

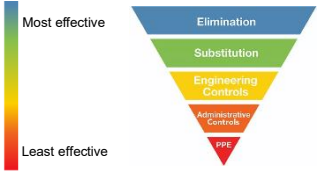
Project:	Lynch Depots	RA No:	62	Review Date
Operation / Task:	Employee Health Concern, Medical Condition, Disability or Impairment	Persons at risk:	All Employees	31/01/2027
Location / Area:	All Depots	Public at risk:	No	
Monitoring Responsibility:	Individual staff member			

KEY

S = Severity Rating

L = Likelihood of Occurrence

RR = Risk Rating



1. Negligible	1. Improbable	5	5	10	15	20	25	R Unacceptable risk, plan out or add further controls. O Acceptable only if no other method viable & with high level controls in place. Y Acceptable with suitable controls. G Acceptable, no further action required.
2. Minor Injury	2. Remote 1 – 10%	4	4	8	12	16	20	
3. Major Injury (RIDDOR)	3. Possible 10 – 50%	3	3	6	9	12	15	
4. Fatality	4. Probable 50 – 90%	2	2	4	6	8	10	
5. Multiple Fatality	5. Almost certain 90%+	1	1	2	3	4	5	

Severity

Likelihood

Activity	Hazards/Risks Identified	Risk Rating			Control Measures	Residual Risk			Responsibility
		S	L	RR		S	L	RR	
Allergies	<p>Anaphylaxis triggered by a severe allergy to:</p> <p>Possible symptoms include: Swelling of face and neck Blotchy skin eruptions</p> <p>Respiratory distress - similar to a severe asthma attack and raised heart rate could lead to unconsciousness</p> <p>Possibility of respiratory/cardiac failure in extreme cases</p> <p>Reaction triggered by ingestion / touch etc.</p>	4	3	12	<ul style="list-style-type: none"> Staff are encouraged to communicate allergies on medical health declaration forms. Where required, some products may be removed from the workplace to protect those with life threatening allergies. i.e., peanuts. Where epi-pens are required/held, locations of them in the case of an emergency are to be shared with their line manager and depot first aiders. It is the responsibility of the individual to ensure epi-pens and medication are in date and available in the case of an emergency. First aid personnel are trained in the correct procedures and use of epi-pens. First aiders must never administer medication. All staff are educated in the importance of good hygiene practices. In the event of a first aider dealing with an allergy anaphylaxis ensure the following is adhered with: <ul style="list-style-type: none"> Remove blue safety cap If the individual is conscious – place the epi pen in their hand ready for them to administer. Where the individual is unconscious – hold the epi pen at 90° approximately 10cm away with the orange tip pointing towards the 	4	2	8	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders

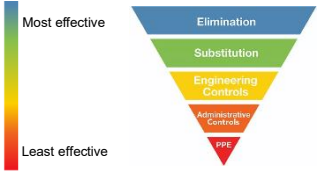
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Severity	5	5	10	15	20	25
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1	1	2	3	4	5	10
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		S	L	RR		S	L	RR	
					outer thigh. Jab the epi pen firmly into the outer thigh at a right angle. Hold firmly for 3 seconds before removing.				
					<ul style="list-style-type: none"> Dial 999 ask for an ambulance and say anaphylaxis. Epi pens must be safely disposed of in sharps bin. 				
Diabetes Type 1 (Insulin dependent) Type 2 (Non-insulin dependent)	Diabetic staff may become hypoglycaemic (Low blood sugar) which could result in: Confusion Rapid pulse Unresponsive Diabetic coma Diabetic staff may become hyperglycaemic (High blood sugar) .	4	3	12	<ul style="list-style-type: none"> Diabetic staff are encouraged to communicate their health condition on medical health declaration forms. It is the responsibility of the individual to ensure insulin and other medication is available and in date in the case of an emergency. First aid personnel are trained in the correct procedures for hypoglycemia & hyperglycemia. First aiders must never administer medication. In most cases of hypoglycemia, individuals usually recognise the 'hypo' and have emergency sugary drinks/food products to hand and/or glucose gels. If they do not improve following sugary food/drinks call 999 for emergency help. If first aiders suspect hyperglycemia, they require urgent treatment. Call 999 for emergency help and say hyperglycemia. Should individuals become unresponsive at any time, open their airway, check their breathing, and prepare to give CPR. 	4	2	8	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders
Asthma	Asthmatic staff may have asthma attacks which could include: Wheezy, coughing, tight chest	4	3	12	<ul style="list-style-type: none"> Asthmatic staff are encouraged to communicate their health condition on medical health declaration forms. 	4	2	8	Individual staff member Line Manager

