



General Risk Assessment

Form RA1

(Refer to Notes for Guidance before completing this form)

School Assessment No:	R(D)SVS/The Roslin Institute
Title of Activity:	Pipetting Pointillism (002)
Location(s), Date and Time of Work:	
Brief Description of Work:	
Pipetting Pointillism is a drop-in activity for the general public.	
Participants will use variable and fixed volume micropipettes to measure small volumes of liquid onto laminated cards to create colourful artworks.	

Hazard Identification:

Hazard(s)	Present Risk Evaluation L/M/H	Control Measures (i.e. alternative work methods / mechanical aids / engineering controls etc.)	Risk Evaluation after control L/M/H
Liquids & pipette tips: Could cause eye injuries	L	Participants will be trained to use pipettes safely. Activity will be closely supervised by trained staff. Liquids used are non-hazardous solutions of food colouring in water. Event first aiders will be called in the unlikely event of any injuries occurring.	L

Engineering Controls: none required

Guarding		Extraction (LEV)		Interlocks		Enclosure	
Other relevant information (incl. testing frequency if appropriate):							

Personal Protective Equipment (PPE): Not required

Eye / Face		Hand /Arm		Feet / Legs		Respiratory	
Body (clothing)		Hearing		Other (Specify)			
Specify the grade(s) of PPE to be worn: n/a							
Specify when during the activity the item(s) of PPE must be worn: n/a							

Non-disposable items of PPE must be inspected regularly and records retained for inspection

Persons at Risk:

Academic staff	x	Technical staff	x	P'Grad students	x	U'Grad students	
Maintenance staff		Office staff	x	Cleaning staff		Emergency personnel	
Contractors		Visitors	x	Others			

Additional Information: Identify any additional information relevant to the activity, including supervision, training requirements, special emergency procedures, requirement for health surveillance etc.

All staff and students will receive training, including H&S aspects, before running the activities for the public.

Children taking part in the activities will be accompanied by a responsible adult at all times.

Assessment carried out by:

Name:		Date:	
Signature:		Review Date:	