

## Safety Documentation

Please select the forms you require by selecting the check boxes below.  
You can select more than one.

**Risk Assessment**                       **Method Statement**                       **Chemicals COSHH**

Once you have made your selections, scroll down and complete the forms.

**Buttons:** [+ ] will add a row to a list    [- X ] will delete a row from a list

You may save this file to a local drive at any time.  
When you have finished, save the file to a local drive and email it to your supervisor for authorisation.

**Supervisors** - There is a sign-off section at the end of the document set that must be completed.

**Staff may "self authorise", (as a supervisor), but the forms must still be submitted to the DSO for approval.**

### **IMPORTANT:**

YOU ***MUST NOT*** START ANY PRACTICAL WORK UNTIL THESE FORMS HAVE BEEN RETURNED TO YOU  
WITH **BOTH** YOUR SUPERVISOR'S AND DSO'S APPROVAL SIGNATURES ATTACHED.

### Please complete these fields

School or Service	Wolfson School of Mechanical, Electrical and Manufacturing Engineering
Department	Centre of Biological Engineering
Originator name	Kulvindar Sikand
email address	k.p.sikand@lboro.ac.uk
Location	Garendon Wing
Project / Activity / Task	Tool box
Supervisor Name	Mark Taylor

### Risk Assessment

Reference

Location

Originator

Project / Activity / Task

Is this process risk assessment for a :  Laboratory / Workshop  General use

Category 1: Machinery & work equipment:				
Design and Construction	Mechanical hazards	Electrical hazards	Radiation hazards	
Purchased but not CE marked	Stabbing/Puncturing	N/A	N/A	+
	Crushing			X
	Cutting/Shearing			X
	Friction/Abrasion			X
Category 2: Workplace				
Slips/Trips/Falls on the level				+
				X
Category 3: Hazardous and/or Harmful substances				
N/A				+
				X
Category 4: Work activity				
Use of hand tools				+
				X
Category 5: Work organisation				
Other Work organisation hazard (overtyp hazard here)				+
				X

Explain the risks associated with these hazards				
People / Groups at risk	<input type="text" value="Operator only"/>			X
Enter risk details here:-	Impact	Probability	Risk Score	
<input type="text" value="Potential of stabbing by screwdriver"/>	<input type="text" value="Very Harmful"/>	<input type="text" value="Unlikely"/>	High	
What are the control measures?	Lowers Impact	Lowers Probability	+	
<input type="text" value="To be used by a competent person experienced and trained in use of hand tools - screwdrivers."/>	<input type="text" value="None"/>	<input type="text" value="Significantly"/>	X	
			Residual Risk	
			<input type="text" value="Low"/>	
People / Groups at risk	<input type="text" value="Operator only"/>			X
Enter risk details here:-	Impact	Probability	Risk Score	
<input type="text" value="Potential of crushing fingers while using pliers."/>	<input type="text" value="Harmful"/>	<input type="text" value="Unlikely"/>	Medium	

## Process Risk Assessment Form (Continued)

What are the control measures?	Lowers Impact	Lowers Probability	+	
To be used by a competent person experienced and trained in use of hand tools - pliers.	None	Significantly	x	
				Residual Risk Low
People / Groups at risk	Operator			x
Enter risk details here:-	Impact	Probability	Risk Score	
Potential of cutting/shearing fingers/hands with blade	Harmful	Highly Unlikely	Low	
What are the control measures?	Lowers Impact	Lowers Probability	+	
competent person experienced and trained in use of hand tools - wear cut proof gloves whilst using cutting tools.	Significantly	Significantly	x	
				Residual Risk Low
People / Groups at risk	Operator			x
Enter risk details here:-	Impact	Probability	Risk Score	
Potential of impacting limbs etc with a hammer.	Slightly Harmful	Highly Unlikely		
What are the control measures?	Lowers Impact	Lowers Probability	+	
To be used by a competent person experienced and trained in use of hand tools - hammer, mallet, striking tools	Significantly	Significantly	x	
				Residual Risk Low
People / Groups at risk	Operator			x
Enter risk details here:-	Impact	Probability	Risk Score	
Potential of cutting/abrasion while using hacksaw.	Harmful	Unlikely	Medium	
What are the control measures?	Lowers Impact	Lowers Probability	+	
To be used by a competent person experienced and trained in use of hand tools - use of hacksaw.	Significantly	Significantly	x	
				Residual Risk Low
People / Groups at risk	Operator only			x
Enter risk details here:-	Impact	Probability	Risk Score	
Slipping or falling spanners	Slightly Harmful	Highly Unlikely	Low	
What are the control measures?	Lowers Impact	Lowers Probability	+	
To be used by a competent person experienced and trained in use of hand tools - adjustable and standard spanner; mole grips	None	Slightly	x	
				Residual Risk Low
+ Add another Risk				

## Process Risk Assessment Form (Continued)

Personnel Group	Maximum (Task setup/ Re-configuration)	High (Performing the task)	Medium (Observing the task)	Low (Present, but not involved)	Lone Working (Out of hours)	No Exposure Permitted	Total
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Who may be at risk as a result of this activity?

