PROJECT /ACTIVITY RISK ASSESSMENT FORM (RA2)

Ref. No.CfAM/11/M1

Guidance on completing this form can be found in *University Safety Guide 4 – Guide to Health & Safety Risk Assessments*, available from the H&S website A to Z (go to R).

School / Dept / Unit	Centre for Advanced Microscopy					
	A: Identifyi	ng workplace h	azards and exi	sting controls		
1. Brief summary of work activity or project assessed	A: Identifying workplace hazards and existing controls Operation of the Quanta scanning electron microscope, CfAM Room 3 (Physics Building)					
2. List significant hazards	Emission of X-rays from electron microscope.					
3. Relevant University or local guidelines or standards	CfAM User H	andbook				
4. List who might be exposed to the hazards (e.g. staff, students, visitors, consider numbers at risk)	CfAM Staff a	and Users				
5. How might they be harmed? (type of injury or health problem that might result)	Excessive exposure to X-rays will damage tissue.					
6. List control measures in place to reduce risks	Use by registered and trained staff and users only.					
Assess whether these controls are	Microscope is completely shielded to avoid X-ray emission.					
adequate, actually used in practice	Any modification of microscope is strictly forbidden.					
and regularly checked, where appropriate.	Emission is monitored annually during service by engineers from FEI Company.					
B: Assessing the level of risk and further action needed						
7.1 How severe is any injury or health effect likely to be?	Tick one box (S =score given in brackets)	Minor (1)	Serious X	Major □ (3)	Fatal ☐ (4)	
7.2. How likely is exposure to the hazard?	Tick one box (P =score given in brackets)	Very unlikely X (1)	Unlikely (2)	Possible (3)	Likely (4)	

7.3. Calculate the	Risk Score	Low	Medium	High	Very High
risk score by	(S x P) =	(4 2) Y	(4–6)	(8–9)	□(12.4¢)
multiplying the 2		(1–3)			∐(12–16)
scores in Q7.1 & 7.2					

8. Immediate further ac / reduce risk to health	ction to be taken to make the situation safe	Action to be taken by whom?	Implementation Date
9. Further action or add low as reasonably pract	ditional controls needed to reduce risk as cicable	Action to be taken by whom?	Implementation Date
Name of Assessor (please print)	Peter Harris		
Signature of Assessor		Date: 27 Mag	y 2011
Signature of Head of		Date:	

10. Date for Review	March 2012
(maximum 12 months from date of assessment)	