**Please note: This only applies to staff who feel that they need to return to campus to continue their research.**

It was developed for people working in Health and social care settings but can be related to Higher Education. Extremely vulnerable and vulnerable people need not complete the risk assessment. Please note USW has no access to the information you provide in this risk assessment.

|  |  |  |
| --- | --- | --- |
| Have you completed the risk assessment? | Y | N |
|  | | |
| Are you designated as extremely vulnerable, are self-isolating or living with anyone who has been advised to self-isolate? | Y | N |
| **If your NHS Risk Assessment score is > 7 and/or you are extremely vulnerable, are self-isolating or are living with someone who is self- isolating, please do not proceed further** | | |

|  |  |
| --- | --- |
| **Name of returner** |  |
| **Designation** | *e.g. Staff member; PhD student;* |
| **Name of project PI, if PhD studentship name of Director of Studies** |  |
| **Project title** |  |
| **Project funder** | *e.g. external funding source, USW funded* |
| **Year/stage of project/study** | *i.e. 1st, 2nd, 3rd, etc. or 1st year of 3-year project, etc.* |
| **Location of research activity** | *e.g. room number or numbers, campus location, lab based, library space, specialist room, etc.* |
| **Date of last risk assessment (if needed) for experimental work** |  |
| **Please include your risk assessment reference/number (mandatory requirement, ASSESSNET risk assessment reference)** |  |
| **Does this require updating/refreshing?** | Yes/no |
| **Is the risk assessment still ‘current’ or does this need amending in light of Covid19 or other changed working circumstances (e.g. will there be lone working now when previously that would not be a problem)?** |  |
| **If relevant, can you confirm that you have read, understood and will adhere to lone working rules and policy?** | Yes/no |
| **Justification for return to on-site research activity:** | |
| *Please add any justification for returning to the lab in sufficient detail to enable the reviewers to make an informed decision (append details is easier). This can include specific milestones that the project needs to meet, funding issues, and other deadlines that will assist with any decision-making* | |
| **Statement of support from the Director of Studies** | |
| *The DoS will need to make a statement agreeing or not the return to site (n/a if no students within the project)* | |
| **How many people will be needed to support any experimental work** | *i.e. is the research team or supervisor needed to be present; any technician, frequency that support is needed?* |
| **What will the frequency of work be?** | *Hours and days of week?* |
| **Can the research activity be undertaken via a shift pattern, e.g. morning or afternoon, every day, alternate days, etc.?** | *Add details of any possible pattern of shift work* |
| **Will any experimental work need to be completed before 09.00 or after 17.00?** |  |
| **Do you have ‘[SafeZone](https://estates.southwales.ac.uk/property-services/security-parking/security-and-safezone/)’ loaded onto your mobile phone?** |  |