Template only MUST modify to site conditions

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| Site / Area: |  | Date of Assessment |  | Risk Assessment # | **031RA** |
| Completed by (name) |  | Signature |  | | |
| In Consultation with: |  | Signature |  | | |
| Identify / describe activity, equipment, area or event you are assessing: | | | **STORAGE & USE OF ALCOHOL-BASED HAND RUBS / GELS** | | |
| Authorised by: |  | Signature: |  | Date: |  |
| **In conjunction with this risk assessment, training / education and development of a relevant SOP may be required.** | | | | | |
| **Step 1:** **Identify the hazard/s / Impact:**What do you believe are the hazards? What could happen? | | **Step 2: Assess the potential risks:**  What do you believe are the risks?  How could this happen? | | **Step 3: Reducing the risk:**  What do you believe can be done to reduce the risk?  Controls | |
| **Hazardous Chemical**   * Splash | | * Irritation to eyes * Corneal damage * Irritation to skin (for those with sensitive skin) | | * Metered dose dispenser used * Appropriate dispenser locations (e.g. dispensers can be wall mounted or in supervised locations) * Avoid placing at eye level * Workers and others are educated on safe use and handling * Where anyone reports skin irritation, this must be reported so an alternative product can be made available * Product not to be used on inflamed, broken or sensitive skin | |
| **Hazardous Chemical**   * Ingestion | | * Minor toxicity – headache, nausea, vomiting, dizziness * Moderate / Severe toxicity – hypotension, unconsciousness, coma, respiratory problems | | * Metered dose dispenser used * Where possible, lockable dispenser bottles are installed * Kept out of reach of children or any other person who may ingest the substance * Used under supervision * All containers are appropriately labelled | |
| **Hazardous Chemical**   * Deliberate or unintentional misuse | | * Persons swallowing / inhaling due to nature of illness and / or cognitive impairment * Illness * fire | | * Ensure workers and others use both hands to dispense hand gel. * Spills are cleaned up immediately | |
| **Hazardous Chemical**   * Sudden / unexpected discharge (contents under pressure) | | * Irritation to eyes / skin | | * Ensure all containers are appropriately labelled * Used under supervision (for children or any other person deemed at risk) * Kept secured at all times * Keep containers away from sunlight and excessive heat * If keeping containers in the vehicle, keep out of direct sunlight and in an insulated cooler bag. * To be stored below 30°C. | |
| **Hazardous Chemical**   * Disposal of containers | | * Fire | | * Keep containers away from sunlight and excessive heat * If keeping containers in the vehicle, keep out of direct sunlight and in an insulated cooler bag. * To be stored below 30°C. | |
| **Gravity**   * Spillage / splash onto floor | | * Slips resulting in sprains / strains * Bruising * Broken limbs | | * Ensure workers and others use both hands to dispense hand gel. * Spills are cleaned up immediately | |
| **Other**   * Fire | | * Burns to person * Damage to property | | * Firefighting equipment available * Bottles are not stored or used near open flames or ignition sources * Emergency procedures are implemented at the worksite * If unsure of how much a person / student has consumed, contact Poisons information hotline on 13 11 26 | |
| **Other** | |  | |  | |
| **Review hazard / risk assessment if task or circumstances change & at intervals appropriate to the level of risk (minimum 5 years)** | | | | | |

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| **Step 4: Monitor & Review:** | | | | | | | | |
| Were the controls effective? | | | | Were there any unforeseen hazards / incidents? | | | | New controls |
| Yes |  | No |  | Yes |  | No |  |
|  | | | |  | | | |  |