|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Site / Area: |       | Date of Assessment |       | Risk Assessment # | **065RA** |
| Completed by (name) |       | Signature |       |
| In Consultation with: |       | Signature |       |
| Identify / describe activity, equipment, area or event you are assessing: | **Pan Brake – Hand Operated** |
| Authorised by: |       | Signature: |       | Date: |       |
| In conjunction with this risk assessment, training / education and development of a relevant SOP may be required. |
| **Step 1:** **Identify the hazard/s / Impact:**What do you believe are the hazards?What could happen? | **Step 2: Assess the potential risks:**Template only MUST modify to site conditionsWhat do you believe are the risks?How could this happen? | **Step 3: Reducing the risk:**What do you believe can be done to reduce the risk?Controls |
| **Machinery & Equipment*** Operation of the Plant (Mechanical Hazard)
 | * Crush, nip or trap injury to a persons fingers or hand
* Worker injured while conducting maintenance on the plant
* Worker / others receives a laceration from handling sheet metal
* Eye injury from metal that may fracture / fragment from the clamping and bending process
 | * Regular workplace inspections are conducted
* Hands are kept clear at all times during operation of the plant
* Worker/students are provided with personal protective equipment (PPE)
* When plant not in use, the clamping bar and bending beam actions are locked-out.
* Operators to removal all jewellery, tuck in loose clothing and tie back long hair.
 |
| **Hazardous Manual Tasks*** Poor work area design
* Limited workspace available
 | * Bending/stooping to pick up products
* Moving projects on/off the cutting table
 | * Plant is set at a suitable height to minimise stooping
* Trolleys are available for moving items if required
* All workers and / or students are trained in safe manual handling techniques
 |
| **Machinery & Equipment*** Hit by moving object
 | * Contusions
* Concussion
* Sprain / strain
 | * Safe working zone around the plant has been clearly defined by yellow safety lines (or similar)
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| **Gravity*** Slips, trips & falls
 | * Sprains, strains
* abrasions
 | * Nonslip footwear worn
* No cords affecting walkways or work areas immediately around the plant
* Procedures are in place for the disposal of all waste materials around the pan brake.
 |
| **Other:** |  |  |
| **Review hazard / risk assessment if task or circumstances change & at intervals appropriate to the level of risk (minimum 5 years)** |
| **Step 4: Monitor & Review:** |
| Were the controls effective? | Were there any unforeseen hazards / incidents? | New controls |
| Yes | [ ]  | No | [ ]  | Yes | [ ]  | No | [ ]  |
|  |  |  |
| Name: |  | Signature |  | Date |  |