# Centre for Cardiovascular Science

The Health and Safety department colour logo


# Lone Working Guidance Risk Assessment Form:

Refer to Lone Working Notes for Guidance before completing this form.

|  |  |
| --- | --- |
| Title | Insert name |
| School Assessment No. |  |
| Title of Activity: | Lab/ Office work |
| Location(s) of work: | State which rooms required |
| Brief Description of Work:  List activities you expect to do when late and lone working | |

## HAZARD IDENTIFICATION:

Identify all the hazards specific to the lone working activity; evaluate the risks (low / medium / high); describe all existing control measures and identify any further measures required.

Specific hazards should be assessed on a separate risk assessment form and cross-referenced with this document. Specific assessments are available for hazardous substances, biological agents, display screen equipment, manual handling operations and fieldwork.

|  |  |  |  |
| --- | --- | --- | --- |
| HAZARD(s) | RISK L / M / H | CONTROL MEASURES | RISK AFTER CONTROL L / M / H |
| **WORKPLACE:** | | | |
| Accessing the building and moving around  Transport to site | L | Do not allow anybody to tailgate you into the building. Phone security if feel unsafe. 0131 242 9290.  Sign in and out using the new sign-in system at all entrances and exits.  There is a CVS parking permit that is available on a first come first served basis.  You can apply for a parking permit. Use public transport, please change mask before entering the building. Walking or cycling is advised. | L |
| Health  Many infections are transferred through the air or by touching surfaces | M | If you are ill, coughing etc, please work from home is possible  Maintain good hand hygiene  Use either a disinfectant, such as 1% Virkon or 70% ethanol to wipe down surfaces. Wash your hands for 20 seconds after touching door handles or solid surfaces. Avoid touching your eyes or mouth.  Keep windows open if possible to increase ventilation. | L |
| Slips, trips and falls  Torn carpets, trailing cables, spills | L | Report any torn floor coverings to CVS lab management.  Ensure that any trailing cables are covered to prevent trips.  Mop up and spills immediately. Ensure that a “caution wet floor” sign is displayed. Familiarize yourself with the spills management presentation.  Do not work alone if your mobility is temporarily impaired (e.g. leg injury). | L |
| Fire or other emergency | M | Fire safety  Ensure that you have completed the Cardinus fire safety training and are familiar with emergency procedures (Raise the alarm, break glass panel and call Security 2222 or 0131 242 9290 from your phone, explain that there is a fire in QMRI and exit from the nearest fire door. Inform the fire co-ordinator, at reception, what has happened. Then wait at the designated Assembly Point for the fire fighters/ security to arrive. Do not re-enter the building until told to do so by fire brigade/ security.  Do not use naked flames or leave hot blocks unattended. Ensure that flammable material is properly stored in flame proof cabinets.  Medical concern  Inform local first aider of incident. If not available seek medical advice, go to A&E if able or if an ambulance is required call 9999.  Eye wash stations and first aid kits are located at the end of each main lab, spill kits are located in the main labs, (large yellow buckets with a black lid) and an emergency shower is available should the need arise, located next to the Skype room.  **Always inform your line manager and lab management if an incident occurs and fill out an online accident form.** | L |
| Electrical accident | L | All electrical appliances are PAT tested annually.  Inspect cables regularly for damage.  Ensure cables are not causing a trip hazard.  All electrophoresis equipment cables are sheathed.  Appliances are used at manufacturer’s specifications |  |
| Lab and office based activities |  | Whilst no additional risk related to permitted work is envisaged, the lack of colleagues and support staff (including those trained to help in the event of an incident or emergency) is acknowledged – hence out of hours contact names and numbers provided in this assessment and work limits as stated in the EbQ H&S Manual and below and the requirement of assessment of competency, by the PI, as evidenced by this document. |  |
| **PROCESS:** | | | |
| If working with human samples, consider whether this work can be done in normal hours.  State what samples you’ll be working on and reference BA form covering this work. | M | All are to be reassessed before work starts.  If working with human samples, It is strongly advised to have a HepB vaccination. Work cannot start until you have evidence of a suitable antibody titre. | L |
| Radiation  Avoid working with radiation outwith normal hours  State what isotypes working with |  | State all precautions in place |  |
| Dangerous chemicals  Try to avoid working with hazardous chemicals outwith normal hours.  List RAs with any dangerous chemicals | M | Do not use when alone.  Ensure that there is somebody around when you are using dangerous chemicals.  Check the Annexe A for any hazardous chemicals to ensure you are aware of the dangers. | L |
| Gas cylinders  Try to avoid handling compressed gas cylinders outwith normal hours  List all used |  | Ensure that you have completed Compressed gas training BEFORE you start this work  Ensure you have adequate supplies for your study.  Only attempt to change gas cylinders if you have been properly trained and signed off.  State all precautions in place |  |
| Broken glass / sharps  Mention what is used | M | Do not use microtomes when alone. Always have an onsite buddy.  Sharps injury avoidance training. | L |
| Spills and floods  Mention any particular method required to deal with hazardous spills from biological agents or chemicals used, check Annexe A. | M | You should not be using hazardous chemicals when working late and alone.  Spills training (presentation).  If a flood phone security 0131 242 9290.  Mop up any spills immediately. Use absorbent pads from the Spills kit, to contain them if necessary.  Check Annexe A for any specific hazards associated with the chemicals you are using.  Always use within a fumehood to contain hazardous chemicals. |  |
| Crush Injuries | M | Do not move any heavy pieces of equipment unless you have done the manual handling training. | L |
| Fire Hazard | M | Do not use naked flames. Check electrical equipment. Do not use highly combustible chemicals. | L |
| Electrical | M | Ensure that all equipment has been PAT tested. Check all wires and remove any combustible items away from plugs etc.  Use to the manufacturers specifications. | L |
| **EQUIPMENT:** | | | |
| List any hazards associated with the equipment you are using. | M | Use of interlocks, safety features | L |
| **VIOLENCE:** | | | |
| Identify the potential risk of violence.  Isolated site, dark etc |  | Workers should use safest forms of transport and particularly consider safety at darker or more antisocial hours.  If tailgating\* occurs, worker should not confront or try prevent tailgater, but move on to a safe place (i.e. office) and call security (29289/29290).  \*tailgating = someone following you into the building – perhaps without a pass and not signing in. |  |
| **INDIVIDUAL:** | | | |
| Identify any hazards specific yourself, which may create particular risks for lone working e.g. medical conditions, inexperience, etc.  State none if you don’t have any. |  | All workers, must discuss any potential medical condition which may impact on lone or out of hours working with their line manager.  Before commencing any work ensure UoE courses have been completed and the line manager must be confident in their abilities to achieve their task alone. |  |
| **WORK PATTERN:** | | | |
| Consider how your work pattern integrates with those of others, in terms of both time and geography. |  | Workers are encouraged to maintain a sensible work/life balance.  When work requires attendance out of hours. ensure someone you share accommodation with know what time you are expected to enter and exit the building and that they have a number to call in the event of you not returning home when expected (i.e. lab and security contact) |  |
| **WHAT TO DO IN A LOCAL EMERGENCY:** | | | |
|  |  | In the event of a minor incident that you feel confident dealing with – do so and leave a notice, if appropriate, for the next ‘user’.  In the event of an incident that you do not feel confident dealing with you can   1. Leave clear instruction to the next ‘user’ / day workers – if this does not leave a hazard for someone else to encounter 2. call your lab contacts for advice / help   Example – someone else’s equipment alarming, leaks, smell of burning but no sign of fire, suspicious activity  Security would rather be alerted to a possible issue rather than it being left.  In the event of needing to evacuate the building the worker must understand usage of ‘red fire points’ and remain nearby in order advise security (and emergency services) of their actions  Emergency service numbers (from within the QMRI)  Fire / Police 2222  Ambulance 9 999  UoE Security will pass on your emergency call  QMRI security: +44 (0)131 242 9289 or +44 (0)131 242 9290  Central security: +44 (0)131 650 2257) |  |

