# **Appendix 3**

**Template - Community Lone Working Risk Assessment**

**Officer(s):**

**Date of assessment:**

**Review date:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity & Hazards | Risk rating **L x S = R** | Current Risk Controls | Additional Risk Controls | New Risk Rating **L x S = R** |
| 1. Driving:

Vehicle breakdown Accident Intruder in vehicle when unattendedUse of mobile phone Fatigue |  |  |  | Maintain vehicle properly Belong to a breakdown organisation Carry torch, phone etc for emergency Do not leave valuables in car Avoid risky areas where possible Plan your route Ensure adequate fuel in vehicle Take precautions in adverse weather. | Advise other staff where you are going Phone office if plan changesUse public transport if available |  |  |  |
| 1. Movement through public areas e.g. to/from car parks:

Attack Theft of property |  |  |  | Back down from confrontation Call for help Keep valuables secure and out of sight or disguised Surrender valuables if personal safety is at risk  | Use public transport if availableCarry attack alarm |  |  |  |
| 1. Illness or injury/accident
 |  |  |  | Alert team members if able to Ensure access to phone Take prescribed medication as directed or as needed | Contact ambulance service  |  |  |  |
| 1. Contact with third parties:

Assault Verbal abuse Threats |  |  |  | Pre-planned visit Use techniques to avoid conflict Be aware of own responsesStaff briefings and sharing information | Avoid meetings attended by people known to display threatening behaviour |  |  |  |
| 1. Manual handling

Back injury Slip, trip or fall |  |  |  | Minimise manual handling Do not attempt alone if beyond capabilitiesWear appropriate footwear Assess floor conditions (slippery, wet, rugs etc) | Use lifting aidsDon’t lift if in doubt |  |  |  |
| 1. Attack by dog or other animal:

Bites Contracting illness Shock |  |  |  | Avoid contact with animals Seek local advice before entering premises with animals  | Appropriate behaviour near animals – avoid alarming them, e.g. sudden movements |  |  |  |
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| **Assessor’s Name:** | **Signature:** | **Date:** |
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| **Clerk’s Name:** | **Signature:** | **Date:** |
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| **Likelihood** | **Severity** |
| 1 | Very unlikely (5 years or more) | 1 | Very minor injury / Very limited property damage/loss |
| 2 | Unlikely (1-5 years) | 2 | More serious injury <3 days offwork/incapacity (sprains, moreserious cuts, bruising. Injury needingmedical attention. Slight property damage/loss |
| 3 | Likely (6-12 months) | 3 | RIDDOR reportable (to HSE)injury/sickness (except fatality). More than 3 days off school. Significantproperty damage/loss |
| 4 | Very likely (1-6 months) | 4 | RIDDOR reportable (to HSE)injury/sickness affecting more than one person (excluding fatality). Major property damage/loss. |
| 5 | Certain (more than 1 per month | 5 | Single or multiple staff fatality.Catastrophic property damage/loss. |