Template only MUST modify to site conditions

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| Site / Area: |       | Date of Assessment |       | Risk Assessment # | **039RA** |
| Completed by (name) |       | Signature |       |
| In Consultation with: |       | Signature |       |
| Identify / describe activity, equipment, area or event you are assessing: | **BANDSAW** |
| 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 |
| **Electricity*** Frayed / loose cords / plugs
* Faulty appliances
* Damaged switches
 | * Electric shock
* Electrocution
* Fire
* Equipment Failure
* Equipment Damage

  | * Residual Current Devices (RCD’s) tested regularly, and records retained
* Testing and Tagging
* Interlock fitted
* Emergency stop fitted
* Preventative Maintenance Schedule
* Fire extinguishers / first aid kits available.
* When not in use the equipment is locked out / isolated.
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| **Airborne Contaminants*** Dust
 | * Asthma
* Irritation
* Injuries
 | * Dust extraction
* Preventative Maintenance
* Pre-operational checks
* Personal Protective Equipment (PPE) (dust mask, eye protection)
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| **Hazardous Manual Task*** Sustained or awkward postures
* Repetitive movement
* Stacking / storage
 | * Incorrect lifting, pushing, pulling, holding & restraining
* Sprains & strains
* Overuse syndrome
* Fatigue
 | * Trolleys / sack trucks available for moving the bandsaw.
* Trolleys are available for moving items if required
 |
| **Gravity*** Dusty floors
* Inappropriate footwear
 | * Slip, trip, fall
* Concussion
* Fracture
 | * Enclosed / Steel Capped Footwear (dependent on site requirements)
* Housekeeping
 |
| **Machinery & Equipment*** Unguarded blades
* Parts disintegrating and / or being ejected
* Sharp edges – moving or stationary
 | * Amputations
* Lacerations
* Contusions
* Dislocations
 | * Keep clear of moving parts.
* Adequate guarding
* Preventative Maintenance Schedule
* Pre-operational checks
* Personal Protective Equipment (PPE) (Safety shoes, Eye Protection)
* Lock out / Tag Out
* Cut resistant gloves to be used for maintenance activities.
* Adequate safe work zone set up around the machine
 |
| **Other** | *
 | *
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| **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 | [ ]  |
|  |  |  |