	Birmingham Museums			General I						
	Please answer the questions as fully as possible. Guidance: Hold the cursor over the question a help box will appear. Pleas complete relevant boxes coloured light yellow.									
	Cite:		Completed by: Lynsey Rutter							
	Site:	Weoley Castle	Verified by: Laura Cox							
	Unique Reference:	FEWC								
	Description:	Formal education session	ns to Weoley Castle							
	Does this Assessment in	clude any specific areas o	of Risk ? Activity risk assessment? Area risk assessment?				Yes Yes			
	To add a new row	above the one selected	d - select a WHOL	E row (line) click COPY, the	en click INSERT C	OPI				
1	Hazards & C	onsequences	Existing Control Measure				Probability	Degree of Risk (SxP)		
	Physical (A factor within	n the environment that can ha	rm the body without neo	cessarily touching it e.g . Vibration,	noise, heat, cold, heigh	t)				
		ground surface and	Verbal warning; running is prohited and all visitors must be aware of where they are putting their feet.					4		
	Exposure to inclement	ent weather	School groups advised to bring suitable clothing for wet/cold weather. Group will move inside if the weather presents too great a risk.					4		
	Handling replica ob	jects	Verbal Warnings given to only hold above the table and hold firmly. All children seated when handling objects and explanation of how to pass along given.				2	2		
	Falls from the walls		Verbal Warnings given. Climbing and leaning on the walls is prohibited especially the external walls of the monuments.					3		
	Wooden Sword/ Shield		any way with the	s given to never hit anoth ese. Only contact allowed Feachers to watch this to	4					
	Surrounding Vegeta	ation		, stings, thorns and berri at leaves, berries, class nt allergies.		2	2	4		

1										
Ergonomic (physical fac	ctor within the environme	ent that harms th	ne musculos	keletal system. E.g. repe	titive movement, manu	al handling, unco	mfortable workstatior			
height & poor body positioning										
Chemical (could affect a	workers health, gases e	etc which can ca	use harm th	rough skin, inhalation, inj	estion i.e.acids, carbor	n monoxide)				
Biological (i.e. bacteria, viruses, toxins: inhalation - contact with bodily fluids, ingestion: contaminated food - water or kitchen utensils)										
Psychological (Stress			on, excessiv	e workload, lack of comn	nunication, physical en	vironment in poor	/ cramped condition,			
involvement in a major incider	nt leading to post trauma	atic stress)								
Based on the a	newore the avera	ao Sovority	and Pro	bability and overal	I Initial Dick Dati	ng aro outling	ad balow			
Severi	· · · · · · · · · · · · · · · · · · ·	ige Severity		ability		lg are outlined below.				
	(y				Initial Risk		4			
2			4	2	Rating	Rating				
	What further actions are necessary to control the Risk? (in priority order)									
What further action	s are necessary	to contro	I the Ris	k? (in priority order)						
What further action	s are necessary	to contro	I the Ris	k? (in priority order)						
					Comr	nent	Status			
What further action Acti			I the Ris Owner	Target	Comn	nent	Status			
					Comn	nent	Status			
				Target	Comn	nent	Status			
				Target	Comn	nent	Status			
				Target	Comn	nent	Status			
		Action	Owner	Target	Comn	nent	Status			
	on	Action	Owner	Target Completion	Comn	nent	Status			
Acti	on	Action	Owner	Target Completion		nent	Status			
Acti	on	Action Action Su 2. 5.	Owner pporting	Target Completion Documentation	3.	nent	Status Yes / No			
Acti	on	Action Action Su 2. 5.	Owner pporting	Target Completion Documentation	3.	nent				
Acti	on	Action Action Su 2. 5.	Owner pporting	Target Completion Documentation	3.	nent	Yes / No			
Acti	on pposed actions lik	Action Action Su 2. 5.	Owner pporting	Target Completion Documentation	3.	nent	Yes / No			
Action	on pposed actions lik	Action Action Su 2. 5.	Owner	Target Completion Documentation	3	nent	Yes / No			
Action 1. 4. Consider: Are the pro- Who Might Be Harm	on pposed actions lik	Action Action Su 2. 5.	Owner	Target Completion Documentation ent hazard?	3. 6. ent Officer	nent	Yes / No			
Action 1. 4. Consider: Are the pro- Who Might Be Harm Employees	on pposed actions lik ned Group Name	Action Action Su 2. 5.	Owner	Target Completion Documentation ent hazard?	3. 6. ent Officer	nent	Yes / No			
Action 1. 4. Consider: Are the pro- Who Might Be Harm Employees Individual Employee	on pposed actions lik ned Group Name	Action Action Su 2. 5.	Owner	Target Completion Documentation ent hazard?	3. 6. ent Officer	nent	Yes / No			
Action 1. 4. Consider: Are the pro- Who Might Be Harm Employees Individual Employee Public	on pposed actions lik ned Group Name	Action Action Su 2. 5.	Owner	Target Completion Documentation ent hazard?	3. 6. ent Officer	nent	Yes / No			

Vulnerabl	e People										
Others											
Residu	Residual Hazards										
ONLY	ONLY REQUIRED IF ADDITIONAL CONTROLS TO BE IMPLEMENT: Based on the answers given ABOVE and with the CO MEASURES and ACTIONS implemented, estimate the SEVERITY and PROBABILITY of that outcome happening.										
		Haz	ard				Severity	Overall	0		
								General			
								Risk Rating			
Δςςρςς	ment of	Risk									
/ 100000											
	5	10	15	20	25			everity	Probability		
								e/negligible ill health	1 Improbable		
	4	8	12	16	20	>	2 Up to 7 days / min 3 Over 7 days / moo		2 Unlikely 3 Possible		
	3	6	9	12	15	Severity	4 Severe injury or ill		4 Likely		
		Ŭ	Ŭ	12		Sev	5 Fatality, major inju		5 Almost Certain		
	2	4	6	8	10				· · · · · · · · · · · · · · · · · · ·		
	1 2 3 4 5										
							1 - 4 Monitor and maintain controls 5 - 9 Improve controls				
	Probability 5 - 9 Improve controls 10 - 25 Cease activity until corrected										
								,			
Approv	al Secti	on									
l confirm	that the a	bove c	ontrols	s have	been put i	n place:					
Name an	d Title:		-	-		ig and E	Engagement Manager) Date Approved:		06-Apr-22		
Signature	e:		Lyns	sey Rut	ter			Revision Frequency:	1 year		
Manag	erial Rev	viow									
			cont	rol m	easures	(if appl	icable):				
Review of additional control measures (if applicable): Where the additional controls satisfactory?								Yes			
Are any	other a	dditior	nal co	ntrols	required	?			No		
					•						
Detail:											
Namo an	me and Title: Laura Cox (Museum Tear				Museum T	eam Ma	nager)	Date Approved:	04/04/2022		
Name di	u 11118.		Lau		museum I						
Signature	e:							Revision Frequency:	1 year		
	. D										
	Review			N-1							
Detail:	Detail: Some Additions to Risk assessment for running Learning session, listed above.										

Name and Title:	Will Graham, Leanring and Engagement Officer.	Date Approved:	27/04/2023					
Signature:	W.D.Graham	Revision Frequency:	1 Year					
When should this be reviewed next?								
Further Review:								
Detail:								
Name and Title: Date Approved:								
Signature:		Revision Frequency:						
When should this be r	Nhen should this be reviewed next?							