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| **Date:** |  | **New** | **** | **Revised** |  | **Page** |  |

**TRADE:** **WARDROBE INSTALLER**

|  |  |  |  |
| --- | --- | --- | --- |
| **Client:** | **Irvine & Brooks** | **Job No:** | **7869/17** |
| **Address:** | **72 Middle Street, Kingsford.** | **Supervisor:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Key:** | “1” action now | “2” action ASAP | “3” action ASAP |

**Note 1:** Refer to the general Safety Plan and your Safe Work Method Statement prepared in accordance with WHS Regulation 2017 s309-315 Part 6.4

**Note 2:** Safe work procedures shall be implemented for the supply and use of a *hazardous chemical / substance/s* on site that complies with the *current material safety data sheet* recommendations and also complies with the requirements of WHS Regulation 2017 Chapter 3 - Part 3.2

**Note 3:** All *manual tasks* are to comply with the requirements of WHS Regulation 2017 - Hazardous manual tasks Part 4.2 or Safe Work Australia - National Code of Practice for Manual Handling 2009 [or as amended] or Safe Work NSW Code of Practice - Hazardous manual tasks

**Note 4:** Management of the risk of fall from one level to another must comply with Part 3.1 and the requirements of WHS Regulation 2017 - Falls s78-80 Part 4.4

**Note 5:** **Review of Control Measures - *If there are any tasks that may be included by way of variation to the plans or an alternative approach to the set task,*** ***it is a requirement to carry out a “specific Risk Assessment” for the task or tasks.***

| Job Step / Hazard | Potential Harm | Likelihood | | | Result | | | **Priority** | Possible Controls | Responsible Person/s | Date |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Likely** | **Possible** | **Unlikely** | **Major** | **Severe** | **Minor** |
| Access to site / work areas -  Slips, trips, falls and accessibility -  Access ways not clearly defined | Slips, trips and falls |  |  |  |  |  |  | 3 | Identify the risks and plan the tasks in consultation with the *‘workers’*  Assess travel path and distance to work area  All “*workers*” to register attendance via Cape Cod QR scanner before entering the site; to read the General Construction Safety Plan signage; and to read the Site Specific Risk Assessment.  Ensure unobstructed all weather access to site and work areas.  Unload and move equipment and materials to designated area to keep footpath / work place access clear | Site Supervisor / all ‘*workers’* |  |
| Stored materials -  Slips, trips, falls and accessibility -  Access ways not clearly defined | Slips, trips and falls |  |  |  |  |  |  | 2 | Assess travel path and distance to work area  Ensure unobstructed access to work areas.  Provide and maintain barricades to isolate material and to restrict access.  Provide designated waste areas | Site Supervisor / all ‘*workers’* |  |
| Manual tasks | Muscle strain -back injuries and cuts  Over exertion or repetitive movements |  |  |  |  |  |  | 2 | Identify the risks and plan the tasks in consultation with the *‘workers’*  Use task specific trained ‘*workers’* and team lifting.  Rotate *‘workers’* and vary tasks. | Contractor / all ‘*workers’* |  |
| Exposure to noise  Plant / equipment | Hearing damage |  |  |  |  |  |  | 2 | Isolate plant and equipment.  Use appropriate PPE | All *‘workers’* |  |
| Carry materials, wardrobe doors and tools to ground floor work areas -  Slips, trips, falls and accessibility -  Manual tasks | Slips, trips and falls.  Back injuries - muscle strain / sprain |  |  |  |  |  |  | 2 | Identify the risks and plan the tasks in consultation with the *‘workers’*  Assess travel path and distance to work area  Ensure unobstructed access to work areas.  Use task specific trained ‘*workers’* - rotate *‘workers’* and vary tasks.  Limit the size of each load to easily manageable size.  SWMS | Contractor / all ‘*workers’* |  |
| Carry materials, wardrobe doors and tools up stairs -  Slips, trips, falls and accessibility -  Manual tasks | Slips, trips and falls.  Back injuries - muscle strain / sprain |  |  |  |  |  |  | 2 | Identify the risks and plan the tasks in consultation with the *‘workers’*  Assess travel path and distance to work area  Ensure unobstructed access to work areas.  Use task specific trained ‘*workers’* - rotate *‘workers’* and vary tasks.  Limit the size of each load to easily manageable size.  SWMS | Contractor / all ‘*workers’* |  |
| Installation of doors  Manual tasks | Inadequate lighting.  Back injury - muscle strain / sprain |  |  |  |  |  |  | 1 | Identify the risks and plan the task in consultation with the *‘workers’*  Provide suitable lighting.  Use task specific trained ‘*workers’*. | Contractor / all ‘*workers’* |  |
| Use of electrical powered / battery operated tools -  Electricity -  Exposure to noise -  Exposure to dust -  Hazardous chemicals -  Biological -  Plant / equipment | Electric shock or electrocution  Hearing loss  Inhalation of dust - respiratory problems.  Eye and skin irritations / allergies -  Sight damage |  |  |  |  |  |  | 2 | Identify the risks and plan the task in consultation with the *‘workers’*  Protect power lead from damage - power saw blade / sharp edges / vehicular traffic  Use stands and hooks for leads in trafficable areas  Guards to power tools fully operational.  Monitor for airborne dust/ fibres  Adequate ventilation and lighting  Use of appropriate PPE.  Use task specific trained ‘*workers’*. | Contractor / all ‘*workers’* |  |
| Site clean up on completion of work  Manual tasks  Exposure to dust -  Hazardous chemicals  Biological - | Inhalation of dust - respiratory problems.  Eye and skin irritations / allergies  Personal injuries - cuts and abrasions. |  |  |  |  |  |  | 3 | Place all associated installation waste and rubbish in the designated waste area / skip bin  Leave site / work area in a clean and tidy condition  Remove any temporary barricades if no longer required | Contractor / all ‘*workers’* |  |

I / We have consulted with Cape Cod Australia Pty. Limited and have mutually agreed on the above procedures. This risk assessment provides details on how I / we will manage my / our work on this Cape Cod Australia Pty. Limited work site.

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| Company Name: |  |  | Signed by: |  |
|  |  |  | for and on behalf of: | Cape Cod Australia Pty. Limited |
| Signed by: |  |  |  | ABN: 54 000 605 407 |
|  | (Contractor PCBU) |  |  | Builder’s Licence No. 5519 |
| ABN: |  |  |  |  |
| Address: |  |  |  |  |
|  |  |  |  |  |
| Phone: |  |  |  |  |
| Email: |  |  |  |  |