Personnel Group	Maximum (Task setup/ Re-configuration)	High (Performing the task)	Medium (Observing the task)	Low (Present, but not involved)	Lone Working (Out of hours)	No Exposure Permitted	Total
Academic Staff	0	2	0	0	0	0	2
Technical Staff	0	2	0	0	0	0	2
Research Staff (PDRA)	0	2	0	0	0	0	2
Research Students (PhD)	0	2	0	0	0	0	2
Students (Undergraduate / MSc)	0	0	0	0	0	0	0
Visitors	0	0	0	0	0	0	0
Others - Over-type as needed	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>

With these controls in place, the risk is:

**The activity is LOW RISK - and is effectively controlled**

# Safety Method Statement

Reference SAF/MEME/6721

Location Garendon Wing

Originator Kulvindar Sikand

Project / Activity / Task Tool box

**What equipment will be used in this activity?**

	<b>+</b>
Screwdriver	<b>X</b>
Pliers	<b>X</b>
Stanley knife	<b>X</b>
Hammer	<b>X</b>
Hacksaw	<b>X</b>
spanner	<b>X</b>
adjustable spanner	<b>X</b>
Mole grips	<b>X</b>
Cutter	<b>X</b>
possibly slash proof gloves	<b>X</b>

**What training must be completed to do this activity?**

	<b>+</b>
Competent in the use of hand tools	<b>X</b>

**What chemicals are being used? (These must be included in the COSHH Form)**

	<b>+</b>
None	<b>X</b>

**Spill and accident procedures.**

	<b>+</b>
Depending on severity of accident contact first aider / security. Contact emergency services in event of a severe accident.	<b>X</b>

**Procedure in the event of an emergency. (How to leave the process in a safe condition in such an event)**

	<b>+</b>
Make safe any work process as quickly as possible, clearing items to one side so no obstacles. Evacuate area as necessary	<b>X</b>

**References.**

	<b>+</b>
HSE Booklet - Using Work Equipment safely (HSE website).	<b>X</b>

**Detailed sequential description of the process**

Process step	Precautionary measures and comments	<b>+</b>
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## Safety Method Statement (Continued)

Process step	Precautionary measures and comments	+
<p>Job needs doing using hand tools. Select correct tool for the job making sure that it is in good working order. The tools in the CBE are intended for minor and simple work anything which is more complex requires external contractors or advice from senior technical staff from the Wolfson school.</p>	<p>Inspect tools before using them to ensure they are safe to use. This includes ensuring that screw drivers are not work at the end to prevent slipping. Make sure that any handles are secure and that any blades are intact and not rusty. If it is found that tools are worn, not fit for purpose to remove them from the tool box and dispose of them. Inform lab manager if this is the case. Regular checks of the tools will be made and removed if damaged, carried out by lab manager - e.g. spanners with rounded edges; poor cutting edges on stanley knife; faulty pliers; worn saw blades etc, .</p>	<p>X</p>
<p>If individual wanting to use hand tool has little experience in using them get help from a more experienced colleague or be supervised through process</p>	<p>Don't underestimate potential injuries caused by hand tools.</p>	<p>X</p>

## Supervisor and Departmental Safety Office (DSO) Sign-off.

### Supervisors

Please check the documents above and if you want to approve them:

- 1) Electronically sign this document
- 2) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the DSO.

### DSO

Please review the documents above and if you want to approve them:

- 1) Enter the reference numbers as appropriate
- 2) Electronically sign this document
- 3) Save it to a local drive (You will be prompted to do this)
- 3) eMail the signed document to the originator

### IF YOU DO NOT WANT TO AUTHORISE THE FORMS,

Please do not sign the form, but click the "Not Approved" check-box and return it to the originator by email stating why and what you expect them to do to put it right in the comments box below.

Not Approved

Supervisors Signature

### Form Reference Numbers

Risk Assessment

SAF/MEME/6721

Method Statement

SAF/MEME/6721

COSHH Assessment

DSO Signature

### **This document set must be reviewed and re-approved at the following times:**

- 1) After the first occurrence of the activity described above (Review only)
- 2) After any change to the procedure or reagents used
- 3) After any incident resulting from this activity
- 4) At least annually from the date of approval

Next Review:

11 Mar 2022

Review comments