**Risk Assessment for Hazardous Manual Tasks (the activity or task, the equipment used) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Workplace/Work Area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Assessment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Completed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_Date: \_\_\_\_**

**In consultation with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| ***What can harm: Hazards / Risks***    Gather all relevant information and review of past records, workers relevant experience, CCSM procedures, industry best practice, published literature; specialist advice/judgment and relevant legislation and Codes of Practice etc. | ***Reducing the risk:***  Determine the most suitable control measures to further reduce the risk.  Use ‘Hierarchy of Control’ from highest to lowest and combine multiple controls if needed to reduce risk to as low as reasonably practicable (“ALARP”)  ***Hierarchy of controls***  ***Level 1* –** Eliminate the hazards  ***Level 2*.**Substitute the hazard with something safer  Isolate the hazard from people  Reduce the risk through engineering controls  ***Level 3* -** Reduce the exposure to the hazard through administrative controls e.g training, information, supervision  Use personal protective equipment |

TICK BOXES BELOW IF APPLICABLE

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| **1 Does the task involve repetitive or sustained postures or movements?**  **(i.e following actions are done more than twice a minute or for more than 30 seconds at a timer)** | |
| Bending the back forwards or sideways more than 20 degrees  Twisting the back more than 20 degrees  Any visible backward bending  Bending the head forwards or sideways more than 20 degrees  Any visible bending of the head backwards  Twisting the neck more than 20 degrees  Working with one or both hands above shoulder  Reaching forwards or sideways more than 30cm from the body  Reaching behind the body  Squatting, kneeling, crawling, lying, semi-lying or jumping | Twisting, turning, grapping, picking or wringing actions with fingers, hands or arms  Standing with most of the bodies weight on one leg  Working with the fingers close together or wide apart  Very fast movements  Bending of the wrist  Other repetitive or sustained postures (list below) |
| **2. Does the task involve forces?** | |
| Lifting, lowering or carrying  Carrying with one hand or one side of the body  Exerting force with one hand or on one side of the body  Push, pulling or dragging  Gripping with the fingers pinched together or held wide apart | Using a finger grip, pinch grip, or an open handed grip to handle a load  Holding, supporting, or restraining any object, person, animal or tool  Exerting force while in an awkward posture for example,  supporting items while arms or shoulders are in an  awkward posture, or moving items while legs are in an awkward posture |
| **3. Does the task involve long duration?** | |
| (i.e the task is done more than 2 hours over a whole shift or continually for more than 60 minutes at a time) Yes No | |
| **4. Does the task involve high force?** | |
| Lifting, lowering or carrying heavy loads  Pushing or pulling objects that are hard to move or hard to stop  Using a finger-grip or an open handed grip to handle a heavy or large load  Exerting force at the limit of the grip span  Needing to use two hands to operate a tool designed for one hand  Holding, supporting or restraining a person, animal or heavy object  Exerting force with a non-preferred hand | Two or more people needed to be assigned to handle a heavy bulky load  During the application of high force, the body is bent,  twisted or otherwise awkward posture  Applying force suddenly in response to unexpected forces  Hitting or kicking  Throwing or catching  Holding, supporting or restraining a person or animal likely to move unexpectedly  Jumping while holding a load |
| **5. Tick box if workers report any of the following about the task.** | |
| The task can be done for short periods  Pain or significant discomfort during or after the task  Stronger workers are assigned to do the task | Workers say the task is physically very strenuous or difficult to do  Workers think the task should be done by more than one person,  or seek help to do the task |
| **6. Vibration** | |
| Hand,arm vibration  Whole body vibration | |
| **7. Thermal & Physical Environment** | |
| Low temperatures – cool rooms, cold rooms, or working outside in cold weather  Hot/ Humid conditions  Radiant heat – from sun  Varying floor levels  Floor in poor condition  Poor lighting  Wearing thick clothing that restricts movement while working in hot/cold conditions | Handling very cold or frozen objects  Windy conditions  Rough surfaces  Slippery floors  Steps  Poor storage conditions  Obstructions/Cramped |
| **8. Work Organisation and Work Practices** | |
| Require unusual strength  Medical/health condition  Need to frequently meet deadlines  Levels of physical work demand that workers find difficult to maintain | Specific training required  Pregnant  Sustained high levels of concentration and attention |
| **9. Other factors: (include pictures/diagrams as required)** | |
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RISK CONTROL

How are you going to fix the problems? You may need to use a combination of risk controls to eliminate or minimise the risk as far as reasonably practicable.

**Can you stop doing the task?**

**Describe how you can eliminate the need to perform the task:**

**Can you eliminate or reduce the hazard by doing one or more of these controls?**

1. Altering the design and layout of the workplace
2. Altering the nature of the load
3. Altering the nature of the items used
4. Altering the work environment
5. Altering work practices and work organisation

**What information, instruction, training and supervision is necessary to make the new procedure work properly?**

**Describe how you can eliminate or minimise the hazard:**

**1.**

**2.**

**3.**

**4.**

**5.**

**What information, instruction, training and supervision is necessary to make these controls work properly**

**Can you reduce the hazard with information, instruction, training and supervision? How?**

**Yes**

**No**

**No**

**Yes**

**When will the controls be implemented?**

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| **Short Term (immediately to within a few weeks)** | | | | |
| **Action Required** | **Person Responsible** | **Completion Date** | **Review Date** | **Action Completed** |
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| **Medium Term (within a few weeks to a couple of months)** | | | | |
| **Action Required** | **Person Responsible** | **Completion Date** | **Review Date** | **Action Completed** |
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| **Long Term (within several months)** | **Person Responsible** | **Completion Date** | **Review Date** | **Action Completed** |
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*Review risk assessment if task or circumstances change and at intervals appropriate to the level of risk (minimum 5 years).*

Risk Assessment Authorised by: Signature: Date: