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| --- | --- | --- | --- | --- | --- |
|  **Site / Area:** |       | **Date of assessment:**  |  | **Risk Assessment #:** | **031RA** |
| **Completed by (name):** |       | **Signature:** |       |
| **In Consultation with** |       | **Signature:** |       |
| **Identify / describe activity, equipment, area or event you are assessing:**  | **STORAGE AND USE OF ALCOHOL-BASED HAND RUBS / GELS** |
| **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** |
| **Hazardous Chemical*** Splash
 | * Irritation to eyes
* Corneal damage
* Irritation to skin (for those with sensitive skin)
 | * Metered dose dispenser used
* Appropriate dispenser locations (e.g. dispensers can be wall mounted or in supervised locations)
* Avoid placing at eye level
* Workers and others are educated on safe use and handling
* Where anyone reports skin irritation, this must be reported so an alternative product can be made available
* Product not to be used on inflamed, broken or sensitive skin
 |
| **Hazardous Chemical*** Ingestion
 | * Minor toxicity – headache, nausea, vomiting, dizziness
* Moderate / Severe toxicity – hypotension, unconsciousness, coma, respiratory problems
 | * Metered dose dispenser used
* Where possible, lockable dispenser bottles are installed
* Kept out of reach of children or any other person who may ingest the substance
* Used under supervision
* All containers are appropriately labelled
 |
| **Hazardous Chemical*** Deliberate or unintentional misuse
 | * Persons swallowing / inhaling due to nature of illness and / or cognitive impairment
* Illness
* fire
 | * Ensure workers and others use both hands to dispense hand gel.
* Spills are cleaned up immediately
 |
| **Hazardous Chemical*** Sudden / unexpected discharge (contents under pressure)
 | * Irritation to eyes / skin
 | * Ensure all containers are appropriately labelled
* Used under supervision (for children or any other person deemed at risk)
* Kept secured at all times
* Keep containers away from sunlight and excessive heat
* If keeping containers in the vehicle, keep out of direct sunlight and in an insulated cooler bag.
* To be stored below 30°C.
 |
| **Hazardous Chemical*** Disposal of containers
 | * Fire
 | * Keep containers away from sunlight and excessive heat
* If keeping containers in the vehicle, keep out of direct sunlight and in an insulated cooler bag.
* To be stored below 30°C.
 |
| **Gravity*** Spillage / splash onto floor
 | * Slips resulting in sprains / strains
* Bruising
* Broken limbs
 | * Ensure workers and others use both hands to dispense hand gel.
* Spills are cleaned up immediately
 |
| **Other*** Fire
 | * Burns to person
* Damage to property
 | * Firefighting equipment available
* Bottles are not stored or used near open flames or ignition sources
* Emergency procedures are implemented at the worksite
* If unsure of how much a person / student has consumed, contact Poisons information hotline on 13 11 26
 |
| **Other** | *
 | *
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| **Authorised by (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:** |  |