

**ST MARY'S SCOTTISH EPISCOPAL CHURCH DUNBLANE
RISK ASSESSMENT and "SAFE SYSTEM of WORK" PROPOSAL FOR JOB or ACTIVITY**

SSW NUMBER: _____ PROPOSER: _____ Date: _____

1. Brief description of Job/Activity (*Specify: What, Where, When, Who?*)

2. Consider and specify any risks or hazards which may arise. (*Think about: hazardous substances/occupational health, asbestos, electrical, gas, fire & ignition, trips/falls/working at height, power tools, noise, vibration, confined spaces, others*) ask yourself **"WHAT IF ...?"**

3. Describe any special equipment required for the job/activity:

4. Consider any Personal Protective Equipment (PPE) required. (*Think about: eye protection, safety helmet/cap, respirator, knee pads, overalls, etc*)

5. Describe the Safe System of Work (with reference to the risks above) for the job/activity (*expand this section with an extra sheet if required*)

6. Is this job/activity likely to become a regular, recurrent event? *Please note details & frequency.*

7. Consider insurance needs (*quote contractor policy or check the Church insurance policy*), give details:

REVIEW FOR HEALTH & SAFETY ASPECTS

e-mail or scan/copy form to Health & Safety Coordinator (safety@stmarysdunblane.org)

8. H&S comments

Signature:

Date

9. Returned to Originator:

Date: _____