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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Site / Area: | | |  | | Date of Assessment | | |  | | Risk Assessment # | | **068RA** |
| Completed by (name) | | |  | | Signature | | |  | | | | |
| In Consultation with: | | |  | | Signature | | |  | | | | |
| Identify / describe activity, equipment, area or event you are assessing: | | | | | | | | **Whipper Snipper** | | | | |
| 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 conditions  What 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**   * Incompetent Operators | | | | | * Serious injury | | | | | * Ensure cutter guard is not damaged and is secure * Safety goggles and hearing protection to be worn while cutter is in operation * Safety footwear and substantial chaps to be worn * No loose clothing, wear gloves and Hi-Vis shirt. * Keep other people clear of work area and barricade work area if necessary * Whipper Snipper to be switched off before setting aside and immediately if cutter jams * Ensure correct fuel type is used for that specific motor | | |
| **Machinery & Equipment**   * The cutting head | | | | | * Amputations * Cuts * Abrasions | | | | | * Do not change cutting head or replace cord while motor operating. * Provide information and instruction on safe use. * Supervise any new worker until satisfied they are competent to operate the machine. | | |
| **Machinery & Equipment**   * Flying objects | | | | | * Cuts * Abrasions/contusions * Eye injury | | | | | * Wear protective clothing, steel toe capped boots, heavy-duty gloves, hard hat, full visor and safety glasses. * Ensure the deflector (guard) is in place when using the cutting head. * Remove any loose objects that are in the cutting area * Ensure no other person is within 15 metres of the work area. | | |
| **Hazardous Manual Tasks**   * Sustained or awkward posture * Repetitive movement * Vibration | | | | | * Muscular skeletal injuries * White finger syndrome | | | | | * Ensure the harness is worn and properly adjusted. * Ensure workers have attended manual handling training. * Wear heavy-duty gloves. * Do not use for prolonged time, especially if experiencing tingling sensation in fingers/hand. * Ensure whipper snipper is well balanced to prevent back fatigue | | |
| **Hazardous chemicals (petrol)**   * Incorrect storage * Decanting * spills * Fire * Explosion * Hot parts * Fumes | | | | | * Inhalation may irritate people * Splash to eye * Contact with skin * Burns * Inhalation of fumes | | | | | * Safety data sheet available * Appropriate PPE available for decanting petrol * Petrol is stored in appropriate containers in a secured area (preferable flammable goods cabinet) * Do not refuel while machine is operating. * Do not refuel while machine is hot. * Check the fuel cap regularly for leaks. * Do not allow muffler to come in contact with combustible material. * Do not touch muffler. * Refuel in a well-ventilated area * Wipe up any spills * Ensure spill kit is available. * Ensure workers are aware of spill management process. | | |
| **Electricity**   * Frayed / loose cords * Water on electrical equipment | | | | | * Death * Electric Shock | | | | | * The plant undergoes regular electrical inspections (test & tag) * The main power distribution board is RCD protected and is checked regularly * Workplace inspections are conducted to identify defective items * Plant is fitted with standard on / off control panel. * Lock Out / Tag Out system in place. * Ensure cord is kept clear from the cord when in use | | |
| **Noise**   * Noisy machinery | | | | | * Hearing loss * Tinnitus * Deafness | | | | | * Wear appropriate hearing protection * Minimise use of machinery where practicable. | | |
| **Machinery & Equipment**   * Kick out | | | | | * Muscular skeletal injuries * Cuts * Abrasions | | | | | * Keep cutting blade away from fences, rocks, tree trunk etc. | | |
| **Extreme Temperature**   * Extreme heat | | | | | * Heat strain * Stroke * Dehydration | | | | | * Appropriate PPE worn when working outdoors (e.g. long sleeve tops, wide brimmed hat, sunglasses) * Cool potable water available * Take regular rest breaks * Schedule work for cooler time of the days (e.g. early morning, avoid between 11:00am and 3:00pm). | | |
| **Radiation**   * Exposure to UV | | | | | * Sunburn | | | | | * Appropriate PPE worn when working outdoors (e.g. long sleeve tops, wide brimmed hat, sunglasses) * Sunscreen available and applied as required. | | |
| **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 |  | |