

Last Minute Risk Analysis

Name	Company/ Department	Signature for approval
1. LMRA leader		
2. Reporter		
3. Participant		
4. Participant		
5. Participant		
6. Participant		
7. Participant		
8. Participant		

Last Minute Risk Analysis

Working safety is not
only for your own benefit



Last Minute Risk Analysis

Circle
appropriate
answer

Location/Plant		6. Do I consider the planned working method to be safe?	yes / no
Work description		7. Do I have the correct personal protective equipment, and am I going to wear it?	yes / no / n.a.
Work permit number		8. Do I have the correct and tested tools?	yes / no / n.a.
Stop point number		9. If the work of others around me impacts my own task, or vice versa: have we consulted each other?	yes / no / n.a.
Date:		10. Have the personal padlocks been placed?	yes / no / n.a.
	Circle appropriate answer	11. Do I consider my workplace to be safe?	yes / no
1. Operation: Do I know the relevant operation instructions / production programme and/or Job Safety Analysis for performing the task, and do I adhere to these? Contractor / Technical Services: Do I know the content of the work permit (and the Job Safety Analysis if present) for performing the task, and do I adhere to this?	yes / no / n.a.	NOTE: You may only start your activities once you have answered all the questions with the answered "yes" of "n.a." If this is not the case, you must talk to your direct superior about the measures to be taken.	
2. Is my workplace tidy?	yes / no	What could be improved next time?	
3. Do I know where to find the emergency exit(s), escape route(s), emergency shower(s), fire extinguisher(s), assembly and roll-call areas or reasonably airtight rooms? And do I know the wind direction?	yes / no	_____	
4. Have I made sure that the plant section where work is to be performed has been rendered safe?	yes / no / n.a.	_____	
5. Do I know what the work is, and have I understood everything?	yes / no	When the alarm is sounded the completed LMRA card is no longer valid	