**PROMPT SHEET – This sheet should only be used for guidance, in order for you to complete your own risk assessment on personal safety.**

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|  | **Hazard**  (something with a potential to cause harm) | ✓  **If hazard exists**  **and who it could harm** | **Suggested action/control measure**  (prevention measures) This list is not exhaustive. Below are some control measures which you may find useful when completing your risk assessment |
| 1.0 | Working alone | ✓  Pupils, staff, visitors, caretaker, site manager, contractor, | Carry out a lone working risk assessment. Please refer to KCC lone working and personal safety guidance. |
| 1.1 | Dealing with intruders on site out of hours. |  | Include in lone working risk assessment. Please refer to KCC lone working and personal safety guidance |
| 1.2 | Security and locking up once the building is empty. |  | Include in lone working risk assessment. Please refer to KCC lone working and personal safety guidance. |
| 1.3 | Placed in a vulnerable position due to after hour call-outs and having to return to the building alone. |  | Include in lone working risk assessment. Please refer to lone working and personal safety guidance. |
| 2.0 | No first aid provision available, (refer to first aid guidance available on KELSI). |  | First aid provision must always be available if anyone is on site. State how to contact or what the emergency procedures are. |
| 3.0 | Electrical shocks from faulty wiring or faulty equipment. |  | Carry out a ‘working with electricity’ risk assessment. |
| 4.0 | Falls from height. (Refer to KCC Working at Height Guidance. |  | Due to this being a high risk activity, all work at height tasks will require a safe system of work in order to avoid injury. Please see ‘working at height risk assessment’.  Any work above ground level at whatever height is considered to be working at height. |
| 5.0 | Injuries incurred though vandalism – clearance of debris; storm damage; broken glass; icy surfaces; wet surfaces; drug and sex litter. |  | Ensure the correct use of personal protective equipment is used i.e. gloves when handling broken, dirty objects.  Follow safe working practices when disposing of broken glass or used needles i.e. Procedure for disposing of sharps.  As reasonably practicable, ensure all fencing is secure to stop intruders getting onto the site.  Only unblock drains; grit icy areas or clear snow, if wearing the appropriate personal protective equipment e.g. Protective boots, gloves and relevant equipment: Broom, shovel, tongs (also refer to KCC winter planning guidance for Kent schools document).  Report the incidents locally, in the defects report book, for appropriate action.  Also refer to waste management risk assessment. |
| 6.0 | Injuries due to poor housekeeping. |  | Ensure storage cupboards and rooms are adequate and suitable for purpose, so as not to over clutter; encouraging items to fall out. |

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| 7.0 | Musculoskeletal disorders (refer to manual handling policy & procedures and risk assessment). |  | Individual tasks will need specific risk assessments – see ‘ Manual handling of inanimate loads – guidance and risk assessment form  Attend manual handling training.  Ensure the correct lifting procedures are adhered too at all times.  Make sure the load is not too heavy.  Use a trolley when transporting heavy or awkward items or loads.  Age, height and level of fitness should be considered when carrying out a risk assessment. |
| 8.0 | Legionnaire disease |  | Ensure legionella training is attended.  Ensure adequate monitoring procedures and maintenance in place to prevent bacteria proliferating in the school water system.  Refer to water hygiene contractor risk assessment report for water system maintenance requirements and frequencies. |

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| 9.0 | Exposure to hazardous chemicals |  | Attend a basic COSHH awareness course.  Ensure copies of the material safety data sheets are present on purchase of chemicals.  Ensure COSHH risk assessments are carried out for each hazardous chemical used.  Ensure caretaker is trained how to use the relevant hazardous chemicals safely.  Ensure the correct personal protective equipment (PPE) is provided and used.  Monitor exposure limits periodically where necessary. |
| 10.0 | Exposure to asbestos (refer to the asbestos policy and procedures). |  | Attend a basic asbestos awareness course.  Do not carry out any work on the building without checking and signing the asbestos register.  If asbestos is present do not continue with your intended work activity.  Ensure contractors are shown work area. |
| 11.0 | Vehicle movements |  | Schools ‘pedestrian and vehicle movements’ risk assessment should include controls to reduce the risk to caretakers moving around the site. |
| 12.0 | Swimming pool maintenance |  | Ensure COSHH assessments include pool chemicals.  Ensure caretaker has undergone pool plant operator training.  Refer to the KCC guidance – ‘management of hygiene and related safety at educational establishment swimming pools’  Ensure correct PPE is provided – see also PPE checklist  Ensure manual handling task risk assessments are carried out  Ensure safe system of work is in place for pool cleaning and maintenance, including controls for slips, trips falls. Also take account of swimming ability and lone working |

