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.) |  |  |
| **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) |  |  |
| **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) |  |  |
| **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) |  |  |
| **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) |  |  |
| **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** |  |