



Risk Assessment Form											
Division: Not applicable						Source of Risk: Incident of unauthorised entry.					
HG/CHO/NAS/Function: Corporate Function						Primary Impact Category Environmental/ Infrastructure/ Equipment					
Hospital Site/Service: Dr. Steevens' Hospital, Dublin 8, D08 W2A8						Risk Type: Operational					
Dept/Service Site: Facilities						Name of Risk Owner (BLOCKS): ADAM SMITH, MAINTENANCE MANGER					
Date of Assessment: 12.12.2022						Signature of Risk Owner: <i>Adam Smith</i>					
Unique ID No: ABC 123						Risk Co-Ordinator: Jane Doe, Facilities Supervisor					
Objective being impacted: Infrastructure and Equipment [Enabler: Corporate Plan]						¹ Risk Assessor(s): N/A					
² HAZARD & RISK DESCRIPTION			EXISTING CONTROL MEASURES			ACTIONS [ADDITIONAL CONTROLS] REQUIRED			³ ACTION OWNER		DUE DATE
There is a risk of unauthorised access due to poor access controls resulting in damage to the building, loss of property, or harm to staff.			<u>Preventative</u> 1. Security barrier at the main gate. 2. Security personnel in place 24/7. 3. Reception desk manned during office hours. 4. Main door closed after office hours.			<ul style="list-style-type: none"> Establish weekly security alarm testing. Establish check in and check out controls. Swipe access to be established to gain entry to the building including access to lifts, rooms or offices. 			<ul style="list-style-type: none"> Adam Smith, Maintenance Manager Adam Smith, Maintenance Manager Adam Smith, Maintenance Manager 		01.06.2023
			<u>Detective</u> 5. Security camera and monitored alarm in place.								01.09.2023
											31.12.2023
⁴ Inherent Risk			⁵ Residual Risk			⁶ Target Risk			Risk Status		
Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Likelihood [1-5]	Impact [1-5]	Rating [Likelihood x Impact]	Open	Monitor	Closed
4 [Likely]	2 [Minor]	8 [Medium]	3 [Possible]	2 [Minor]	6 [Medium]	2 [Unlikely]	2 [Minor]	4 [Low]	Open		

¹ Risk Assessor required for OSH risks only.

² Where the risk being assessed relates to an OSH risk please ensure the HAZARD and associated risk are recorded. Other risk assessments require a risk description only.

³ Person responsible for the action.

⁴ Rating **before** consideration of existing controls.

⁵ Rating **after** consideration of existing controls.

⁶ Desired rating **after** actions.