

# YORK MUSEUMS TRUST RISK ASSESSMENT FORM

**RISK ASSESSMENT FORM TO BE COMPLETED IN FULL THEN SENT TO HEALTH & SAFETY FOR FINAL APPROVAL AND A RA NUMBER**

**RA NUMBER: Learn0003**

LOCATION FOR RISK ASSESSMENT	RISK ASSESSMENT TITLE	PERSON OR PERSONS COMPLETING THIS RISK ASSESSMENT	DATE	PAGES
CM Workhouse	EYs / KS1 Washday workshop	Sarah Mortimer	21/08/18	1 of 2

LIST ACTIVITIES	LIST RISKS IDENTIFIED	PERSONS AT RISK	RISK LEVEL L M H	LIST EXISTING CONTROLS IN PLACE	LIST ANY ADDITIONAL CONTROLS REQUIRED	START DATE	FINISH DATE
Handling and moving tables and chairs	Falling, trapped fingers, Manual handling injury	Employee	L	Manual handling training Only moved before or after session		Ongoing school workshop	
Moving large objects inc wash tubs	Falling, trapped fingers, Manual handling injury	Employee	L	Manual handling training Only moved before or after session			
Handling artefacts	Trapped fingers, cuts on edge of washboard	Visitor	L	Supervision, First Aid Schools Risk Assessment Object condition check after pre/post use			
Washing clothes	Allergies	Employee Visitor	L	Supervision First Aid Schools Risk Assessment (Advice on allergies)			

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Cutting Soap	Allergies Blunt knife injury	Employee Visitor	L	Supervision First Aid Schools Risk Assessment (Advice on allergies)			
Use of water	Spills causing slip hazards	Employee Visitor	L	Supervision First Aid Schools Risk Assessment Provision of cleaning equipment			
Use of mangle	Trapped fingers Manual handling injury		L	Supervision First Aid Schools Risk Assessment Only moved before or after session Safety reminders given before activity			

RISK ASSESSMENT SIGN OFF BY H&S:

*H&S Advisor*  
Signature

*09/11/2018*  
Date