



RISK ASSESSMENT

Risk Assessment No: 1		Contract/Order No: General site application		Date: 28-Nov-11		Sheet No: 1 of 1																																															
Location: Dispenser fitting LOCATIONS – UK wide			Activity: Fitting Dispensers & refills			Person in danger : Dispenser fitter																																															
Ref No	Hazards and Effects	Control Measures Required (Including any Training\Certification required):				Risk Rating																																															
						With controls		No controls																																													
1	Chemicals Health effects from use of Chemicals/Aerosols	Use safest product available , specify in task instruction, and comply with COSHH assessment. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
2	Manual Handling Back injuries, strains, sprains	Manual handling training , suitable storage for materials and equipment. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
3	Electricity & portable equipment Electric shocks, burns, electrocution, fire	Portable appliance testing , inspect cables & plugs before use on charging devices. Check battery connections and Portable Equipment for damage. Do not use faulty/damaged equipment. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
4	Damage to utility pipes during drilling Rupture of gas, electricity, water pipework	Visual & battery powered monitor inspection prior to drilling activity. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
5	Working at Height – 2m max a/freshener dispensers Falls from height, bruises, sprains, broken bones	Only use compliant access equipment e.g. stepladders designated for the task. Do not improvise and stand on chairs/furniture. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
6	Disposal of waste. Poor housekeeping, waste hazards.	Packaging materials to client specified location , Old aerosol units removal by fitter & disposal by client. Wall dust to be place in site waste receptacle.				Low		Low																																													
7	Poor Housekeeping. Drill dust soiling locality	Utilisation of dust capture equipment – dust pan or similar holder. Report any remedial work required to site as not under our work schedule. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
8.	Site Employees Picking up tools/equipment/goods, Accidental harm & theft	Take minimum equipment onto site, remain alert at all times, regularly check equipment. Never leave equipment/ installation stock/waste items unattended. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
9.	Inappropriate fitting position Proximity to other equipment, access to other items	Review fitting location Always fit dispenser so it does not interfere with the operation of adjacent equipment,. Fitter induction Training & 6 monthly refresher seminar				Low		Low																																													
Further considerations: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Method Statement required?</td> <td style="width: 5%;">Yes</td> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 5%;">No</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Permit(s) to Work required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>COSSH Assessment(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Manual Handling Assessment(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Competency Check(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Health Surveillance required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Noise Assessment(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>PPE Assessment(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>DSE Assessment(s) required?</td> <td>Yes</td> <td><input type="checkbox"/></td> <td>No</td> <td><input checked="" type="checkbox"/></td> </tr> </table>			Method Statement required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Permit(s) to Work required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	COSSH Assessment(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Manual Handling Assessment(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Competency Check(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Health Surveillance required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Noise Assessment(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	PPE Assessment(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	DSE Assessment(s) required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	Operatives/Staff carrying out operations will be: <ul style="list-style-type: none"> • Informed of the contents/findings of this assessment • Instructed in safe working practices 			Emergency procedures: The fitter will alert the supervisor and remedial action will be established. The supervisor will alert the client. <ul style="list-style-type: none"> • Made aware of all control measures • Operate with relevant PPE 		
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			Signed:  (Person Supervising the work) For and on Behalf of: Goodenough Services			Name: Chris Hawley Date: 28-Nov-11																																															
			Assessment Prepared By: 			Name: Chris Hawley Date: 28-Nov-11																																															