

DRIVERS RISK ASSESSMENT

LOCATION/DRIVER:	ASSESSMENT REF:
DRIVER/TASK(S):	DATE OF ASSESSMENT:
	ASSESSOR'S NAME:
	ASSESSOR'S SIGNATURE:
NO OF DAYS PER WEEK (circle) <1 2-3 3-4 >5	APPROX ANNUAL BUSINESS MILEAGE (circle) <10K 10-15K 15-25K >25K

DRIVER/PEOPLE/PERSONS AT RISK (✓ Tick as appropriate)					
General			Specific - Vulnerability		
1. Employees/Staff	5. Customers		9. New & Expectant Mothers		13. Shift/Night Workers
2. Co-Workers	6. Clients		10. Young Persons		14. Temporary/Volunteer Workers
3. Public	7. Patients		11. Mobile Workers		15. Homeworkers
4. Pupils/Students	8. Service Users/Residents		12. Disabled People		16. Visitors

EVALUATION OF RISK					
DRIVER	YES	NO	N/A	RATING	COMMENTS/NOTES
1. Is driver assessment carried out as part of recruitment process?					
2. Is appropriate category of licence held for the vehicle(s) to be driven?					
3. Are all drivers aware of requirement to report any driving licence changes such as penalty points on licence or loss of licence?					
4. Are current driving licence checks completed and recorded for the driver?					
5. Are drivers involved in the carriage of dangerous goods in receipt of a current 'ADR' licence?					
6. Is any additional training required for driving vehicle?					
7. Is driver induction and vehicle familiarity training completed?					
8. Is any additional training required for operating ancillary equipment, e.g. tail-lift, lorry-mounted crane etc.?					
9. Has the Driver received any additional training ie Advanced Driver Training/Defensive Driving Training etc?					
10. Are all drivers aware of and carry out compulsory daily vehicle checks?					
11. Are all drivers aware of routine and pre-use safety checks for vehicle ancillary equipment?					
12. Are arrangements for breakdown of vehicle communicated?					
13. Are excessive working hours likely to cause driver fatigue?					
14. Are drivers medically fit to drive (a formal medical examination is part of the LGV licence acquisition/renewal process)?					

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15. Do all drivers satisfy the eyesight requirements of the highway code?					
16. Are drivers likely to be under the influence of prescription/other drugs?					
17. Are vehicle accident investigations documented and reviewed?					
18. Is a programme of driver assessment/training in place, pre/post accident?					
EVALUATION OF RISK					
ADDITIONAL QUESTIONS FOR LGV OR HGV DRIVERS -	YES	NO	N/A	RATING	COMMENTS/NOTES
19. Are working hours likely to be in contravention of either items 20 & 21?					
20. Are all drivers aware of the requirements of the 'Drivers Hours & Tachograph Regulations'?					
21. Are all drivers aware of the requirements of the 'Working Time & Road Transport Directives'?					
EVALUATION OF RISK					
VEHICLE	YES	NO	N/A	RATING	COMMENTS/NOTES
22. Are appropriate vehicles provided for the job?					
23. Is maintenance carried out in accordance with requirements of Operator Licensing and as manufacturer's recommendations?					
24. Are maintenance records maintained for company vehicles in accordance with requirements of Operator Licence?					
25. Is driver or vehicle handbook maintained in each vehicle?					
26. Are drivers aware of basic safety checks?					
27. Are goods and/or equipment stowed securely and safely in/on vehicle?					
28. Are seatbelts fitted to all seating positions and adjustable?					
29. Are head restraints fitted and adjustable?					
30. Is driver aware of vehicle defect reporting procedure?					
31. Is a hands free kit fitted for mobile phone use?					
32. Is the driver briefed not to use mobile phone (or similar) whilst driving?					
33. Does vehicle have adjustable driver position/provides for good posture?					
EVALUATION OF RISK					
JOURNEY	YES	NO	N/A	RATING	COMMENTS/NOTES
34. Are journeys planned with route information available?					
35. Are hazards on route likely to impact on journey been identified?					
36. Are breaks planned into longer journeys (in line with Drivers Hours Regulations, where applicable)?					
37. Are journey times and distances reviewed on a regular basis?					
38. Do you try to avoid periods of peak traffic flow?					

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39. Do driver schedules take account of the highway code?						
40. Are suitable arrangements instigated for adverse weather?						
Additional Observations						

ACTION PLAN			
ITEM NO	REMEDIAL ACTION	PERSON RESPONSIBLE	COMPLETION DATE

RISK RATING	
Low Risk	No impact on driver safety or the safe operation of the vehicle
Medium Risk	Uncontrolled risk identified additional control measures required
High Risk	Unacceptable risk identified, changes in driver, vehicle or journey management required

Assessors Signature		Assessors Name (Print)	
Drivers Signature (as Applicable)		Drivers Name (as Applicable)	
		Review Date	