1. Appendix 2 - risk assessment and action plan template

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| logo-ltr | **University Of Bristol****Work-related stress risk assessment**  |
| **School / Service:** **Risk Assessment Completed by: Date:**  |
| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Issues identified - Demands(e.g.* Workloads/deadlines
* Hours and patterns of work
* Working under excessive pressures
* Individual capabilities, including training needs
* Boring or repetitive tasks
* Physical working environment (temperature/noise/light etc.)
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| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Control(e.g.* Setting working patterns
* Rigid working patterns
* Fixed deadlines
* No opportunity to use initiative or to develop skills)
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| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Support(e.g.* Staff feel that they isolated or unsupported by management/ colleagues
* Staff feel they do not have opportunities to raise concerns
* Inconsistent management
* Failure to provide supportive feedback)
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| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Relationships(e.g.* Unacceptable behaviours
* Lack of awareness of diversity and equality issues
* Low team moral)
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| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Role(e.g.* Conflicting demands or roles
* Job descriptions not accurate
* Lack of understanding on how role fits into team/organisation
* Expectation of staff working excessive hours)
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| **Description and location of hazard** | **Existing control measures** | **High/Medium/Low** |
| Change(e.g.* Staff feel ill-informed about change
* Staff feel that they have not had the opportunity on influence change
* Fear of new technology
* Lack of skills for new tasks)
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| **RISK LEVEL** | **High** | **Medium** | **Low** |
|  | High probability of long term sickness due to work related work-related stress. Immediate action required. | Medium probability of sickness due to work related work-related stress. Review risk assessment and control measures. | Low probability of work-related stress |

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| **Action Plan**  |
| **Ref No** | **Further Action Required** | **By Whom** | **By When** | **Completed** |
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| **Signature** |  |
| **Print name** |  |
| **Review date** |  |