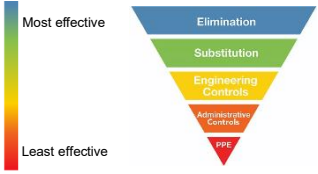
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	Fast heartbeat Dizzy, drowsy, confusion Fainting				<ul style="list-style-type: none"> It is the responsibility of the individual to ensure their inhalers and other medications are available and in date. First aid personnel have awareness training on the correct procedures for asthmatic attacks. First aiders must never administer medication. Call 999 should inhalers not relieve symptoms and advise the emergency services of the asthma attack. 				HR Manager HSQE Team Training Manager First Aiders
Epilepsy	Epileptic seizures can often be sudden and dramatic, these can result in: Rigid body Irregular breathing Uncontrolled movements Saliva at the mouth Injuries from movements such as biting tongue and cheeks. Head injuries from convulsions.	4	3	12	<ul style="list-style-type: none"> Those with epilepsy are encouraged to communicate their health condition on medical health declaration forms. First aid personnel have awareness training on the correct procedures for epileptic seizures. First aiders must never administer medication. It is recommended for individuals with epilepsy to make other members of staff at their desk aware of the health condition and any significant factors. Where epileptic seizures are caused by lighting for example, measures will be taken to reduce the risk of flicker and glares. Individuals must raise triggers with their line manager for adequate control measures to be implemented. 	4	2	8	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders
Spine, back and neck conditions	Lifting, sudden movements such as twisting, jerking can result in personal injury for those who	3	3	9	<ul style="list-style-type: none"> Those with spine, back and neck conditions are encouraged to communicate their health condition on medical health declaration forms. 	3	2	6	Individual staff member Line Manager

Owner: Head of HSQE	Version: 3	LF263
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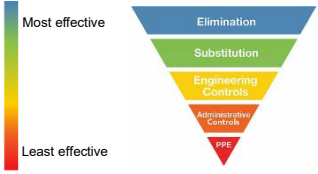
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	suffer with spine, back and neck conditions.				<ul style="list-style-type: none"> Where possible individuals who suffer from spine, back or neck conditions should avoid lifting heavy or bulky loads, repetitive tasks, bending and/or crouching, poor posture when working i.e., DSE and driving long distances. It is recommended for individuals with spine, back and/or neck conditions to make their line manager aware of the conditions for suitable control measures to be implemented. Where required duties may be altered/amended. All staff complete manual handling training and complete DSE self-assessments. 				HR Manager HSQE Team Training Manager First Aiders
Multiple Sclerosis (MS)	Symptoms include: Fatigue Difficulty walking Vision problems such as blurred vision Numbness or tingling Muscle stiffness/ spasms Problems with balance and co-ordination Problems with thinking, learning and planning	3	3	9	<ul style="list-style-type: none"> Those with multiple sclerosis are encouraged to communicate their health condition on medical health declaration forms. It is recommended for individuals with multiple sclerosis to make their line manager aware of the condition for suitable control measures to be implemented. Where required duties may be altered/amended. Where an access to work advisor is in place, Lynch will work with both the individual and advisor to best meet the needs. For example, adaptations to equipment used, disability awareness training for staff etc. See https://www.mssociety.org.uk/care-and-support/everyday-living/working-and-ms/work-ms-and-you All staff complete manual handling training. 	3	2	6	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders

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Most effective
Least effective

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Previous heart attack and stroke sufferers	<p>1 in 5 people who have had a heart attack will be readmitted to hospital for a second on within 5 years.</p> <p>Individuals who have suffered a stroke or TIA (mini stroke) are at an increased risk of having another stroke.</p>	4	2	8	<ul style="list-style-type: none"> Those who have previously suffered a heart attack or stroke are encouraged to communicate this on medical health declaration forms. First aid personnel are trained in the correct procedures for suspected heart attacks and strokes. First aiders must never administer medication. If suspected, contact 999 immediately. 	4	2	8	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders
Prescription medications	Some prescription medications have adverse reactions which could affect individuals' ability to work safely.	4	3	12	<ul style="list-style-type: none"> For individuals' safety, medications which could affect a person's ability to carry out their role safely must be disclosed to Lynch. This is to ensure that it is safe for staff to carry out their duties in the workplace. i.e., some medications you are not permitted to drive. Where blood thinner medications such as aspirin and warfarin are taken first aiders must be notified to ensure this is taken into account when administering first aid. This should also be disclosed to emergency services if contacted. Should you be in doubt, please speak to HR and/or your line manager. 	4	2	8	Individual staff member Line Manager HR Manager HSQE Team Training Manager First Aiders

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Risk Assessment Prepared By: Paul Lynch **Signature:**  **Date:** 31/01/2026

Risk Assessment Reviewed By: Daniela Rizvan **Signature:**  **Date:** 31/01/2026

