Risk Assessment

**Activity Assessed**: Lone Working **Assessment Date**: 04.08.23 **Review Date**: 04.08.24.

**Name of Assessor**: Samar Chakraborty

| **Ref. No.** | **Hazard** | **Persons at Risk and How They Might be Harmed** | **Controls Currently in Place** | **Current Risk Level** | **Further Controls Recommended** | **Action by Whom** | **Action by Date** | **Completed Date** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **L** | **S** | **R** | **Risk Rating** |
| 1 | Poor Management of Lone Workers | Lone Workers by physical or psychological injury | * Jobs that involve lone working have been identified.
* Risk assessments have been undertaken and controls put in place to minimise the hazards involved in the work activity.
* Lone workers are made aware of the findings and outcomes of the assessments.
* Emergency procedures are established and documented.
* A lone working policy is established and reviewed to ensure it is always suitable.
* Consultation/communication is established and maintained with employees on a regular basis to identify/discuss problems with lone working.
* Promotion of mental health support available through mental health first aiders
* Encourage all to report/discuss any mental health issues to the avenues available and most comfortable with
* DSE assessment identifies the risks associate to Lone workers and advise accordingly.
* Lone working devices (both apps and gen 4 devices) enhance security , health, safety and wellbeing of employees.
 | 3 | 4 | 12 | Medium | Agenda item at quarterly RM meetings and encourage communication of any issues to direct line managers.Continued communication/promotion of Mental Health issues.Check all RA’s for lone worker activities are in place and up to date.Ensure current guidance about lone worker is followed and made available for all employees and volunteers.Ensure that lone worker receive appropriate training and training records are updated yearly. Lone worker devices help to find unresponsive lone workers in case of severe injury | GW.MHFA/HR.GP/Vols/Access/Welfare/Approvals/BRC/Events/Safety.GP/SC | Already in operation.. | Ongoing  |
| 2 | Workplace Equipment/Machinery | Lone Workers by contact with moving, sharp, hot or abrasive machinery parts. Lifting/handling equipment and driving vehicles causing musculoskeletal injury.Accidents driving fleet cars causing physical injury. | * Lone workers are properly trained and familiar to use work equipment.
* All accidents/incidents/near misses are recorded and investigated.
* Emergency procedures are in place should the lone worker be injured e.g. calling in to line manager/colleague/family member and use of emergency services and are documented.
 | 2 | 5 | 10 |  Low | First aid kits and first aid training made available for all lone workers.Manual handling and driver training for RM’s and other applicable lone workers – ensure this training is up to date/refreshed if necessary. Safe driver training is released on BHS Wise for all identified drivers. | GP, GW & CD.CD & SP. | Ongoing. | Ongoing |
| 3 | Violent attack | Lone Workers by physical or psychological injury | * Lone workers have received instruction and training in dealing with confrontational/violent situations.
* Instances of violence (either physical or verbal attack) are recorded and investigated.
* Promotion of mental health support available through mental health first aiders
* The organisation promoting positive working to avoid conflict and dealing with unacceptable behaviour
* Encourage all to report/discuss any mental health issues to the avenues available and most comfortable with
 | 2 | 5 | 10 | Low | Ensure all training on conflict resolution for lone workers is up to date/refreshed if necessary. Continue to communicate/promote Mental Health issues. | HR.HR/MHFA. | Ongoing | Ongoing |
| 4 | Illness including Mental Health | Lone Workers may suffers from fatigue, stress/anxiety, depression or other mental health problems  | * Pre-employment medical questionnaires are completed prior to employing new workers.
* Employees are encouraged to report any illnesses that may affect their ability to work alone safely or if illness strikes whilst in the field.
* Emergency procedures are established and documented.
* Promotion of mental health support available through mental health first aiders
* Encourage all to report/discuss any mental health issues to the avenues available and comfortable with
* DSE assessments identifies if lone workers suffer from any mental health issues.
 | 2 | 5 | 10 | Low | Continued to communicate/promote mental health and wellbeing through Aviva digital health programme, HR support, and necessary training. | HR/MHFA.GP/SC. | Ongoing. |  |
| 5 | Slips/Trips/Falls | Lone workers may suffer from fracture, cuts or other injury for slips/trips/ and falls  | * DSE assessment provides guidelines on how to set up workstation and the sizes of room require for free movement
* Home workers are advised through DSE checklist to minimise the risks of slips, and trips by keeping work area clear of obstructions on/under and around desk area, spillages and trailing wires.
* H&S induction provides information related to Slips/Trips and Falls and reporting procedures
* Information and guidance are available in the training materials e.g. how to reach high safely using ladder.
 | 2 | 5 | 10 | Low | Ensure that lone workers receive DSE training available on BHS wiseLone worker devices (Chaperone) help to find unresponsive lone workers in case of severe injury  | GP/SCGP | Ongoing10/2023 | Ongoing12/2023 |
| 6 | Electricity | Lone workers may experience electrical shock or burn injury due to get in touch of live electricity | * Lone workers are advised to visually check socket, leads and plugs for damage prior to use in the DSE checklist
* Lone workers are advised to have PAT test for portable electrical equipment.
 | 2 | 5 | 10 | Low | Ensure that lone workers receive DSE training available on BHS wiseLone worker devices (Chaperone) help to find unresponsive lone workers in case of severe injuryHome workers to ensure that there are a sufficient number of outlet sockets and suitable 13A single phase 240v AC electrical supply available. DSE assessment are used as evidence of compliance. | GP/SCGP | Ongoing12/2022 | Ongoing12/2022 |
| 7 | Fire  | Lone workers are at risk of burn injury or death from fire that may occur due to gas explosion, cooking fire, electric radiators/heaters and heat wave.  | * Home workers are advised to install suitable smoking/fire detector or fire extinguishers at home.
* DSE assessment ensures that home workers comply with above requirements.
* Home workers receive instructions and guidance throughout the DSE and risk assessment to maintain good housekeeping, to have suitable fire detector or fire extinguisher equipment and to communicate to emergency services in the event of fire
* Home worker required to regularly check escape route and fire exit door to ensure that they are not obstructed
 | 2 | 5 | 10 | Low | Home worker’s risk assessment and DSE are reviewed annually or if a significant change occurs and corrective measures are taken to minimise any risks. | GP/SC | Ongoing | Ongoing |

