

## Guillotine Risk Assessment Form

Assessor	Job Title	Assessment Date	Review Dates / Initials

**Equipment assessed/location:** Guillotine/Paper slice, First floor office

Persons at risk	Details	Frequency	Are any disabled?	Comments
Staff	All office staff	Occasionally	Yes    No	One staff member uses a wheelchair
Contractors				

Hz No.	Hazard description	How are persons affected?	Level of Risk			Existing controls	Further controls / action
			P	S	R		
1	Cuts/amputations	Users or assistants could suffer severe cuts or amputations to their hands from chopping blade.	3	5	15	None	Recommend equipment be replaced with newer safety style with enclosed blade.
2	Manual handling ■ heavy wooden base	Staff may suffer strains to upper or lower back whilst carrying this.	3	3	9	None	Arrange suitable manual handling training for all staff. Restrict amount of repositioning.
3							
4							
5							

*Probability (P)*    5=very likely, 4=likely, 3=quite possible, 2=possible, 1=unlikely

*Severity (S)*        5=fatal, 4=severe, 3=moderate, 2=slight, 1=negligible

*Risk (R)*            0-8=low risk, no action required. 9-15=medium risk, ensure adequate controls are in use. 16-25=high risk, stop operation & implement control measures