



# Risk Assessment

IMS Form048  
Issue 01 Dated Oct 2020

|                   |                                       |                     |             |
|-------------------|---------------------------------------|---------------------|-------------|
| Operation / Task: | Use of Portable Power Tools           | Name of Assessor:   | Rhys Milton |
| Assessment Ref:   | RA026                                 | Date of Assessment: | 02.01.2024  |
| Persons at Risk:  | ASW Employees                         | Reviewed by         | R. Milton   |
| Location / Area:  | ASW Health and Safety Assessment 2024 | Review date         | 31.12.2024  |

| Ref | Activity                                                                                                        | Hazard                         | Risk                                                                    | Pre-Control Risk Rating |   |     | Control Measures                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Post-Control Risk Rating |   |     | Comment |
|-----|-----------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------|-------------------------|---|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---|-----|---------|
|     |                                                                                                                 |                                |                                                                         | L                       | S | LxS |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | L                        | S | LxS |         |
| 1   | Use of Portable Power Tools including Circular saws, jigsaws, drills, hammer-drills, sanders, grinders, routers | Inappropriate Use              | Minor or serious personal injury to operator and others                 | 4                       | 5 | 20  | Operatives must be trained and competent to use the tool. The tool must be appropriate for the task. Tools shall only to be used in accordance with manufacturer's instructions, which should be available.<br>Inexperienced power tools users should be supervised or observed when first using an unfamiliar item of equipment or in an unfamiliar environment.<br>Power tools should be securely stored when not in use.<br>Operatives shall wear appropriate PPE including impact eye protection (face shield where necessary), hard hat, appropriate gloves, non-slip anti-static boots.<br>Appropriate personal protective equipment, such as safety glasses with protection<br>Pre-user checks to take place by competent person daily. All portable equipment to be PAT tested every six months. | 1                        | 5 | 5   |         |
|     |                                                                                                                 | Electricity                    | Electric burns or Shock to operator or other workers                    | 4                       | 5 | 20  | Do not use Power Tools in wet conditions unless suitable for use.<br>Check condition of lead and plug before use.<br>Use 110v or battery tools or RCD where practicable.<br>Check for hidden/buried cables before drilling/diggin etc (refer to RA020).<br>All portable equipment to be PAT tested every six months.<br>Electricity power source should be dead – tested as dead before works commencement. Locked out and Tagged Out so others are aware of ongoing works. Permit to Work system to be followed where applicable.<br>Appropriate PPE to be worn and where necessary extra precautions should be taken (i.e. rubber mat).<br>Seek Emergency Help if person suffers electric shock and burns                                                                                              | 1                        | 5 | 5   |         |
|     |                                                                                                                 | Flammable/explosive atmosphere | Fire-Explosion – severe burns or fatality to operator and other workers | 4                       | 5 | 20  | Do not use heat generating equipment without Permit.<br>Do not work near flammables, compressed gases, in explosive atmospheres or confined spaces without specialist advice.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1                        | 5 | 5   |         |
|     |                                                                                                                 | Moving Parts                   | Entanglement leading to severe injuries to operator                     | 4                       | 4 | 16  | Loose clothing, jewellery and long hair to be kept clear of moving parts.<br>Use guards where appropriate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1                        | 4 | 4   |         |
|     |                                                                                                                 | Flying debris, swarf etc.      | Eye, hand or facial injury to operator or other workers/contractors     | 4                       | 4 | 16  | Use appropriate PPE including protective eyewear or face shield and gloves (where appropriate).<br>Use guards where appropriate.<br>Keep a safe distance from other operatives when using power tools.<br>Isolate area with barriers, tape etc. where necessary.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1                        | 4 | 4   |         |



