**Diss High School: Work Experience**
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**Young Person Risk Assessment**

|  |  |
| --- | --- |
|  **Company Name:** |  |
| **Address:** |  |
| **Contact number:** |  |
| **Name of supervisor:** |  |
| **Young person’s name** |  |
| **Date of Birth:** |  |
| **Organisation arranging placement:** |  |
| **Contact name:** |  |
| **Contact no:** |  |
| **Date of assessment:** |  |
| **Review date:** |  |
| **Assessor:** |  |
| **Signature:** |  |

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| --- |
| **Hazard – please mark relevant boxes with the risk rating or N/A****L – Low Risk, M – Medium Risk, H – High Risk** |
| Mechanical |  | Temperature |  | Manual handling |  |
| Violence |  | Repetitive strain injury |  | Hazardous substances |  |
| Lighting |  | Access ladders |  | Falling objects |  |
| Electrical |  | Waste storage |  | Training deficiencies |  |
| Fire |  | Work equipment |  | Heat, cold, noise |  |
| Radiation |  | Asbestos |  | Working hours |  |
| Vibration |  | Forklift trucks |  | Computer use |  |
| Other |  |  |  |  |  |

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| --- | --- | --- | --- |
|  | Yes | No | N/A |
| Has the young employee/student’s age and date of birth been recorded? |  |  |  |
| Is the young person between 16 and 18yrs old? |  |  |  |
| Is the young person (child) of compulsory school age (under 16 years)? |  |  |  |
| If yes have his/her parent(s) or guardian been consulted and informed about the company’s health and safety arrangements? |  |  |  |
| Does the individual have a disability that may affect their ability to carry out work safely? |  |  |  |
| Have all employees/students been briefed on the company policy on lone working? |  |  |  |
| Has the young employee been briefed on the company policy on violence and robbery? |  |  |  |
| Does the young person work alone? |  |  |  |
| Is there a risk of violence or robbery? |  |  |  |
| Has a mentor/supervisor been appointed to be responsible for the young person during working hours? |  |  |  |
| Is the young person expected to collect and carry cash? |  |  |  |
| Have all employees been instructed to report all incidents and near misses of violence/abuse/robbery? |  |  |  |
| Where young persons work alone, has an emergency procedure been developed? |  |  |  |
| Are all incidents, accidents, dangerous occurrences and near misses properly recorded, investigated and monitored? |  |  |  |
| Is the young person’s daily working time more than 4.5 hours? |  |  |  |
| If yes, is the young person given a break of 20 minutes for every 4.5 hours worked? |  |  |  |
| Have risk assessments been amended or developed for the employment of young persons e.g. manual handling, COSHH, DSE? |  |  |  |
| Is there a defined training programme and schedule for young persons? |  |  |  |
| Is health and safety included in the company’s induction of new employees? |  |  |  |
| Has a review date been set for this risk assessment? |  |  |  |

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| --- | --- |
| Description of work activity: |  |
|  | Recommended Actions | Date Completed |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |
| Person responsible for this action/s: |  |