## 

**GUILLOTINE***Light Sheet Metal*

## Guillotine (manual)Scope

This document is to be completed for staff and student use of machinery, plant and equipment as a part of a school curriculum activity or program.

Refer to the [ITD Guidelines](http://education.qld.gov.au/health/pdfs/healthsafety/itd-staff-guidelines.pdf) for further staff advice on the risk management process for practical ITD curriculum activities in schools.

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| --- | --- |
| Plant/Equipment Description: | |
| Teachers/Leaders: | |
| Room Locations: | |
| Assessment Date: | Review Date: |

*N.B. This assessment can remain active for up to 5 years. However, an annual monitoring and review process should be undertaken and recorded – refer to the last page of this document.*

*Below are the details of the manufacturing or production processes attributed to this item of equipment categorised by their assessed inherent risk levels (refer to the Equipment/Process Risk Matrix). The actions required for approval for each level of inherent risk are mandatory.*

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| **Inherent Risk Level** | | **Details of Processes** | **Action Required/Approval** |
| 🗹 | **Low** | * When cutting and preparation of sheet metal from approximately 0.6mm to 1mm in thickness and with a surface area less than 600mm x 600mm. * When the work piece can be securely held without possible entrapment of long hair and jewellery, etc. * When there is strictly a single person operation. | * Manage through regular planning processes |
| 🗹 | **Medium** | * When cutting and preparation of sheet metal approximately 1mm thickness or greater and with a surface area greater than 600mm x 600mm. * When the work piece can be securely held without possible entrapment of long hair and jewellery, etc. * When the operator is aware never to attempt to guillotine metal rod, wire or spring steel, etc. * Dual person operations are strongly discouraged for all students. | * Document controls in planning documents and/or complete this *Plant Risk Assessment* * Consider obtaining parental permission |

Minimum standards

| Minimum qualifications and experience *Listed below are the general “minimum” recommendations for the management of this Plant/Equipment.*  🗹 *Indicate the minimum management controls.* |
| --- |
| Registered teachers with experience, ability and competency in the safe use of this plant/equipment  *(indicate one or more of the following):*  Specific knowledge of the safe and correct use of this plant/equipment  Experience (i.e. previous involvement and familiarity) in the safe use of this plant/equipment  Demonstrated expertise, ability and competency with this plant/equipment  Documented qualifications relating to the use of this plant/equipment (e.g. in a staff profile)  **OR**  An adult staff member or leader, other than a registered teacher, with:  Expertise in the safe and correct use of this plant/equipment  Documented qualifications that demonstrate experience, ability and competency in the safe use of this plant/equipment. |
| Will any ITD staff require initial and/or ongoing training for the safe use of this plant/equipment?  If yes, give details: |
| Will students be operating this plant/equipment?  If yes, state how student use of this plant/equipment will be managed (e.g. Workshop Safety Induction)  Give details: |
| Further information if required: |
|  |
| Minimum control requirements |
| Supporting documentation available in the school on this plant/equipment includes:  Operators Manual  Safe Operating Procedures (SOP)  Equipment Maintenance Records (EMR)  A process for recording student safety induction e.g. Student induction register  A process for recording staff training and experience, e.g. ITD Staff induction register |
| All guards are in place and in good working order for this plant/equipment |
| Safe Working Zones are defined for this plant/equipment (e.g. yellow lines and/or appropriate signage) |
| Suitable personal protective equipment (PPE) is available to be used by all operators |
| This plant/equipment complies with relevant safety standards |
| Further information if required: |

Hazards and control measures

*Listed below are indicative hazards/risks and suggested control measures. These are by no means exhaustive lists. Add details of any other hazards/risks or additional controls you intend to implement.*

🗹 *Indicate the control measures adopted. Detail their implementation and any additional controls required.*

