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| Health and safety services |

Risk assessment form

Vacuum filtration

**RISK ASSESSMENT FORM – SCHOOL OF EARTH AND ENVIRONMENT**

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| **RISK ASSESSMENT DETAILS** | **DEGREE OF RISK** | **RISK RATING MATRIX** |
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| Faculty/School/Service | **SEE** |
| Team | **Cohen** |

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| Risk Assessment Title | **Vacuum filtration** |
| Risk Assessment Log Reference | **N/A** |
| Date | **8/7/2016** |
| Name of Assessors | Andy Connelly |
| Manager Responsible | Caroline Peacocj |
| Location | Cohen West wing Level 9 and level 8 |
| Details of Activity**Vacuum filtration using one and two piece Büchner funnels** |

Other assessments which might also be required, ✓ if needed:Manual Handling REFCOSHH Personal Protective Equipment (PPE) REFNoise REFOther REF |

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| **LIKELIHOOD (L)** |
| 5 | Inevitable |
| 4 | Highly Likely |
| 3 | Possible |
| 2 | Unlikely |
| 1 | Remote Possibility |

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|  |  | **SEVERITY** |
|  **LIKELIHOOD** |  | 1 | 2 | 3 | 4 | 5 |
| 1 | 1 | 2 | 3 | 4 | 5 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 5 | 5 | 10 | 15 | 20 | 25 |

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| **SEVERITY (S)** |
| 5 | Very High -Multiple Deaths |
| 4 | High - Death, serious injury, permanent disability |
| 3 | Moderate - RIDDOR over 3 days |
| 2 | Slight - First Aid treatment |
| 1 | Nil - Very Minor |

 | **PERSONS AT RISK** |
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| PERSONS AT RISK |
| Employees |
| Students |
| Clients |
| Contractors |
| Members of the public |
| Work Experience students |
| Other Persons |

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| **REVIEW DATES** |
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| RISK RATING SCORE | ACTION |
| 1 - 4 | Broadly Acceptable - No action required |
| 5 - 9 | Moderate - Reduce risks if reasonably practicable |
| 10 -15 | High Risk - Priority Action to be undertaken |
| **16 -25** | Unacceptable **-Action must be taken IMMEDIATELY** |

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| **HAZARD AND RELATED ACTIVITIES**e.g. trip, falling objects, fire, explosion, noise, dust, violence etc. | **PERSONS** **AT RISK**e.g. Employees, Customers, Contractors, Members of the public | **POSSIBLE OUTCOME** | **RISK RATING BEFORE CONTROLS (LxS)** | **EXISTING CONTROLS**e.g. Guards, Safe Systems of Work, Training, Instruction, Authorised Users, Competent Persons, Personal Protective Equipment (PPE) | **RISK RATING AFTER CURRENT CONTROLS (LxS)** | **FURTHER CONTROLS REQUIRED?** | **RISK RATING AFTER ADDITIONAL CONTROLS (LxS)** |
| Glassware under pressure | Users and others working in laboratory | Possible implosion | 2x3=6 | SOP to be followed. Use of standard PPE. Not leaving equipment alone. | 1x3=3 | No |  |
| Handling Glassware. | Anyone working in the lab | Cuts from broken glassware. | 3(l)x2(s)=6 | General laboratory practice. Training for persons using the equipment to be provided.Wear suitable protective clothing: Lab Coat, Gloves, and Protective glasses. | 2(l)x2(s)=4 | No obvious additional measures that could be taken. |  |
| Electric Shock from vacuum pump | User | Electrocution or electric burns | 2(l)x4(s)=8 | Regular PAT testing of all electrical equipment | 1(l)x4(s)=4 |  |  |
| Spills on floor | User other lab users | Slip and fall over on liquid | 2(l)x3(s)=6 | Follow SOP, be careful when decanting liquids and mentioned in training | 1(l)x3(s)=3 |  |  |
| Handling users samples | Before using the autoclave users must carry out risk and COSHH assessments to identify issues with user’s samples. Any lab users at risk from the samples must be informed; this includes personnel training user. |

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| **COMMENTS AND INFORMATION**(Use this section to record any dynamic risk assessment comments and information) |
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| **Do additional controls adequately lower high risk activities to an acceptable level?** | **YES / NO**If NO explain in comments box above | **SIGNATURE OF MANAGER**"The risks identified in this assessment are controlled so far as is reasonably practicable" |
| Signature: | Date: |

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| **DATE OF REASSESSMENT**(Every two years minimum) | **ARE THERE ANY CHANGES TO THE ACTIVITY SINCE THE LAST ASSESSMENT?** | **SIGNATURE OF MANAGER** |
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| **LOCATION OF CURRENT SIGNED RISK ASSESSMENT** |  |