**Appendix 8 to Internal Regulation 6/10/2024**

**of the Rector of Akademia Ekonomiczno – Humanistyczna w Warszawie**

**[University of Economics and Human Sciences in Warsaw]**

**of 23 October 2024**

### Risk-of-Threat Assessment and Documentation Form

#### **Place of work: \_\_\_\_\_\_\_\_\_\_\_\_**

#### **Date: \_\_\_\_\_\_\_\_\_\_\_\_**

#### **Responsible person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#### **Location: University of Economics and Human Sciences in Warsaw**

#### **address: \_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Threat** | **Probability (P)** | **Effect (E)** | **Risk Level (P x E)** | **Preventive measures** | **Actions to be taken** | **Responsible person** | **Deadline** |
| 1 |  |  |  |  |  |  |  |  |
|  |
|  |
| 2 |  |  |  |  |  |  |  |  |
|  |
|  |
| 3 |  |  |  |  |  |  |  |  |
|  |
|  |

Prepared by: ………………………………….

### Instructions for completing this form:

1. **Identified threat**. Specify the identified threat related to the use of a particular room (laboratory) for as a place of work or for learning.
2. **Probability (P):**

1: 1.Very low

2: Low

3. Medium

4. High

5. Very high

1. **Effects (E)**

1: Insignificant

2: Small

3. Medium

4. Serious

5. Catastrophic

1. **Risk Level (P x E)**

1-5: **Low risk**. This risk level is acceptable and no immediate action is required, but monitoring is advisable.

6-10: **Medium risk**. Action is needed to reduce the risk. Preventive measures and checks should be implemented.

11-15: **High risk:** Actions must be taken immediately to reduce the risk of the threat. Regular checks and additional protection measures are required.

16-25: **Very high risk.** Corrective measures and work process changes are needed. Immediate action is needed to avoid serious consequences.

1. **Preventive measures**. These are actions expected to eliminate or reduce the risk level.
2. **Actions to be taken**. These are actions that must be taken to minimise the risk of the threat occurring.
3. **Responsible person**. Specify the full name of the person responsible for implementing the preventive measures.
4. **Deadline**. This is the date by which the preventive measures must be implemented.
5. This document should be revised (updated) **at least once every academic semester** in accordance with the University's occupational health and safety (OHS) rules and regulations.