

RISK ASSESSMENT



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WORK AREA	BROANMAIN PLASTICS TOOLROOM DEPARTMENT		ACTIVITY/ MACHINE	CORONA VIRUS THREAT WITHIN THE TOOLROOM AREA						
Description of hazard and hazardous event	Who might be harmed and how?	What risk controls are currently in place?	Current risk rating*			Are further controls needed?	Date to be completed by	Residual risk rating*		
			L	C	R			L	C	R
Training	TR staff in close proximity, sharing equipment. Transmission by air/ contact	Social distancing, washing hands	2	3	6	Visors, cleaning of machine handles after finishing working	02/07/20	1	3	3
Using shared machinery	TR and Quality staff. Transmission by contact.	Washing hands	2	3	6	Visors, cleaning machine handles and buttons with antibacterial wipes after use.	02/07/20	1	3	3
Cleaning and repair mould tools after breakdowns	TR staff, shop floor staff. Transmission by contact	Washing hands	2	3	6	Visors made available	02/07/20	1	3	3
Using shared pens, sharpies, measuring tools, hand tools	TR and quality staff. Transmission by contact	Washing hands	2	3	6	Try to keep their own pens in toolboxes/ pockets. Do not use pens laying around without washing hands afterwards. Split some equipment between staff, so sharing isn't necessary.	02/07/20	1	3	3

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First offs	Quality, TR and finishing staff. Parts and documents handled by number of people. Transmission through contact	Washing hands	2	3	6	Try to reduce handling.	02/07/20	1	3	3
Frequently touched surfaces	All staff. Touching surfaces like door handles, bin lids etc. Transmission through contact	Washing hands	2	3	6	Leave bins open. Leave doors open ajar, so there is no need for touching handles. Investigate something, so we can open doors with our feet.	02/07/20	1	3	3

L	Likelihood	C	Consequence
1	Extremely Remote	1	Negligible
2	Possible	2	Minor
3	Likely	3	Significant
4	Probable	4	Major
5	Definite	5	Fatality

Assessor Name:	KAMIL STEC / MATT FORD
Date:	Date of Creation: 28/05/2020 Date of latest update: 02/07/2020 Date all actions complete: 02/07/2020
No:	31D

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Further Control Measure Required	Target date	Additional comments	Person Responsible	Signature	Date Complete
01:					
02:					
03:-					