiness or mission capability		
	L	L
Negligible: Minimal injury, loss, or damage; little or no impact to unit readiness or mission capability M L L	L	L
Legend: EH – extremely high-risk H – high risk M – medium risk L – low risk		_
13' RISK ASSESSMENT REVIEW		
a. Date b. Last Name c. First Name d. Title/Position e. Si	e. Signature of Reviewer	



15. ADDITIONAL COMMENTS OR REMARKS	
Dogo	of Dogo
Page	of Pages
Instructions for Comp	leting the Risk Assessment Worksheet
1. Mission/Task Description: Briefly describe the overall	10. Overall Risk After Controls are Implemented: Assign an
Mission or Task for which the deliberate risk assessment is	overall residual risk level. This is the highest residual risk level
being conducted.	(from block 9).
2. Date "00<<<<: Self Explanatory.	
Zi Buto 00 4444. Con Explanatory.	11. Supervision Plan and Recommended Course of Action:
	Completed by preparer. Identify specific tasks and levels of
	responsibility for supervisory personnel and provide the decision
3. Prepared By: Information provided by the individual	authority with a recommended course of action for approval or
	disapproval based upon the overall risk assessment.
conducting the deliberate risk assessment for the operation,	
training, or Task.	
	12. Approval/Disapproval of Training/Task: Risk approval
	authority approves or disapproves the mission or task based on the
	overall risk assessment, including controls, residual risk level, and supervision plan. Space is provided for the authority to provide
	additional guidance; use a continuation page if needed.
4 Sub tack/Sub Stop of Mission/Task: Priofly describe all	
Sub-task/Sub-Step of Mission/Task: Briefly describe all subtasks or sub steps that warrant risk management.	
·	
	13 . Risk Assessment Review: Should be conducted regularly.
5. Hazard: Specify hazards related to the subtask in block 4.	Reviewers should have sufficient oversight of the mission or activity
	and controls to provide valid input on changes or adjustments needed. If the residual risk rises above the level already approved,
	operations should cease until the appropriate approval authority is
C. Initial Biole Lavely Detarmains much chility and accomity	contacted and approves continued operations.
6. Initial Risk Level: Determine probability and severity. Using the risk assessment matrix (page 3), determine the level	
of risk for each hazard specified. Probability, severity, and	
associated Risk Level; enter the level into the column.	44 Foodback and Lagrana Lagranda Dustida anasifis innut an
	14. Feedback and Lessons Learned: Provide specific input on the effectiveness of risk controls and their contribution to mission



SIGNATURE:	DATE.			
NAME: _Dwayne L. Jackson DEPARTMENT: Office of Safety, Health, and Environment	TITLE: <u>Director</u> DATE:			
FOR OFFICE USE ONLY				
9. Residual Risk Level: After controls are implemented, determine the resulting probability, severity, and residual risk level.	Additional Guidance: The Block 4-9 continuance page may be reproduced as necessary for the processing of all subtasks/substeps of the mission/task. If a complete page is not utilized, write "NOTHING FOLLOWS" on the first unused row, immediately after the final item assessed.			
8. How to Implement / Who Will Implement: Briefly describe the means of employment for each control (i.e., briefing, rehearsal) and the name of the individual unit or office that has primary responsibility for control	15. Additional Comments or Remarks: Preparer provides additional comments, remarks, or information to support the risk assessment. If block 15 is used as a continuation of block 14, strike through the block number and title.			
7. Control: Enter risk mitigation resources/controls identified to abate or reduce risk relevant to the hazard identified in block 5.	success or failure. Include recommendations for new or revised controls, practicable solutions, or alternate actions. Submit and brief valid lessons learned as necessary to the persons affected.			