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| --- | --- | --- | --- | --- | --- |
| Site / Area: |       | Date of Assessment |       | Risk Assessment # | **071RA** |
| Completed by (name) |       | Signature |       |
| In Consultation with: |       | Signature |       |
| Identify / describe activity, equipment, area or event you are assessing: | **Plasma Cutter** |
| 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 |
| **Electrical** * Frayed / loose cords
* Cutting cords
 | * Worker / others could get electrocuted or receive an electric shock from poorly maintained/damaged plant
* Electrical installation could be impacted and damaged
* Wiring could cause an electrical fire
* Worker / other could receive a shock from the earth connection on the Plasma cutter
 | * The plant undergoes regular electrical inspections
* The main power distribution board is RCD protected
* Workplace inspections are conducted to identify defective items
* Workers / others are adequately training in the safe operation of the plant
* Workers /others wear required PPE and welding shield
 |
| **Machinery & Equipment*** Burns
 | * Worker or others could receive a burn from the hot plasma cutting tip
* Burns from molten metal being cut.
 | * PPE is provided in the form of welding gloves and apron
* First aid and cold running water is available if required.
* Complete Hot Work Permit.
 |
| **Radiation*** Arc rays
 | * Damage to eyes
* Burns
 | * Protect eyes with welding masks fitted with filtered lenses
* Protect body with appropriate safety garments
* Adequate shields or curtains are installed.
 |
|  **Airborne Contaminants*** Fumes
 | * Asthma
* Irritation to the lungs
 | Welding bays have fume extraction system fittedMask is available on request |
| **Noise*** No hearing protection
* Noisy machinery
 | * Potential hearing loss/impairment
* Workers/others cannot communicate due to noise
 | Hearing protection is available if required Workers/others are trained on the dangers of workplace noise  |
| **Hazardous Manual Tasks*** Manual Handling of the plant and moving product on/off the plant
 | * Bending/stooping to pick up items
* Moving projects on/off the welding table
* Sprain/strains
 | Trolleys are available for moving items if requiredAll workers / others are trained in safe manual handling techniques  |
| **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 |  |