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| **Site / Area:** | |  | | **Date of assessment:** |  | **Risk Assessment #:** | **095RA** |
| **Completed by (name):** | |  | | **Signature:** |  | | |
| **In Consultation with** | |  | | **Signature:** |  | | |
| **Identify / describe activity, equipment, area or event you are assessing:** | | | | | **Washing Machine** | | |
| **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 Manual Tasks**   * Sustained or awkward postures * Loading / Unloading washing machine | | * Musculoskeletal injuries * Sprains * Strains * Repetitive Strain Injury (RSI) * Slips, trips, falls | | * Trolleys | | |
| **Electricity**   * Electric short * Faulty appliance | | * Electric shock * Electrocution * Burn * Fire | | * Competent person conducts maintenance & installation * Visual Inspection of equipment prior to use * Test and tag of equipment if not hard wired * Residual Current Device (RCD) * Electrical Certificate of Compliance (COC) provided where electrical work undertaken | | |
| **Machinery & Equipment**   * Uncontrolled release of hot water * Not checking equipment before use * Not following or familiar with instructions for use of equipment | | * Burns * Lacerations * Fire | | * Visual pre-checks * Test and tag of equipment where not hard wired * If commercial washing machine, should be hard wired through an isolating switch * Residual Current Device (RCD) * Fire equipment readily available | | |
| **Hazardous Chemicals**   * Incorrect use of chemicals | | * Bacteria * Burns * Irritation | | * Personal Protective Equipment (PPE) * Safety Data Sheets (SDS’s) | | |
| **Gravity**   * Wet floor from washing transfer | | * Slip / trip / falls | | * Wet floor signage * Spills cleaned up immediately * Non slip flooring * Trolleys for transfer of washing | | |
| **Biological**   * Machine not operating at optimum temperatures * Cross contamination between dirty and clean items | | * Bacteria * Infection | | * Temperatures monitored and recorded * Maintenance Schedule in place * Delineation between dirty and clean areas | | |
| **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:** |  |