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| **RISK ASSESSMENT 003** | **USE OF MOBILE ELEVATED WORK PLATFORMS**  **(SCISSOR LIFT – CHERRY PICKER)** | | **Frequency and Job Specific Information:** Please Refer to Project/ Method Statement | | |
| **Risk Assessment prepared by** |  | **Name of Person approving RA:** |  | **Date of last review:** |  |
| **Next review due** |  |
| **Limits of use without need for project specific sign off** |  | | | **Circulation List** | All site staff and Project Managers |

**Project specific details & Sign-off by Project Manager (only completed where the standard controls no longer apply)**

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| **Job Number** |  | **Site:** |  | **Project Manager Approving Amended Risk Assessment** |  | **Date:** |  |

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| **Activity** | **Hazard** | **Main Risks**  **&**  **Affected Persons** | **Risk Rating** | | | Existing **Risk Controls** | AdditionalRisk Controls | **Residual Risk** | | |
| **P** | **O** | **RR** | **P** | **O** | **RR** |
| **WORKING FROM MOBILE ELEVATED WORK PLATFORMS (SCISSOR LIFT – CHERRY PICKER)** | **Incorrect use of equipment**  **Wet surfaces** | **Site staff**  **Contractors**  Fall of operative from platform  Serious personal injury | **3** | **4** | **12** | * Site induction to be completed before the start of work * A harness with a short work restraint lanyard must be secured to a suitable manufacturer provided anchorage point within the basket to stop the wearer from getting into a position where they could fall from the carrier. | * Specific risk assessments to be completed before work begins * Safe system of work in place * Appropriate safety shoes to be worn * Weather forecast to be checked regularly during periods of inclement weather | **1** | **4** | **4** |
| **Overhead electrical services** | Arcing or contact with overhead cables or other overhead obstructions | **2** | **5** | **10** | * When moving to a different location check the route for hazards before moving the equipment * Always watch for overhead power lines, underground services tripping hazards and other obstructions * All overhead cables will be fenced off or shrouded. | * Accurate location of underground services by operatives trained in the use of locating equipment (CAT scan) and fencing of overhead power lines. * Site supervisor to contact site manager to identify any specific site hazards | **1** | **5** | **5** |

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| **Activity** | **Hazard** | **Main Risks**  **&**  **Affected Persons** | **Risk Rating** | | | Existing **Risk Controls** | AdditionalRisk Controls | **Residual Risk** | | |
| **P** | **O** | **RR** | **P** | **O** | **RR** |
| **WORKING FROM MOBILE ELEVATED WORK PLATFORMS (SCISSOR LIFT – CHERRY PICKER) CONTINUED** | **Loose materials/ tools** | Site staff  Contractors  Other site staff  General public  Falling tools/work items | **3** | **5** | **15** | * Materials will not be allowed to accumulate on platform. * Where there is a risk of materials falling safety helmets will be worn. * Where members of public can be injured by falling materials, suitable and sufficient protection will be provided, i.e. netting fans, brick guards etc. | * Tool belts will be provided to all staff and used at all times * Appropriate PPE to be worn at all times * Protection against falling materials will be provided by use of nets, brick guards, fans and toe boards as necessary. | **2** | **3** | **6** |
| **Site traffic**  **Other pedestrians** | Site staff  Collision with site traffic  Collision with site pedestrians  RTA  Serious person injury | **2** | **5** | **10** | * Plant and equipment will only be used by competent trained operatives and maintained in accordance with manufacturer’s instructions. * All plant and vehicles will be fitted with automatic reversing alarms and hazard warning lights, as necessary. * Adequate lighting will be provided after hours of darkness, which will be properly maintained. | * All operatives will wear High Visibility reflective clothing and necessary protective equipment (see Protective Regs. 1992) * Vehicles moving in restricted space will be assisted by Banksmen * The working area must be protected from moving site traffic and pedestrians * Barriers to be put into place before the start of works | **1** | **4** | **4** |
| **Moving parts of mechanism** | Site staff  Entrapment of persons in moving parts of mechanism | **2** | **5** | **10** | * All Operators must be over the age of 18 yrs., trained, certified and authorised to use and will be responsible for maintenance and reporting of defects. * Machine must only be used on suitable surfaces and operatives must be in possession of necessary information (manual) etc. to enable safe operation of machines. | * Barriers, cones, or fencing will be placed around machine operating area when necessary.   Guards and fencing on moving parts must always be in place.   * Brief operators on the dangers, and the safe system of work to be followed. | **1** | **5** | **5** |

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| **Activity** | **Hazard** | **Main Risks**  **&**  **Affected Persons** | **Risk Rating** | | | Existing **Risk Controls** | AdditionalRisk Controls | **Residual Risk** | | |
| **P** | **O** | **RR** | **P** | **O** | **RR** |
| **MOVING MOBILE ELEVATED WORK PLATFORMS (SCISSOR LIFT – CHERRY PICKER)** | **Mobile elevated work platform**  **Uneven ground** | Site staff  Overturning of platform  Serious person injury  Property damaged  Manual handling injury  Personal injury  Crush injury | **2** | **5** | **10** | * Ensure route is clear and free from any obstructions * When moving, check that site traffic is controlled before the start of the move * Only trained and competent persons are permitted to move the equipment | * High visibility vests to be worn when moving equipment   Appropriate footwear to be worn  Manual handling training to be completed by all site staff  Work at height training to be completed annually  Regular toolbox talks to be carried out by the site supervisor | **2** | **3** | **6** |
| **Ground conditions**  **Uneven ground conditions** | **Site operatives**  Soft ground  Equipment sinking  Overturning of equipment  Entrapment  Serious personal injury | **2** | **4** | **8** | * The platform should only be used on firm and level ground. * Any temporary covers should be strong enough to withstand the applied pressure of the equipment | * Check conditions before the start of any works * Regular checks to be made on the ground conditions and the MEWP during the life of the project. * MEWP to be checked daily before the start or works to check for changes and or movement of the equipment | **1** | **4** | **4** |
| **Inclement weather** | **Site staff**  **Other contractors**  Slips  Trips  Falls  Serious personal injury | **3** | **4** | **12** | * High winds can tilt platforms and make them unstable. * Set a maximum safe wind speed for operation. * Storms and snowfalls can also damage platforms. * Inspect the platform before use after severe weather. | * Weather forecast to be checked during the works on a regular basis * Appropriate personal protective equipment must be worn during periods of inclement weather | **1** | **4** | **4** |