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|-----|----------|--------------------------------|----------------------------------------------------------------------------------------------------|-------------------------|---|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---|-----|---------|
|     |          |                                |                                                                                                    | L                       | S | LxS |                                                                                                                                                                                                                                                                                                                                                                            | L                        | S | LxS |         |
|     |          | Noise                          | Hearing damage to operator and other workers                                                       | 4                       | 5 | 20  | Refer to Risk Assessment RA 013 Noise. Personnel must wear PPE if they are performing a noisy task or working near a noisy activity.<br>Advise nearby persons of Noisy work activities prior to taking place so they can apply hearing protection.                                                                                                                         | 1                        | 5 | 5   |         |
|     |          | Vibration                      | Hand/Arm Vibration Syndrome (HAVS)<br>Carpal Tunnel Syndrome to operator                           | 4                       | 5 | 20  | Refer to Risk Assessment RA012.<br>Select power tools with lowest vibration levels.<br>Minimise the time individuals use the equipment (e.g. job rotation).<br>Restrict use of vibration inducing tools to recommended times (see, manufacturer's information).<br>Ensure tools are properly stored, maintained and used according to manufacturer's instructions.         | 1                        | 5 | 5   |         |
|     |          | Ergonomic                      | Musculo-skeletal injury to operator                                                                | 3                       | 3 | 9   | Ensure there is adequate room to do the job.<br>Minimise the time individuals use heavy equipment (e.g. job rotation).<br>Use jigs and suspension systems to assist the handling of heavy equipment (e.g. large grinders).<br>Wear safety footwear unless feet protected by other means (e.g. sitting at a bench).                                                         | 1                        | 3 | 3   |         |
|     |          | Slips, Trips, Falls            | Minor or Major injury or fatal injury to operator                                                  | 3                       | 3 | 9   | Refer to Risk Assessment RA009.<br>Ensure work area is free from trailing cables, tools, materials, debris and spills.<br>All work should be from a suitable and stable work platform.<br>The use of ladders restricted to trained users – Refer to Risk Assessment RA001.                                                                                                 | 1                        | 3 | 3   |         |
|     |          | Dust                           | Respiratory illness<br>Reduced visibility<br>Skin irritation to operator and other workers in area | 4                       | 5 | 20  | Refer to Risk Assessment RA014.<br>Appropriate PPE to be worn including eye protection and RPE (Use an appropriate well fitting dust mask – p3 filter) and gloves.<br>Increase ventilation to work area (e.g. open windows, temporary extract etc.)<br>Stop working if visibility is noticeably reduced.<br>Clean work area regularly (e.g. wet sweep, vacuum, wash down). | 1                        | 5 | 5   |         |
|     |          | Air line detaching or bursting | Eye/face injury<br>Distraction to operator                                                         | 3                       | 4 | 16  | Check condition and connections of air-line before use.<br>Ensure air-line is not on a traffic route (pedestrian or vehicular).                                                                                                                                                                                                                                            | 1                        | 4 | 4   |         |



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|     |          |                         |                               | L                       | S | LxS |                                                                                                                                                                                                                                  | L                        | S | LxS |         |
|     |          | Tool jamming or binding | Wrist/hand injury to operator | 3                       | 3 | 9   | Check tool is appropriate for the job and used in accordance with manufacturer's instructions.<br>Trained operators only (or under strict supervision).<br>Ensure tools are maintained according to manufacturer's instructions. | 1                        | 3 | 3   |         |

| Likelihood          | Severity                               | Risk factor (Likelihood x Severity) |                                                                                                                  |
|---------------------|----------------------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------|
| 1 = Highly unlikely | 1 = Insignificant                      | High Risk = 15-25                   | Unacceptable Risk. If Post Control risk, work must not commence.                                                 |
| 2 = Unlikely        | 2 = Injury (first aid, no lost time)   | Medium Risk = 8-12                  | If Post Control risk, high level of discipline required & monitoring to consider further controls where possible |
| 3 = Possible        | 3 = Lost time injury                   | Low Risk = 1-6                      | Acceptable Risk assuming all controls in place effectively and workforce aware                                   |
| 4 = Probable        | 4 = Major injury / disabling condition |                                     |                                                                                                                  |
| 5 = Inevitable      | 5 = Fatality                           |                                     |                                                                                                                  |

I have read and understand the requirements of this risk assessment.

| Name | Signature | Date |
|------|-----------|------|
|      |           |      |
|      |           |      |
|      |           |      |