Activity Description: Constructing a Mortared Wall

**RISK ASSESSMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Group name | Assessed by:  |  | Date of Assessment:  | Ref No:  |

**Likelihood: Severity/consequences: Risk rating (SC x L):**

1 - Highly unlikely 1 - Slightly harmful 1 - Trivial risk 6 - Substantial risk

2 – Unlikely 2 – Harmful 2 - Tolerable risk 9 - Intolerable risk

3 – Likely 3 - Extremely harmful 3 - 4 - Moderate risk

Main hazards/associated risks:

| **Ref No** | **Hazard/Risk** | **Who is at risk?**Consider: KC Employees, Young Persons, Disability, Children/Pupils, Contractors, Visitors, New & Expectant Mothers, Members of the Public, Client/Service User | **Control Measures** | **Locations** | **Likelihood** | **Severity** | **Risk Rating** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | **Slips , Trips & falls**Uneven ground |  | * Hand hygieneEnsure working area is clear of footpaths or fenced from them
* Ensure a safe, clear working area
* Ensure materials are stored away from immediate working area, but within easy access
* Monitor surface conditions during wet weather
 |  |  |  |  |
| 2 | **Manual handling**Cuts, crushes, sprains and strains |  | * Do not overfill wheelbarrows with brick, stone or mortar
* Short periods of work with adequate breaks
* Job specific manual handling training given to all staff
* Task rotation of “heavier” roles between staff
* Wear gloves and safety boots
 |  |  |  |  |
| 3 | **Contact with material**Impact with flying fragments of material whilst cutting stone or brick |  | * Wear gloves and eye protection whilst cutting stone/brick
* Ensure safe working area clear of footpaths or other public areas.
* Check surroundings before and regularly during cutting
* Refer to Risk assessment for cutting stone using mechanical cutter
 |  |  |  |  |
| 4 | **Contact with material**Cement dust, sand. |  | * Wear gloves, eye protection and dust mask whilst preparing and mixing mortar
* Ensure clear safe working area away from the public whilst dismantling wall
* Ensure COSHH data on cement has been read and understood
 |  |  |  |  |
| 5 | **Use of hand Tools**Impact from hammer/chisel whilst shaping stone |  | * Wear Gloves
* Ensure use of correct tool
* Tool box talk to be given at beginning of task.
 |  |  |  |  |

**Personal Protective Equipment:** (please select PPE Symbols from document number 3c and insert into the below boxes)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Safety Shoes |  |  |  |  |  |  |

**Related Assessments:**

|  |  |
| --- | --- |
| **Assessment Type** | **Assessment Ref** |
|  |   |
|  |  |

**Action Plan:**

|  |  |  |
| --- | --- | --- |
| Action | Person Responsible | Expected Completion Date |
|  |  |  |
|  |  |  |

**Conclusions:**

If the above recommendations are followed then risks can be minimised.

A safety Method Statement can be used as part of this risk assessment which can be used to assist with training and when monitoring work activities.

Review Date:

Review of this document should be annually or more frequent if:

After an accident / incident involving an activity from this risk assessment

Any significant changes to work practices, materials, equipment or legislation

**Assessor (Signed): Dated:**

**Manager (Signed): Dated:**

**THIS RISK ASSESSMENT MUST BE SHARED WITH ALL INVOLVED IN THIS ACTIVITY**

The sharing of the risk assessment with all staff involved with the activity is vital to ensure all control

measures are complied with, are practical and adhered to.

**Please document that this information has been provided**