

ARTESIS AMT RISK ASSESSMENT FORM

DATE:/...../.....

ARTESIS JOB #.....

CUSTOMER REFERENCE #.....

WORK DESCRIPTION: ONLINE - AMT TOOLKIT TESTING

HAZARD IDENTIFICATION

PLANT AND EQUIPMENT

MECHANICAL

Trapping Impact Contact Entanglement Projectile

ELECTRICAL

Electrocuting Ionization Fire Explosion

THERMAL

Burns Scalds Extreme Cold Extreme Heat

STORED ENERGY

Pressure Springs Capacitance Suspended Loads

OTHER

Noise Vibration Overloading Stability

ISOLATION POINTS

PTW/ACCESS Controls Verified Document Corresponds to Work Scope

MATERIAL AND SUBSTANCES

FIRE / EXPLOSION

Dust Explosion Combustion Hot Work Flammable Substance
 Ignition Source Oxidizing Substances

HEALTH HAZARDS

Particles Fume Vapors Gasses Mists
 Asphyxiant Ingestion Arc Eye Bacterial Chemicals

PLACE OF WORK / WORKING ENVIRONMENT

Confined Space Working Height Stacking / Storing Work Over Water
 Escape Plan Ventilation Pedestrian Access Restricted Access
 Heat Exhaustion Frost Bite Lighting Levels Lifting Equipment
 Working above Plant / People

WORK ORGANISATION

Monotony Stress Work Load Time / Commercial Operator Competency

ENVIRONMENTAL IMPACTS

COSHH Waste Disposal Emission Spill Management

METHODS OF WORK

Method Statement SOP's SMP's Risk Assessment
 Manual Handling Posture Restricted Access Restricted Movement

HEALTH, SAFETY AND ENVIRONMENTAL HAZARD IDENTIFICATION

RISK QUANTIFICATION

NO	TYPE AND DESCRIPTION	RISK RATING	RISK AFTER CONTROL	WORK FORCE CONTROLS REVIEW
1	Shock from contact with live equipment	4	2	
2	Tripping hazard from trailing cables	3	1	
3	NOISE risk due to plant operation	4	1	
4	Injury from falling objects	4	1	
5	Eye injury due to dust & particles in air	3	1	
6	Need to connect test leads manually may be out of reach	3	1	
7	Working near rotating plant, catching of clothes & garments	4	1	
8	Specific site PPE required			
9	Connecting crocodile clips to motor mains leads	4	1	

If 'risk after control' is judged as moderate level 3, a Team Leader or Shutdown Area Lead must endorse this Risk Assessment. For residual risk ratings higher than level 3, work must not proceed without Department Manager approval.

HEALTH SAFETY AND ENVIRONMENTAL HAZARD CONTROLS

NO	
1	Check all isolations and equipment is de-energized before entering MCC. TPS personnel will LOTO equipment where necessary HOWEVER FULL WALK DOWN REQUIRED with LOTO owner for confirmation. Hazard tape & signs and warning lights to be used to cordon off area
2	All trailing cables to be tied & covered with hazard tape to ensure tripping risk is removed
3	Hearing protection to be worn where required
4	Hard hat to be worn at all time if applicable to site PPE requirements
5	Safety glasses to be worn at all time if applicable to site PPE requirements
6	All manual connections to be made by customer personal due to safety reasons
7	Review location of any exposed shafts and cordon off area,
8	Site specific safety requirement may include wearing of Call 12 overhauls and safety visor helmet
9	Care taken when fitting crocodile clips to mains connections. If site request crocodile clips to be secured to mains connections take care to loosen connection to terminal to allow fitting crocodile clip then retighten connection making sure connection is in free space and not able to go to ground

RISK ESTIMATOR

		SEVERITY		
		FIRST AID = 1	NON-REPORTABLE=2	MAJOR INJURY/FATALITY = 3
LIKELIHOOD	POSSIBLE = 1	Trivial risk 1	Acceptable risk 2	Moderate risk 3
	PROBABLE = 2	Acceptable risk 2	Moderate risk 4	Substantial risk 6
	CERTAIN = 3	Moderate risk 3	Substantial risk 6	Intolerable risk 9

IF THE FIGURE IS 1-2, THE RISK IS CONSIDERED AS LOW AS IS REASONABLY PRACTICABLE AND WORK MAY PROCEED WITH EXISTING CONTROLS IMPLEMENTED AND MONITORED.

IF THE FIGURE IS 3-4, FURTHER ACTIONS ARE EXPECTED TO BE IDENTIFIED IN ORDER TO REDUCE THE RISK TO A LEVEL WHICH IS AS LOW AS IS REASONABLY PRACTICABLE.

IF THE FIGURE IS 6-9, FURTHER ACTIONS MUST BE IDENTIFIED AND AGREED BEFORE WORK CAN PROCEED. THESE FURTHER ACTIONS MUST REDUCE THE RISK TO A LEVEL, WHICH IS AS LOW AS IS REASONABLY PRACTICABLE.

	Name	Signature	Role	Date
Assessed by:				
Approved By:				

Risks at site Assessed by: _____ Sign: _____ Date: _____

A Risk Assessment and Work Force Task Review shall be undertaken prior to the start of works.
The Work Scope, Risk Assessment, Method Statement and Safety Documents shall be discussed and reviewed.

Risk Assessment and Work Force Task Review:

Conducted by: _____ Sign: _____ Date: _____

Additional hand written 'Comments', 'Hazard Identification', 'Names' etc., should be captured over leaf.

ATTENDEES	SIGNATURES	DATE	ATTENDEES	SIGNATURES	DATE