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| **Date of assessment:** |  | **Site / Area:** |  | **Risk Assessment #:** | **043RA** |
| **Department/Area:** | |  | | | |
| **Identify / describe activity, equipment, area or event you are assessing:** | | | **CIG Transmig 195 Welder** | | |

| **Step 1:** **Identify the hazard/s:**What do you believe are the hazards?(Refer hazard sheet) | **Step 2: Assess the risks:**  What do you believe are the risks?  (Refer hazard sheet ) | **Step 3: Reducing the risk**: What do you believe can be done to reduce the risk? (Refer hazard sheet ) |
| --- | --- | --- |
| **What could cause harm?** | **What could go wrong?** | **Controls** |
| Electrical | * Worker or student could get electrocuted or receive an electric shock from poorly maintained/damaged plant * Electrical installation could be impacted and damaged * Wiring could cause an electrical fire * Student could receive a shock from the Earth Connection on the welding plant * Welding flash/sparks | * The plant undergoes regular electrical inspections * The main power distribution board is RCD protected * Workplace inspections are conducted to identify defective items * Workers and students are adequately training in the safe operation of the plant. * Workers and students wear required PPE and welding shield. |
| Burns | * Worker or student could receive a burn from hot mig wire | * Workers and student are trained in the safe use of the plant and associated equipment * PPE is provided in the form of welding gloves * First aid and cold running water is available if required. |
| Fumes | * Asthma * Irritation to the lungs | * Welding bays have fume extraction system fitted * Mask is available on request |
| Noise | * Potential hearing loss/impairment * Workers/students cannot communicate due to noise | * Hearing protection is available if required * Workers/students are trained on the dangers of workplace noise |
| Manual Handling of the plant and moving product on/off the plant | * Bending/stooping to pick up items * Moving projects on/off the welding table * Replacing Argon gas bottles | * Trolleys are available for moving items if required * All workers and students are trained in safe manual handling techniques |
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| **Completed by (name):** |  | **Signature:** |  | **Date:** |  |
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| **In consultation with (name):** |  | **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:** |  |