

YOUNG PERSON'S RISK ASSESSMENT

Date of risk assessment

Risk assessor's name and job title

Name of young person

Age of young person

Young person's job title

Name of young person's supervisor

Outline the general duties of young person

ASSESSMENT OF YOUNG PERSONS NEEDS AND CAPABILITY

List any illness, ailments, disability or allergies that may affect the young person

Is the young person able to understand hazards and risks and follow instructions

List any known health / learning problems that need special consideration

Briefly outline the general attitude and outlook of young person compared to the work given

Record any special considerations

SIGNIFICANT HAZARDS THAT THE YOUNG PERSON MAY ENCOUNTER (Tick all that apply and make comments below for each)

Crushing	<input type="checkbox"/>	Cuts and abrasion	<input type="checkbox"/>	Explosion	<input type="checkbox"/>	Significant noise	<input type="checkbox"/>	Falling from height	<input type="checkbox"/>
Cutting	<input type="checkbox"/>	Repetitive action	<input type="checkbox"/>	Hand tools	<input type="checkbox"/>	Significant vibration	<input type="checkbox"/>	Slips / trips and falls	<input type="checkbox"/>
Shearing	<input type="checkbox"/>	Electricity	<input type="checkbox"/>	Lifting / handling	<input type="checkbox"/>	Hazardous substances	<input type="checkbox"/>	Radiation	<input type="checkbox"/>
Entanglement	<input type="checkbox"/>	Work equipment	<input type="checkbox"/>	Fatigue / stress	<input type="checkbox"/>	Localised hot surface	<input type="checkbox"/>	Stressful postures	<input type="checkbox"/>
Trapping	<input type="checkbox"/>	Power Tools	<input type="checkbox"/>	Violence / assault	<input type="checkbox"/>	Localised cold surface	<input type="checkbox"/>	Moving vehicles	<input type="checkbox"/>
Impact	<input type="checkbox"/>	Fire	<input type="checkbox"/>	Adverse weather	<input type="checkbox"/>	Dust	<input type="checkbox"/>	Others (please list below)	<input type="checkbox"/>

RISK CONTROLS	YES	NO	N/A	NOTES
<p>Full Health & Safety induction training carried out. Induction training records are held in the office</p> <p>Formal basic safety training completed</p>				
<p>Training given in the use of the tools and equipment required for the tasks along with training for the specific tasks undertaken</p>				
<p>Hazards and safe methods of working will be explained before tasks are undertaken</p>				
<p>Suitable personal protective equipment will be provided and worn where necessary, including (list in notes section items to be used)</p> <p>Regular breaks will be taken from physical tasks to reduce fatigue</p>				
<p>General workplace housekeeping is carried out to reduce the risk of minor injuries e.g. slips / trips and ensure workplace is arranged to reduce the risks</p>				
<p>Young persons are not permitted to use certain hazardous substances or dangerous machinery and are not exposed to excessive noise, vibration or work at height. Details are given below</p>				
<p>Only suitable work will be allocated and will always be supervised</p>				
<p>Information on safe lifting techniques for specific tasks provided</p>				
<p>Young workers may feed livestock</p>				
<p>Approved by the local education authority and / or school</p>				
<p>Work in inclement weather will be arranged to minimise the risk to young workers. In strong sunlight the young worker will be advised to wear suitable clothing / hat and use sunscreen. In bad weather, wet weather clothing will be provided if necessary or work arranged indoors</p>				

CLARIFICATION OF WORK ACTIVITIES NOT TO BE UNDERTAKEN BY THE YOUNG PERSON	
List any machinery / equipment not to be operated by the young person	
List any activities / tasks not to be undertaken by the young person	
List any substances not to be handled by the young person	

FURTHER CONSIDERATIONS	
Outline any additional training that is to be provided to the young person	
Outline all PPE that is issued to the young person	
Other risk control measures required	

PARENTAL NOTIFICATION (ONLY REQUIRED IF THE YOUNG PERSON IS STILL AT SCHOOL OR UNDER THE AGE OF 16 AT THE TIME OF EMPLOYMENT)

Name of the parent / legal guardian			
Signature of parent		Date of signature	
(By signing this consent form you are acknowledging that your child named at the top of the form will undertake a range of activities as notified in the risk assessment and will be exposed to a range of common risks)			
Date parent was provided with risk assessment		Date risk assessment was received back from parent	



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