|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Site / Area:** |       | **Date of assessment:**  |  | **Risk Assessment #:** | **066RA** |
| **Completed by (name):** |       | **Signature:** |       |
| **In Consultation with** |       | **Signature:** |       |
| **Identify / describe activity, equipment, area or event you are assessing:**  | **PANEL SAW** |
| **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** |
| **Machinery & Equipment*** Operation of the Plant (Mechanical Hazard)
 | * Laceration or amputation to a worker/others fingers or hand on the cutting blade
* Worker/other becoming entangled in moving parts of the plant
* Worker/other being struck by the moving table
 | The plant is fitted with the manufacturers guarding * Exclusion zones around machinery are marked on the floor

Regular workplace inspections are conductedWorkers are trained in plant maintenance and all equipment is “locked-out” electrically when maintenance is undertaken  |
| **Electricity*** Electrical installation could be impacted and damaged
* Wiring could cause an electrical fire
* Unable to stop the plant in an emergency (Operational controls and e-stop)
 | * Electrocution
* Electric shock
* Fire
 | The plant undergoes regular electrical inspectionsThe main power distribution board is RCD protected and checked regularlyWorkplace inspections are conducted to identify defective items Plant is fitted with standard on/off control panel and twist/lock-off style emergency stop switch  |
| **Airborne Contaminants*** Dust
 | * Asthma
* Irritation to the lungs
* Worker/other receiving an eye injury from flying particles
 | The panel saw is connected to the main extraction system and unit is regularly maintained Paper dust masks are available on requestEye protection is worn by all workers and others when using the plant  |
| **Noise** | * Potential hearing loss/impairment
* Workers/others cannot communicate due to noise
 | Hearing protection is available if required Workers/others are trained on the dangers of workplace noise  |
| **Hazardous Manual Tasks*** Sustained or awkward postures
* Limited work space available
* Poor work area design Bending/stooping to cut timber
* Moving projects on/off the cutting table
 | * Sprains/strains
 | Plant is set at a suitable height to minimise stoopingTrolleys are available for moving items if requiredAll workers and others are trained in safe manual handling techniques  |
| **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).**

|  |
| --- |
| **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** |
|  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name:** |  | **Signature:** |  | **Date:** |  |