

Bournemouth Risk Assessment: Health and safety Management

Please tick the options that apply during your event/promotion

No.	Hazard or Risk	Tick if yes	No.	Hazard or Risk	Tick if yes
1	Access difficulties		22	Night time operations	
2	Alcoholic drinks		23	Noise concerns	
3	Animals		24	Portable tools above 110V	
4	Special props/tools		25	Sources of radiation	
5	Audiences/ Stewarding/special needs		26	Risk of infection	
6	Compressed gas/cryogenics		27	Scaffolds, working platforms etc	
7	Confined space e.g. mines, sewers		28	Smoking	
8	Crowds, public, civil unrest		29	Special needs e.g. elderly, disabled	
9	Children/ young people		30	Special affects e.g. snow, smoke, dry ice, rain	
10	Camera operations: cranes, cables, steadicam		31	Stunts	
11	Use of derelict buildings		32	Vehicles/motorcycles- filming of or filming from etc	
12	Electricity e.g. generators, ground cables		33	Water e.g. work in or near	
13	Environmental-waste disposal: liquids or solids		34	Weapons	
14	Excavation		35	Weather- extremes of	
15	Explosives/pyrotechnics/fireworks		36	Possibility of violence	
16	Physical/psychological effects		37	Work at a height: e.g. cliff tops	
17	Fire procedures		38	Manual handling	
18	Flammable material		39	Lifting equipment e.g. fork lift truck	
19	Flying e.g. aircraft, balloons, parachutes		40	Lasers/strobe effects	
20	Food preparation		41	Other:	
21	Hazardous substances e.g. dust, fumes, oils, vapours		42		

Bournemouth Tourism Risk Assessment: Health and Safety Management cont.

Company 1	Name:										
Contact Na	ame:		Contact No:								
Description	n of activity:										
Date:											
Help/ assis	stance/ first aid require	ements:									
Hazards/Risk Please use ticked hazards to state who is at risk, the risks that are identified, and the means that will be put in place to minimise risk.											
Hazard No.	Who is at risk? (Public, participants etc.)	Main risks i	dentified	Means to minimise risk							