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| **Site / Area:** |       | **Date of assessment:**  |  | **Risk Assessment #:** | **070RA** |
| **Completed by (name):** |       | **Signature:** |       |
| **In Consultation with** |       | **Signature:** |       |
| **Identify / describe activity, equipment, area or event you are assessing:**  | **PHOTOCOPIER** |
| **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*** Flexing of cord
* Damage to cord
 | * Electric shock
* Electrocution
 | Test and Tagging of electrical equipmentRCD’s installed and testedWorkplace inspections conducted |
| **Hazardous Manual Tasks** * Inadequate lighting
* Limited work space available
* Bending to stack papers / fix jams
 | * Musculoskeletal injuries
* Sprains / strains
 | Hazardous manual task training provided to staff three yearly Sack truck/trolley provided for moving boxes of paper |
| **Airborne Contaminants*** Changing toners
* Exposure to fumes
 | * Inhalation of airborne toner dust
 | Workers aware of safe handling of toners as per manufacturers recommendationsPhotocopier is placed in a well ventilated room / area. Where not possible, exhaust fans are installed. |
| **Machinery & Equipment*** Touching hot parts of machine
 | * Burns
 | Workers are aware of components that cause burnsRepair and service work is only conduct by trained service technicians |
| **Gravity*** Location of electrical cords
 | * Slips, trips and falls
 | Electrical cords secured to wall or copier to minimise tripping hazards  |
| **Noise** * Constant photocopier noise irritating workers/loss of ability to concentrate
 | * Anxiety due to constant ‘white noise’
 | Where possible, photocopiers are placed away from workers (separate room or work-area)  |
| **Other** | *
 | *
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| **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:** |  |