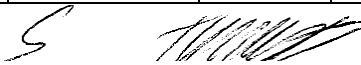


# RISK ASSESSMENT

| Risk Assessment Reference: 003<br><b>Use of Battery-Operated Drills</b>                      |                                                |                                                |          |      | Assessor: Andy Palmer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               | Area/Location: Workshop and site                |      |                                 |  |
|----------------------------------------------------------------------------------------------|------------------------------------------------|------------------------------------------------|----------|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------|------|---------------------------------|--|
| Persons Exposed:                                                                             |                                                | Employees: <input checked="" type="checkbox"/> |          |      | Clients Staff / Visitors <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               | Contractors <input checked="" type="checkbox"/> |      | Public <input type="checkbox"/> |  |
| Hazard                                                                                       | Risk                                           | Risk Rating                                    |          |      | Control Measures to Reduce Risk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Residual Risk |                                                 |      |                                 |  |
|                                                                                              |                                                | Probability                                    | Severity | Risk |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Probability   | Severity                                        | Risk |                                 |  |
| Misuse of equipment or poorly maintained equipment                                           | Injury to the eyes and other parts of the body | 2                                              | 3        | 6    | <p>All battery-operated drills will be subject to an inspection, testing and maintenance regime. Equipment will be visually inspected prior to use and must be free from defects.</p> <p>Any equipment found to be defective will not be used and returned to the office for repair or replacement. All operatives using battery operated drills must be trained and competent.</p> <p>Eye protection must be worn when using a battery-operated drill. Persons in close proximity to the work may also be required to wear eye protection if there is a potential for flying particles. Drill bits must be kept sharp and free from rust to reduce noise and vibration.</p> <p>Where any battery charger is used it must be free from defects and have been portable appliance tested within the last 12 months.</p> | 1             | 3                                               | 3    |                                 |  |
| Signed by:  |                                                |                                                |          |      | Date: 31/01/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                                                 |      |                                 |  |
| Additional control measures to reduce risks to lowest level possible                         |                                                |                                                |          |      | Action Plan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               | Completed                                       |      |                                 |  |
|                                                                                              |                                                |                                                |          |      | By                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date          | By                                              | Date |                                 |  |
|                                                                                              |                                                |                                                |          |      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |                                                 |      |                                 |  |