Template only MUST modify to site conditions

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| --- | --- | --- | --- | --- | --- |
| Site / Area: |       | Date of Assessment |       | Risk Assessment # | **032RA** |
| 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 |
| **Biological*** Water Pond – depth
 | * Falling in pond
* Getting wet during activities
* Drowning
 | * Student supervision by teacher in charge. Depending on students’ needs additional support may be required. To be assessed on the day
* Spare clothes available
* Area is fenced with lockable gate and locked at all times when not in use

Student education prior to entering pond regarding use and behaviourContinuous monitoring* Any issues to be reported immediately to Officer
* Senior First Aiders on site
* **Council Regulations – check with local council for any specific requirements**
 |
| **Biological*** Water Sedimentation
* Hygiene
 | * Contaminated Water
* Infection
* Disease
* Blue/Green Algae
 | * Pond water is filtered with pump
* Adequate provision for adequate hand washing – younger pupils should be seen to wash their hands
* No eating in the pond area
* Do not allow students to touch any part of their face with their hands before hands are washed
* Any algae scum should be removed, avoiding skin contact

Workplace Inspections conducted on area 6 monthlyWater testing if required* Personnel Protective Equipment available
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| **Biological*** Insects
 | * Mosquito borne diseases –Ross River
 | * Water is filtered via filtration pump system
* Citronella plants
* Periodic water testing if required
* Frogs placed in pond
* Fish placed in pond
 |
| **Biological*** Exposure to Plants
 | * Allergies
 | Senior First Aiders on site* If required parents to be informed of any issues
 |
| **Electricity*** Frayed cords
* Faulty appliances
* Over loading of power sockets
* Damaged powerboards
* Overheating of equipment
 | * Burns
* Fire
* Explosion
* Contact with exposed wires
* Electric Shock
* Electrocution
 | * Visual Inspections
* Pump is tested and tagged every 12 months
* RCD is push button tested 6 monthly and time tested every 2 years

Documentation to be maintained* Pump placed in cage for security and protection for students
* Electrical cords placed in conduit underground to prevent slips, trips and falls
 |
| **Gravity*** Rocks around perimeter (area sandy)
 | * Slips, trips, falls
* Cuts and abrasions
 | * Area to be checked weekly. If rocks are sandy, area to be swept
* Ensure perimeter does not become obscured and area around the pond does not deteriorate
* Area on Preventative Maintenance Schedule
* Any issues to be reported to Officer immediately
 |
| **Extreme Temperatures*** Extreme heat
* Extreme cold
* Rain
* Lightening
* Floods
 | * Sunburn
* Lightning
 | Hats, sunscreen availableArea not accessible during extreme weather conditions |
| **Other** | *
 | *
 |
| **Review hazard / risk assessment if task or circumstances change & at intervals appropriate to the level of risk (minimum 5 years)** |
| **Step 4: Monitor & Review:** |
| Were the controls effective? | Were there any unforeseen hazards / incidents? | New controls |
| Yes | [ ]  | No | [ ]  | Yes | [ ]  | No | [ ]  |
|  |  |  |