

Risk Analysis Self Assessment Form

This form is designed to help managers assess the risks of damage, loss and injury in their workplace. It is intended to highlight any areas where action or advice is required. Completion will give you some ideas how you can improve your security and reduce crime risk at little or no cost.

Management Information and Practice		Yes	No
Q1	Have you carried out a meaningful assessment of crime and fire prevention measures?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Do you have a specific budget for the prevention of crime and vandalism?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Is there a nominated person who is responsible for recording suspicious incidents, crime and vandalism?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Do you record the nature, time, place and cost of theft and vandalism? If you log these and mark the locations on a map to identify 'hot spots', this will help you identify times and places of highest risk.	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Are these incidents reported promptly, on discovery, both internally and to the police?	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Is damage quickly made good to discourage further similar damage?	<input type="checkbox"/>	<input type="checkbox"/>
Q7	Have any areas been identified which might be particularly vulnerable to vandalism or forced entry?	<input type="checkbox"/>	<input type="checkbox"/>
Liason		Yes	No
Q1	Have you considered joining a business watch scheme to be better informed about local crime problems?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Have you considered forming or being part of a Business Action Group to work with other businesses to improve the local business environment?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Has guidance on security and damage control been sought from the Police Crime Reduction Officer?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Are you familiar with relevant local authority crime and business initiatives?	<input type="checkbox"/>	<input type="checkbox"/>

Training		Yes	No
Q1	Are staff warned to note suspicious activities?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Are staff warned to notify management when strangers are seen on the premises?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Are staff and employees trained in security awareness?	<input type="checkbox"/>	<input type="checkbox"/>
Contingency Planning		Yes	No
Q1	In the event of a break in, is there an established procedure for contacting your keyholders?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Do you have a business plan to minimize disruption to normal activities after a serious incident such as loss of computers?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Do you have established emergency procedures, such as who the receptionist might call if there is a suspicious or threatening person in reception?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Are duplicate records and back-up copies of computer files kept in a separate location?	<input type="checkbox"/>	<input type="checkbox"/>
Security of Buildings		Yes	No
Q1	Are the premises in good repair and free from flimsy construction, such as low level glazing or lightweight panelling?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Is the boundary of the premises clearly defined?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Has consideration been given to protecting or eliminating recessed doorways, concealed yards, shrubs, planted areas and similar features which can give cover to intruders?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Are all entrance doors locked and windows and skylights secured when the premises are not in use?	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Have steps been taken to restrict easy access to the roof from points such as lower, adjacent structures, compounds, walls and down pipes?	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Are tools and ladders locked securely away?	<input type="checkbox"/>	<input type="checkbox"/>
Q7	Has a comprehensive intruder alarm system covering all the premises been installed?	<input type="checkbox"/>	<input type="checkbox"/>
Q8	Does the intruder alarm automatically notify the police via a central monitoring station?	<input type="checkbox"/>	<input type="checkbox"/>

Security of Buildings Continued		Yes	No
Q9	Does the intruder alarm system activate lights?	<input type="checkbox"/>	<input type="checkbox"/>
Q10	Is the alarm system set and unset solely by designated persons who are trained for the task?	<input type="checkbox"/>	<input type="checkbox"/>
Q11	Is the alarm system regularly maintained and inspected?	<input type="checkbox"/>	<input type="checkbox"/>
Q12	Is the alarm installer a member of the British Security Industry Association (BSIA) or the National Approved Council for Security Systems (NACOSS)?	<input type="checkbox"/>	<input type="checkbox"/>
Keys and Locking Up		Yes	No
Q1	Is there a proper system to control the issue of keys?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Is there an established 'locking up procedure' which includes checking there is no-one concealed in the building and all windows and internal doors are closed	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Do you have a procedure to monitor the arrival and departure of visitors?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Is there a procedure for periodically checking security fittings such as locks, catches and bolts?	<input type="checkbox"/>	<input type="checkbox"/>
Security During Working Hours		Yes	No

'YOU MUST HAVE A PROCESS OF ACCESS CONTROL'

Q1	Are building designed to prevent access except through controlled entrances?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Are visitors encouraged to use the main door and is this clearly signposted?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Do you have a procedure to monitor the arrival and departure of visitors?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Are visitors asked for identification and provided with passes, which are collected when they leave?	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Are employees encouraged to confront strangers they see in the building?	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Are visitors escorted to and from their destination?	<input type="checkbox"/>	<input type="checkbox"/>

Security During Working Hours Continued		Yes	No
Q7	Are members of the public prevented from entering unauthorised parts of the building	<input type="checkbox"/>	<input type="checkbox"/>
Q8	Have arrangements been made for the personal safety of staff and employees working in isolated areas?	<input type="checkbox"/>	<input type="checkbox"/>
Q9	Do you have a procedure for monitoring all the activities of contractors on your premises?	<input type="checkbox"/>	<input type="checkbox"/>
Security Outside Working Hours		Yes	No
Q1	Are special arrangements made for surveillance during vulnerable times such as holidays?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Are the premises checked by security?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Are the premises well lit when not in use?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Is external security lighting provided?	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Is there natural surveillance from surrounding buildings or passing members of the public?	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Is there a caretaker on site?	<input type="checkbox"/>	<input type="checkbox"/>
Q7	Is the caretaker easily contactable?	<input type="checkbox"/>	<input type="checkbox"/>
Q8	Can the caretaker quickly contact the security company, police and fire service?	<input type="checkbox"/>	<input type="checkbox"/>
Q9	Are cleaning operators supervised or suitably vetted?	<input type="checkbox"/>	<input type="checkbox"/>
Theft		Yes	No
Q1	Are there secure storerooms or containers for securing attractive items such as audiovisual equipment, computers and videos?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Are valuable items always placed in secure storage when not in use?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Are rooms containing valuable equipment kept locked when not in use?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Is equipment marked so as to identify the owner and are signs displayed to this effect to deter thieves?	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Are cash holdings kept to a minimum?	<input type="checkbox"/>	<input type="checkbox"/>

Theft Continued		Yes	No
Q6	Is cash counted out of sight?	<input type="checkbox"/>	<input type="checkbox"/>
Q7	Are staff and employees advised on the need to safeguard personal property?	<input type="checkbox"/>	<input type="checkbox"/>
Q8	Is money removed from premises overnight?	<input type="checkbox"/>	<input type="checkbox"/>
Q9	Have special arrangements been made to protect items of particular interest to thieves, such as food stocks, shop supplies, tools and solvents?	<input type="checkbox"/>	<input type="checkbox"/>
Q10	Are secure worktop fittings provided for attractive portable equipment?	<input type="checkbox"/>	<input type="checkbox"/>

Vehicles		Yes	No
Q1	Are vehicles fitted with an approved alarm and/or immobilising device?	<input type="checkbox"/>	<input type="checkbox"/>
Q2	Do you have a policy to ensure that employees do not leave company valuables in vulnerable vehicles?	<input type="checkbox"/>	<input type="checkbox"/>

Now that you have completed the assessment make a list of all the questions you answered **NO** and list them under the three headings below.

1. Those that can be implemented at little or no cost (NOW)
2. Those that can be completed within your current budget (THIS YEAR)
3. Those that you need to budget for in the longer term (LONGER TERM)

From this you can then work out a short long and medium term strategy to reduce the level of crime risk against your business.