Risk Assessment Information

**Evaluating Risk:**

This risk assessment is based on the 5 Steps to Risk Assessment model and uses numerical values to calculate the levels of risk.

In practice this means we simply assign a value of 1-5 for the likelihood of the hazard causing harm and a value of 1-5 for the severity of the harm should it occur (1 being the lowest value, 5 being the highest). The two figures are then multiplied to achieve a risk rating score: L x S = R.

For example, if a worker changes a light bulb in an indoor ceiling light using a stepladder twice a year then we can rate the likelihood as ‘1’ due to the low frequency of the activity being performed. However, as injuries as a result of falls from height can be serious (even from relatively short distances) then we can rate the severity as a ‘4’, Using the calculation we multiply 1 x 4 = 4. This produces a ‘Very Low’ Risk Level on the Risk Rating Key.

Another example would be for a worker who regularly has to change light bulbs as a part of their job, sometimes outside and in adverse weather conditions. The likelihood would increase to ‘5’, reflecting the regularity of the action and the potentially increased chance of falling while working outside on uneven ground and in bad weather, while the severity would remain at ‘4’. Again using the calculation, we multiply 5 x 4 = 20. This returns a Risk Rating of High on the Risk Rating Key.

**Likelihood and Severity Key:**

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| --- | --- |
| **Likelihood** | **Severity** |
| **Rating** | **Guide words** | **Rating** | **Guide words** |
| 1 | Extremely unlikely | 1 | No/Minor harm |
| 2 | Unlikely | 2 | Moderate harm |
| 3 | Likely | 3 | Serious harm |
| 4 | Extremely likely | 4 | Major harm |
| 5 | Almost certain | 5 | Catastrophic |

**Risk Rating Key:**

|  |  |  |
| --- | --- | --- |
| **Score** | **Risk Level** | **Description** |
| **1-4** | **Very Low** | These risks are considered acceptable. No further action is necessary other than to ensure that the controls are maintained. |
| **5-10** | **Low** | No additional controls are required unless they can be implemented at very low cost (in terms of time, money and effort). Actions to further reduce these risks are assigned low priority. Arrangements should be made to ensure that the controls are maintained. |
| **11-15** | **Medium** | Consideration should be given as to whether the risks can be lowered, but the costs of additional risk reduction measures should be taken into account. The risk reduction measures should be implemented within a defined time period. Arrangements should be made to ensure that the controls are maintained, particularly if the risk levels are associated with harmful consequences. |
| **16-20** | **High** | Substantial efforts should be made to reduce the risk. Risk reduction measures should be implemented urgently within a defined time period and it might be necessary to consider suspending or restricting the activity, or to apply interim risk controls, until this has been completed. Considerable resources might have to be allocated to additional controls. Arrangements should be made to ensure that the controls are maintained, particularly if the risk levels are associated with extremely harmful consequences and very harmful consequences. |
| **20+** | **Very High** | These risks are unacceptable. Substantial improvements in risk controls are necessary, so that the risk is reduced to an acceptable level. The work activity should be halted until risk controls are implemented that reduce the risk so that it is no longer very high. If it is not possible to reduce risk the work should remain prohibited. |

**Definitions:**

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| **Risk Assessment** | A systematic examination of workplace risks in 5 steps: 1) Identify the hazards, 2) Identify who might be harmed and how, 3) Evaluation the hazard (by examining current controls and recommending further controls), 4) Recording the assessment and 5) Reviewing the assessment. |
| **Hazard** | Something with the potential to cause harm e.g. tools, machinery, work equipment, substances, workstation, unsafe system of work etc. |
| **Harm** | The damage that a hazard may cause e.g. physiological effects (physical injury, ill health) and psychological factors (e.g. stress), loss of time/efficiency and damage to the premises/equipment. |
| **Likelihood** | The chance that a hazard realises its potential to cause harm. |
| **Severity** | Extent of injury, damage etc. |
| **Risk** | The probability of a hazard actually causing harm. |
| **Controls** | Measures introduced or installed to reduce to a minimum the possibility of harm to persons, plant and property. |