**Communication and Emergency Plan – Remote or Isolated Work in Research Environments**

Working alone or in isolation can increase the likelihood of workplace hazards or risks occurring and, in those cases, when incidents occur, the consequences can be more severe. These risks can be effectively managed by ensuring they are understood, and workers are adequately prepared for the challenges that working alone/remote or in isolation may present.

This plan is to be completed by the UQ worker and attached to the UQSafe risk assessment and/or an approval request to supervisor/manager. It is recommended that the UQ worker have a copy of the plan with them during their work and leave a copy with a friend/family member.

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| **Location of Work in Isolation**  |    | **UQSafe ID #**   |    |
| **Contact** | **Name** | **Phone number** |
| **UQ Security** | Security/SafeZone App | 53333/SafeZone App |
| **Buddy/friend/family contact**  |   |   |
| **Supervisor/Manager/Assessor** |   |   |
| **First aid officer**  |   |   |
| **WHSC / Lab Manager** |   |   |
| **Emergency services**  | Fire/police/ambulance  | 000  |
| **Poison information line**  | -------------------------------------------- | 13 11 26  |

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| Check | Yes | No | NA |
| Risk assessment |
| Has a risk assessment been completed in UQ Safe?  |  |  |  |
| Has the risk assessment considered issues such as length of time the person is working alone, time of day, and/or location, and the nature of the work?  |  |  |  |
| Have identified hazards been eliminated or adequately controlled? |  |  |  |
| Has the worker received information, instruction, and training on the tasks to be performed? |  |  |  |
| Has the worker received information, instruction, and training to respond in the event of an emergency? |  |  |  |
| Has the worker been provided with adequate information and instruction to be able to work in isolation safely? |  |  |  |
| Communication/Emergency |
| Is there a system is place for communication with the workers working alone? |  |  |  |
| Does the worker have the means of communicating in the event of an emergency? E.g. mobile phones and/or duress alarms.  |  |  |  |
| Does the activity require regular contact to be maintained with workers while the work is being completed? If yes, what is the agreed frequency of contact with the workers?................................................ |  |  |  |
| Does the employer/supervisor know of the location of workers when performing isolated work? |  |  |  |
| Is the worker aware of the location of the emergency supplies where the work will be conducted (e.g. spill kits and first aid equipment)? |  |  |  |
| Maintenance |  |  |  |
| Is the machinery and equipment planned for use, being regularly maintained? |  |  |  |

\*\*\*If you have answered **‘NO’** to any of above, work should not continue until this is considered in the risk assessment for the planned remote or isolated work\*\*\*

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| **Supervisor/assessor**  |    | **Date**   |    |