\* Continue on separate sheet, if necessary

## Persons at Risk:

Identify all those who may be at risk.

|  |  |  |  |
| --- | --- | --- | --- |
| TYPE | NAME | TYPE | NAME |
| Academic Staff |  | Technical Staff |  |
| Postgraduate Student |  | Undergraduate Student |  |
| Maintenance Staff |  | Office Staff |  |
| Cleaning Staff |  | Emergency Staff |  |
| Contractors |  | Visitors |  |
| Others | | | |

## Training:

Identify the level of information, instruction and training required. Consider the experience of workers.

|  |  |  |  |
| --- | --- | --- | --- |
| TRAINING: | YES | NO | N/A |
| Has necessary information, instruction and training been given? |  |  |  |
| Expand and clarify,  List courses, who signed you off as being competent. |  | | |

## Supervision:

Identify the level of supervision required.

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES | NO | N/A |
| Is suitable supervision in place? (identify all necessary supervisory measures). |  |  |  |
| Periodic telephone contact with lone workers |  |  |  |
| Periodic site visits to lone workers |  |  |  |
| Regular contact (telephone, radio, etc) |  |  |  |
| Automatic warning devices e.g. motion sensors, etc |  |  |  |
| Manual warning devices e.g. panic alarms, etc |  |  |  |
| End of task / shift contact |  |  |  |
| Other, specify |  | | |
| Expand and clarify, if necessary. |  | | |

## Additional Information:

Identify any additional information relevant to the lone working activity, including emergency procedures first aid provision.

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| Add any specifics put in place for your late and lone working. |

## Assessment carried out by:

|  |  |  |  |
| --- | --- | --- | --- |
| Assessment carried out by: | | Dates: | |
| Name: |  | Date: |  |
| Signature: |  | Review Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Line Manager: | | Dates: | |
| Name: |  | Date: |  |
| Signature: |  | Review Date: |  |