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| **Site / Area:** |       | **Date of assessment:**  |  | **Risk Assessment #:** | **116RA** |
| **Completed by (name):** |       | **Signature:** |       |
| **In Consultation with** |       | **Signature:** |       |
| **Identify / describe activity, equipment, area, or event you are assessing:**  | **Cricut Maker / Machine** |
| **In conjunction with this risk assessment, training / education and development of a relevant SOP may be required.****Machine is not intended for use by children under 12 years of age.** |
| **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** |
| **Electrical** | * **Electric shock**
* **Death**
* **Fire**
 | * All new items to be fitted with a “new to service tag” as per the electrical procedure
* Tested & tagged annually
* Always check cords prior to use. Do not use if cords are damaged, cut, broken, or frayed
* Only use approved Cricut power adapters
* Operate only as instructed, do not place fingers or other objects in the machine while connected to an electrical power, or while machine is powered on or during cutting process
* To be used indoors only and in dry areas.
* Always turn machine OFF before unplugging from the electrical outlet. Disconnect electrical power by unplugging the cord before cleaning and servicing
* All power-points protected by RCD’s that are checked regularly
* Firefighting equipment is available
* Trained first aiders are available
 |
| **Gravity*** Cords across walkways
 | * Slips, trips, and falls
 | * Cords are to be secured and not crossing any walkways
 |
| **Machinery & Equipment*** Sharp blade
 | * Serious cuts / lacerations
 | * Only staff to operate the machine
* Machine is to only be used for intended crafting purposes
* Staff are aware of the procedures in changing the blade. Staff must follow SOP and not permit students to remove/replace blades.
* Blade is stored in the protective housing.
* Prevent blade contact with hands and body
* Different blades used for different operations.
 |
| **Machinery & Equipment*** Entrapment (tool carrier moves horizontally within the machine, could trap fingers)
 | * Bruising of fingers
* Serious injury through clothing being dragged in
 | * Keep clothing, hair (including any relevant accessories) and jewellery away from moving parts
* Keep hands free of pinch points on the machine (note symbols printed on the machine)
 |
| **Machinery & Equipment*** High temperature of heat press
 | * Burns
 | * Only staff operate the machine away from students.
* Always use correct operating procedures.
* Staff use heat protective mat
* Staff ensure the heat stand and cover is always in use
* . Always use on sturdy stable surface
* Avoid use on heat sensitive surface
* Protect surface with Cricut pressing mat
* Always return to safety base when not in use
* Use in a well-ventilated area where air temperature does not exceed 35°C
 |
| **Machinery & Equipment*** Hit by moving object (Workpiece can move quickly in and out of the machine, could hit operator)
 | * Paper cut
 | * Operators to stand clear when machine is in use
* First aid is available
 |
| **Hazardous Manual Tasks**Moving and carrying the Cricut Machine to different locations | * Sprains, strains
 | * It is recommended to set up in one location to eliminate the need for moving it. Cricut Machine to be placed on a flat and stable surface. Make sure your workspace has sufficient space in the front and back of the Machine to allow the cutting mat to move through the cutting Machine.
* If Cricut Machine has to be moved, place in a box and move the box following correct manual handling techniques
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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:** |  |