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| **Activity** | **Hazard** | **Main Risks**  **&**  **Affected Persons** | **Risk Rating** | | | Existing **Risk Controls** | AdditionalRisk Controls | **Residual Risk** | | |
| **P** | **O** | **RR** | **P** | **O** | **RR** |
| **UNAUTHORISED ACCESS TO MOBILE ELEVATED WORK PLATFORMS (SCISSOR LIFT – CHERRY PICKER) CONTINUED** | **Unauthorised Access or use of MEWP after working hrs** | **General public**  **Children**  Fall from MEWP  Serious personal injury  Death | **2** | **5** | **10** | * MEPW must be boarded/closed off or removed to prevent unauthorised access after working hrs * Appropriate site safety signage to be displayed. * Site security to be checks to ensure access cannot be gained by members of the general public and children | * Ladders will not be erected off tower scaffolds MEPWs or trestles. * Regular checks to be completed at the end of the day to ensure access to MEWP is closed off | **1** | **5** | **5** |

**PPE Required**

**(Please tick all that apply)**

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| **SAFETY HELMET**  **MUST BE WORN** | **HIGH VISIBILITY VEST**  **MUST BE WORN** | | | | **SAFETY BOOTS**  **MUST BE WORN** | **SAFETY GLOVES**  **MUST BE WORN** | **EYE PROTECTION**  **MUST BE WORN** | **EAR PROTECTION**  **MUST BE WORN** | **SAFETY OVERALLS**  **MUST BE WORN** |
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| **LABORATORY COATS**  **MUST BE WORN** | **WELDING MASK**  **MUST BE WORN** | | | | **VISORS**  **MUST BE WORN** | **HAIR NETS**  **MUST BE WORN** | **ESCAPE ROUTES**  **TO BE KEPT CLEAR** | **SAFETY HARNESSES**  **MUST BE WORN** | **NO MOBILE PHONES** |
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| **REPIRATORS**  **MUST BE WORN** | **HAVE YOU BEEN**  **FACE FIT TESTED?** | | | | **PEDESTRIAN MUST**  **USE THIS ROUTE** | **INTRINSICALLY SAFE OVERALLS**  **TO BE WORN** | **INTRINSICALLY SAFE FOOTWEAR**  **MUST BE WORN** | **OPAQUE SAFETY GLASSES**  **MUST BE WORN** | **DRIVERS MUST REPORT TO SITE OFFICE** |
|  | **Yes** |  | **Nio** |  |  |  |  |  |  |

**Notes**

* For risk assessments requiring project specific amendment - the Risk Assessment shall be reviewed weekly to ensure, it remains current as the project progresses.
* All employees to attend site induction/sign-in prior to commencing work on site.
* First Aid facilities to be provided by Client/Principal Contractor
* Welfare facilities to be provided by Client/Principal Contractor

**Risk Assessment Matrix**

**Multiply scores to arrive at risk rating (RR)**

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| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **Probability** | | | | | |
|  |  | **Remote** | **Unlikely** | **Possible** | **Probable** | **Very Likely** | **Certain** |
| **Outcome** | **No Injury** | **0** | **1** | **2** | **3** | **4** | **5** |
| **Minor Injury** | **1** | **1** | **2** | **3** | **4** | **5** |
| **First Aid Injury** | **2** | **2** | **4** | **6** | **8** | **10** |
| **Reportable Injury**  **(7 Day)** | **3** | **3** | **6** | **9** | **12** | **15** |
| **Major Injury** | **4** | **4** | **8** | **12** | **16** | **20** |
| **Fatality/Disability** | **5** | **5** | **10** | **15** | **20** | **25** |

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| **Low** | **1 – 6** | **Monitor** | **Tolerable risk. No additional controls required. Employees made aware of safe/correct system of work.** |
| **Med** | **8 – 12** | **Improvement** | **Action required to further reduce risk to acceptable level. Review of process or activity.** |
| **High** | **15+** | **Immediate Action** | **Unacceptable risk. Stop activity immediately. Inform next level of management & refer to Manager/Safety Coordinator. Possible withdrawal of process or activity.** |

**Monitoring and Review**

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| **Date Completed** | **Assessed by:** | **Job Title:** | **Signature:** | **Review Date:** |
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**Further Actions**

**(Please detail any actions for the risk assessment here)**

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| **Issue** | **Further action** | **Action by who?** | **Action by when?** | **Completed** |
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**All actions to be followed up are marked in bold in the body of the risk assessment above.**

**Confirmation of Risk Assessment & Method Statement Briefing**

**Before commencing the activities covered in this safe system of work document all staff are to sign below to confirm that a clear briefing explaining the job has been given and is understood**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Signature** | **Date** | **Comments** |
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