| **Hazards/Risks** | **Hierarchy of Recommended**  **Control Measures** | **Yes** | **No** | **Details of how this will be implemented***(and any additional controls)* |
| --- | --- | --- | --- | --- |
| **Exposure to Rotating**  **or Moving Parts:**   * **Entanglement and**   **Entrapment**  Could hair, clothing, ties, jewellery or other materials become entangled with moving parts of plant or materials in motion?   * **Striking**   Could anyone be struck by moving objects such as the work piece being ejected, or by the unexpected or uncontrolled movement of the plant or work piece?   * **Crushing & Pinching**   Could anyone be crushed or pinched due to falling, uncontrolled or unexpected movement of plant or its load tipping or rolling over, or contact with moving parts during testing, inspection or maintenance?   * **Shearing**   Can body parts be cut off between two parts of the plant, or between a part of the plant & the work piece or structure?   * **Cutting, Stabbing and**   **Puncturing**  Can anyone be cut, stabbed or punctured by coming into contact with moving plant or parts, or objects such as ejected work piece or waste? | 1. Where possible, potentially hazardous plant, machinery and processes, including manual guillotines, are substituted or replaced with less hazardous alternatives. |  |  |  |
| 1. All necessary manual guillotine guards and safety devices are in place protecting workers from the moving blade, foot pedal and all off-cut materials. |  |  |  |
| 1. “Lock Out” or warning “Danger” tags are affixed to all manual guillotines under repair or maintenance preventing workers from using the equipment. |  |  |  |
| 1. Staff and student training is provided to minimise exposure to these hazards. |  |  |  |
| 1. Safe operating procedures (SOPs) for all manual guillotines are available and clearly displayed. |  |  |  |
| 1. “Safe Working Zones” around all fixed manual guillotines are clearly defined by yellow safety lines (or similar). |  |  |  |
| 1. Emphasis is placed on the requirement for plant operators to remove all jewellery, tuck in loose clothing and tie back long hair. |  |  |  |
| 1. All appropriate and approved personal protective equipment (PPE) is used where required. |  |  |  |
| **Slips, Trips, Falls**  **and Abrasions:**  Can anyone using the plant or in the vicinity of the plant, slip, trip or fall due to the working environment or other factors?  e.g. Poor housekeeping, dust on floors, slippery or uneven work surfaces, power cables across work areas causing injuries and abrasions? | 1. Slip resistant flooring is encouraged. Regular checks are made for unsafe wear and damage. Inspections are made for any power leads, etc. |  |  |  |
| 1. Procedures are in place for the disposal of all waste materials around the guillotine. |  |  |  |
| 1. Staff training is provided to minimise exposure to these hazards. |  |  |  |
| **Environmental:**   * **Noise**   Is it likely that the normal operation of this plant will produce excessive noise levels?   * **Lighting**   Is there insufficient lighting to operate this plant in a safe manner? Is there a possible strobe lighting effect caused by faulty fluorescent tubes in the workspace? | 1. All manual guillotines are regularly maintained to help reduce high noise, vibration and dust levels. |  |  |  |
| 1. All manual guillotine maintenance is documented in a register (EMRs). |  |  |  |
| 1. Exposure to noisy ITD workshop environments is monitored and evaluated regularly for all workers. |  |  |  |
| 1. Engineering controls (or physical changes) such as mandatory machinery guarding or any protective safety screens and enclosures are in place in all workspaces and all in good working condition. |  |  |  |
| 1. Staff and student training is provided to minimise exposure to these hazards. |  |  |  |
| 1. Good lighting is provided to all workspaces and this is maintained on a regular basis. Fluorescent tubes are checked and replaced as required. |  |  |  |
| **Ergonomics and**  **Manual Handling:**  Can the plant be safely operated, in a suitable location, providing clear and unobstructed access?  Poorly designed work stations often necessitate teachers and students performing manual tasks involving pushing, pulling or carrying, etc. Such tasks then contribute to a range of musculoskeletal sprains and strains for workers. | 1. All manual guillotines and work benches are planned and adjusted to a comfortable work height thus minimising any unsafe or excessively strenuous manual tasks. |  |  |  |
| 1. Sufficient workspace is provided around all fixed manual guillotines to help ensure unobstructed, safe operation. |  |  |  |
| 1. “Safe Working Zones” are clearly defined around all fixed plant including manual guillotines. Floors are free of excessive wood dust and other waste materials. |  |  |  |
| 1. Staff training is provided with regard to manual handling techniques and procedures to minimise exposure to these hazards. |  |  |  |

| **Other Hazards/Risks** | **Additional Control Measures** *These would relate to the specific student needs, locations and conditions in which you are conducting your activity.* |
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| **Approval** | | | |
| Submitted by: | | | Date: |
|  | Approved as submitted. | | |
|  | Approved with the following condition(s): | | |
|  | Not Approved for the following reason(s): | | |
| By: | | Designation: | |
| Signed: | | Date: | |

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| ITD staff members involved in the use of this risk assessment & the associated plant & equipment: | |
|  | *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:*  *Signature:*  ……………………………….. *Date:* |

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| **Monitoring and Review** *This Plant & Equipment Risk Assessment is to be monitored and reviewed annually for a further four (4) years.* |

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| **Review 1:** | | **Yes** | **No** |
| * Are allocated risk levels and “Actions required” unchanged over the past 12 months? * Are Minimum Standards and Recommended Control Measures unchanged over 12 months? * ITD staffing details at this school have remained unchanged over the past 12 months? | |  |  |
| If the responses are “NO” for any question, record current details here, and list all staff changes *(with signatures)* | | | |
| Reviewed by: | Designation: | | |
| Signed: | Review Date : | | |

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| **Review 2:** | | **Yes** | **No** |
| * Are allocated risk levels and “Actions required” unchanged over the past 12 months? * Are Minimum Standards and Recommended Control Measures unchanged over 12 months? * ITD staffing details at this school have remained unchanged over the past 12 months? | |  |  |
| If the responses are “NO” for any question, record current details here, and list all staff changes *(with signatures)* | | | |
| Reviewed by: | Designation: | | |
| Signed: | Review Date : | | |

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| **Review 3:** | | **Yes** | **No** |
| * Are allocated risk levels and “Actions required” unchanged over the past 12 months? * Are Minimum Standards and Recommended Control Measures unchanged over 12 months? * ITD staffing details at this school have remained unchanged over the past 12 months? | |  |  |
| If the responses are “NO” for any question, record current details here, and list all staff changes *(with signatures)* | | | |
| Reviewed by: | Designation: | | |
| Signed: | Review Date : | | |

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| **Review 4:** | | **Yes** | **No** |
| * Are allocated risk levels and “Actions required” unchanged over the past 12 months? * Are Minimum Standards and Recommended Control Measures unchanged over 12 months? * ITD staffing details at this school have remained unchanged over the past 12 months? | |  |  |
| If the responses are “NO” for any question, record current details here, and list all staff changes *(with signatures)* | | | |
| Reviewed by: | Designation: | | |
| Signed: | Review Date : | | |