|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **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** |
| **In conjunction with this risk assessment, training / education and development of a relevant SOP may be required.** |
| **Step 1:** **Identify the hazard/s:**What do you believe are the hazards?(Refer Risk Assessment Guideline (015G)) | **Step 2: Assess the risks:**What do you believe are the risks?(Refer *Risk Assessment Guideline (015G)*) | **Step 3: Reducing the risk:**What do you believe can be done to reduce the risk?(Refer *Risk Assessment Guideline (015G)*) |
| **What could cause harm?** | **What could go wrong?** | **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.
 |
| **Airborne Contaminants*** Dust
 | * Asthma
* Irritation
* Injuries
 | * Dust extraction
* Preventative Maintenance
* Pre-operational checks
* Personal Protective Equipment (PPE) (dust mask, eye protection)
 |
| **Noise*** Prolonged Exposure
* Sudden Exposure
 | * Hearing impairment
* Hearing Loss
* Poor Communication
 | * Isolate bandsaw where practicable
* Personal Protective Equipment (PPE)

Ear PlugsEar Muffs  |
| **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** |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Authorised by:** |  | **Signature:** |  | **Date:** |  |

**Review hazard/risk assessment if task or circumstances change and at intervals appropriate to the level of risk (minimum 5 years).**

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| **Step 4: Monitor & review:**(Refer to hazard sheet)**Please tick Yes or No** |
| **Were the controls effective?** | **Were there any unforeseen hazards/ incidents?** | **New controls** |
| **Yes** | **[ ]**  | **No** | **[ ]**  | **Yes** | **[ ]**  | **No** | **[ ]**  |
| **DETAILS** | **DETAILS** | **DETAILS** |
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| --- | --- | --- | --- | --- | --- |
| **Name:** |  | **Signature:** |  | **Date:** |  |