



LONE WORKER RISK ASSESSMENT

Name of employee.....

Name of site.....

1.	WORKPLACE AND CONDITIONS:	YES	NO	N/A	ADDITIONAL CONTROL MEASURES:
a.	Does the workplace itself present any special risks to a person working alone? i.e outside working				Additional warm clothing provided 9 PPE) High vis provided
b.	Is there safe access and egress (exit), including consideration of emergencies?				Advice regarding lift usage in fires. Advise where emergency exits are. Keeping keys on person
c.	Can all equipment to be used during the lone working be safely operated by a lone person? i.e consider manual handling, ladder use				Lifting equipment Change of manual handling process
d.	Can all substances / hazardous materials be safely <u>handled</u> and used by a lone person?				Training provided Appropriate equipment/ materials provided Access to other substances/ hazardous materials controlled
e.	Is there a risk of accidental release of material, which could cause acute injury? i.e liquid nitro storage areas, high risk lab areas				Access controlled Laboratory safety clearance log completed
f.	Is there a risk of accidental release of material, which would need extensive decontamination?				Emergency procedures inducted External spills team in place Keep mobile phone on person
g.	Can a lone person safely do any manual handling that may be required? i.e all activities and equipment required to carry out job are within manual handling guidelines				Provision of trolley Additional PPE provided i.e gloves, Lifting equipment provided
h.	Are inexperienced workers at a higher risk due to their lack of experience, knowledge, etc.?				Supervision during induction Emergency contacts provided Competency assessed training provided Keep mobile phone on person
i.	Are adequate first-aid facilities available (access to First Aiders, first-aid kits etc.)?				Emergency contact and procedure information trained and easily accessible Universal standards for first aid, emergency exits etc in place
j.	In an emergency can help easily find and reach the lone worker? i.e access to building, communication of position				Lone worker tags Iphone emergency function Attack/ alert alarm Door access in place Keep mobile phone on person
k.	If working off-site, do you need to consider welfare issues, illumination, risk of violence etc.? i.e areas poorly lit, exposure to general public, welfare facilities available?				Torch provision Attack/alert alarm provided Iphone emergency function Agreed procedure in the event of concern or emergency Keep mobile phone on person





2.	COMMUNICATION AND SUPERVISION:	YES	NO		ADDITIONAL CONTROL MEASURES:
a.	Are there arrangements for regular contact between the lone worker and the supervisor / colleague?				Keep mobile phone on person Lone worker alarm Whatsapp set up
b.	Are automatic monitoring and warning devices appropriate and used (e.g. personal movement or inactivity alarms, radio panic alarms, etc.)?				Lone worker alarm Radio panic alarm Pagers
c.	Is there easy access to emergency communication at all times e.g., via the Department 'red' phones?				Provided with 24/7 emergency number Provided with 24/7 emergency site number Clarification of emergency services contact Site static panick alarms in place
3.	THE LONE WORKER:	YES	NO		ADDITIONAL CONTROL MEASURES:
a.	Does the lone worker have any medical condition that increases the risk of working alone? i.e Diabetes, High blood pressure, heart conditions, asmatic, allergic reactions, disability Including consideration of emergencies.				Medication to be carried with employee at all times Employee to advise QCC of any changes to wellness or condition Lone worker alarm Radio panic alarm Pagers Keep mobile phone on person
b.	Is the lone worker sufficiently experienced in the process in order that they can safely carry out the work alone?				Induction training completed Access to process information provided on site
c.	Has necessary information, instruction and training been given to the lone worker?				Inductions completed and competency assessed
d.	Is the lone worker considered competent to carry out the work alone?				Inductions completed and competency assessed
e.	Has the lone worker been provided with suitable emergency training including at least two emergency exit routes?				Inductions completed and competency assessed
4.	OTHER FACTORS (please specify):	YES	NO		ADDITIONAL CONTROL MEASURES:

Completed and reviewed by

Employee Signature..... Date Assessed.....

Manager Signature..... Date Assessed.....

Please note: Due to the confidential nature of our client's operations, we are unable to upload site specific RAMS or COSHH to the webpage. A copy of any site specific RAMs or COSHH will be available by hard copy in the site folder located on the relevant site.

