|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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** |
| 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 |
| **Electricity*** Flexing of cord
* Damage to cord
 | * Electric shock
* Electrocution
 | * Test and tagging of electrical equipment
* RCDs installed and tested
* Workplace inspections conducted
 |
| **Hazardous Manual Tasks** * Inadequate lighting
* Limited workspace 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 recommendations
* Photocopier 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 burns
* Repair 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:** |  |  |
| **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 |  |