

YOUNG WORKER ASSESSMENT CHECK LIST

NOTE - APPLIES TO ALL PERSONS 18 YEARS OR YOUNGER STARTING WORK WITH HARLOW COUNCIL

PLEASE RETURN TO HUMAN RESOURCES, CIVIC CENTRE

| | |
|---|---------------------------------|
| Service/Department where employed: | |
| Start date: | End date: |
| Job title: | |
| Line manager's name: | Ext: |
| | Date completed |
| 1. Induction | * Insert date or not applicable |
| The person named above has received a formal health and safety induction to include arrangements in the event of a fire and evacuation relevant to their work location. | |
| Induction on reporting an accident, injury, near miss at work | |
| Reporting acts of aggression or violence at work | |
| 2. Contact arrangement | |
| Information given on day-to-day work-related contacts. | |
| Information given on contacts for work-related personal problems. | |
| Where applicable, name and contact details of safety representative given. | |
| Young persons contact details obtained | |
| 3. Specific work restrictions | |
| Work activities which young people should be prohibited from undertaking have been clearly identified. | |
| Work activities that must be carried out under supervision have been clearly identified. | |
| Working time amendments regulations 2002 – hours of work, rest periods, breaks and days off are fully compliant with the regulations. | |
| Working with children relevant DBS or equivalent checks for the young worker has been completed | |
| Written summary of role and work to be undertaken supplied | |

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| 4. Risk assessment | | |
| Work tasks have been properly defined and explained. | | |
| Explanations have been given on how to protect their own safety and that of others. | | |
| Information has been provided about hazards, risks and precautions to be taken. | | |
| Risk assessments have been amended to take into account any additional control measures for young people. | | |
| Applicable risk assessments have been discussed in detail. | | |
| 5. First aid and accident reporting | | |
| Information given on how to obtain first aid treatment, including location of first aid box. | | |
| Information given on how to report an accident or incident requiring first aid to member of the public | | |
| As above – but when a colleague or co-worker | | |
| 6. Personal protective equipment (PPE) | | |
| Information given on types of PPE available. | | |
| Information given on how to obtain PPE, including replacement for worn items and storage facilities. | | |
| Information given on the importance of wearing PPE. | | |
| 7. Training | | |
| Training plan prepared. | | |
| Training plan review dates set. | | |
| Training working with water – suitably briefed and trained | | |
| Induction completed: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Employee's signature: | | |
| Line manager's signature: | | |
| Date: | | |