

S A M P L

Site Address
Site Risk

RA Ref No:

Assessor	Job
<<Name>>	<<

Assessment Date	Review Dates / Initials	
<<Date>>	<<Dates>>	<<Initials>>

Assessment task:	Plastering walls and ceilings
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Persons at risk	Details	
Contractors	<<e.g. all operatives>>	<<e.g.
Visitors		
Gen. Public / Others	<<e.g. anyone in the vicinity>>	

any disabled?	Comments
Yes <input type="checkbox"/> No	
Yes <input type="checkbox"/> No	
Yes <input type="checkbox"/> No	

Hz No.	Hazard description	How are persons affected?	P
1	Material splashing from trowel whilst being applied. Lime burns to eyes	e.g. Contact with wet cementious, gypsum or lime based plasters can cause irritation to unprotected skin or burn eyes.	<<e.g. 4>>
2	Manual handling	e.g. Repeated twisting motions may cause lower back or shoulder injuries	<<e.g. 2>>
3	Falls from heights	e.g. Stepping badly down from hop-ups may cause ankle injuries	<<e.g. 3>>
4			

Existing controls	Further controls / action
e.g. Operatives to wear barrier creams or gloves>>	<<e.g. Supervisors to ensure that eye protection is available if required>>
e.g. None>>	<<e.g.>>
e.g. Operatives to wear suitable gloves>>	<<e.g. Toolbox talks on use and storage of knives etc>>

Probability (P)	5=very likely, 4=likely, 3=quite possible, 2=possible, 1=unlikely
Severity (S)	5=fatal, 4=severe, 3=moderate, 2=slight, 1=negligible
Risk (R)	0-8=low risk, no action required. 9-15=medium risk, ensure action

25=high risk, stop operation & implement control measures