**Kent County Council**

**Generic risk assessment**

**Topic/activity/operation: Caretakers personal safety.**

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| Name of establishment/school: | |  |
| Risk assessment completed by: (name)  Sign here only after giving consideration to additional control measures. | Signed:  Date: | Caretaker name: |
| Head of establishment: (name)  Sign here only after agreeing control measures and action points. | Signed:  Date: | Caretaker signature: |
| Review date: | |  |

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| **Risk rating: (Liklihood)** | **Outcome:** | | |
|  | **Insignificant injury** | **Significant injury** | **Major injury** |
| **Unlikely** | Trival risk | Low risk | Medium risk |
| **Possible** | Low risk | Medium risk | High risk |
| **Probable** | Medium risk | High risk | **STOP** |

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| **Risk level:** | | **Action and timescales:** | | | | | |
| **Trivial** | | No action required and no documentary records are required | | | | | |
| **Low** | | Consider if the risk can be reduced further. Monitoring is required to ensure that the controls are maintained. | | | | | |
| **Medium** | | Risk reduction measures should be implemented within a defined period. | | | | | |
| **High** | | Give priority to removing or reducing the risk urgent action should be taken. | | | | | |
| **STOP** | | ‘Work’ activity should NOT be started or continued until the risk has been removed or at least reduced. | | | | | |
|  | **Step 1**  What are the hazards? | **Step 2**  Who might be harmed and how? | **Step 3**  What are you doing already? | Current risk level | **Step 4**  Is anything further needed? | **Step 5**  Date further action(s) was/were completed | **New risk level** |
| By whom and by when? | Date of next review |
| 1.0 | Working alone |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 1.1 | Dealing with intruders on site out of hours |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 1.2 | Security and Locking Up once the building is empty |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 1.3 | Placed in a vulnerable position due to after hour break-ins and having to return to the building alone |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |

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|  | **Step 1**  What are the hazards? | **Step 2**  Who might be harmed and how? | **Step 3**  What are you doing already? | Current risk level | **Step 4**  Is anything further needed? | **Step 5**  Date further action(s) was/were completed | **New risk** **level** |
| By whom and by when? | Date of next review |
| 2.0 | Placed in a vulnerable position due to after hour break-ins and having to return to the building alone |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 3.0 | Electrical shocks from faulty wiring or faulty equipment |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 4.0 | Falls from height. (refer to KCC working at height a brief guide and the Ladders Guidance Notes) |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 5.0 | Injuries incurred though Vandalism – clearance of debris; storm damage; broken glass; icy surfaces; wet surfaces; drug and sex litter |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review Date:** |
|  | **Step 1**  What are the hazards? | **Step 2**  Who might be harmed and how? | **Step 3**  What are you doing already? | Current risk level | **Step 4**  Is anything further needed?  By whom and by when? | **Step 5**  Date further action(s) was/were completed  Date of next review | **New risk level** |
| 6.0 | Injuries due to poor housekeeping |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 7.0 | Musculoskeletal Disorders (Refer to Manual Handling policy & procedures and risk assessment) |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 8.0 | Legionnaire disease (KCC policy; reducing the risk from legionella in hot and cold systems within buildings) |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 9.0 | Exposure to hazardous chemicals |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 10.0 | Exposure to asbestos (refer to the asbestos management in KCC buildings document) |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
|  | **Step 1**  What are the hazards? | **Step 2**  Who might be harmed and how? | **Step 3**  What are you doing already? | Current Risk Level | **Step 4**  Is anything further needed?  By whom and by when? | **Step 5**  Date further action(s) was/were completed  Date of next review | **New risk level** |
| 11.0 | Vehicle movements |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
| 12.0 | Swimming pool maintenance |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |
|  |  |  |  |  |  | **Date completed:** |  |
| **Name:**  **Date:** | **Review date:** |