**TARS Risk Assessment Date:**

**ACTIVITY / EVENT**

|  |
| --- |
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|  |  |  |  |
| --- | --- | --- | --- |
|  | **LIKELIHOOD (Chances of occurrence)** |  | **SEVERITY (Outcome)** |
| 2 | Remote Possibility | 2 | Negligible injury |
| 4 | Unlikely | 4 | Minor Injury |
| 6 | Possible | 6 | Major Injury or Disability |
| 8 | Very Likely | 8 | Death |
| 10 | Certainty | 10 | Multiple Deaths |

|  |  |  |  |
| --- | --- | --- | --- |
|  | | **Potential Risk Level** | |
| **HAZARDS** | | **LIKELIHOOD** | **SEVERITY** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |

**Person/s at Risk**

|  |  |
| --- | --- |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
|  |  |

**Safety Precautions**

|  |  |
| --- | --- |
| **Detail all appropriate safety precautions in the table below.** | |
| **1** |  |
| **2** |  |
| **3** |  |
| **4** |  |
| **5** |  |
| **6** |  |
| **7** |  |
| **8** |  |
| **9** |  |
| **10** |  |

**Post Event Feedback**

|  |  |  |
| --- | --- | --- |
| **What went well/what didn’t work/things to do better** | | **Date Completed** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |

|  |  |
| --- | --- |
| **Assessment completed by:** |  |
| **Date:** |  |
| **Signed:** |  |
| **Position:** |  |