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| **OPS11** | **Use of Goods Hoists** | | |
| **Unit Name** |  | **Unit Number** |  |
| **Event Name** |  | **Event Dates** |  |
| **Risk Assessment Completed** | **Date** | **By** | **Signed** |
| **Risk Assessment Reviewed** | **Date** | **By** | **Signed** |

**Note** – Risk assessments must be retained for a period of 6 years.

This Good Hoist Risk Assessment must be completed for each hoist type and for each event. Complete the hoist details in Part 1, review Part 2, add any additional hazards/risks/controls in Part 3 and then detail the Safe System of Work for the relevant hoist/s in Part 4, adding images where appropriate and beneficial. The Risk Assessment and particularly the Safe System of Work should be reviewed by a Compass Health and Safety Manager.

Use the Safe System of Work when training staff to use the hoist/s and make sure that all authorised users are recorded in Part 4.

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| **Part 1 – Hoist Details** |

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| **Make and Model** |  | **Operation Type** | **€** Goods and Operator  **€** Goods Only |
| **Supplier** |  | **Supplier Emergency Contact (for safety issues such as entrapment)** |  |
| **Maximum Load Limit**  **(kg)** |  | **Maximum Wind Speed**  **(km/h)** |  |

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| **Part 2 – General Safety Controls** |

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| **What are the hazards?** | **Who might be harmed?** | **How might they be harmed?** | **What are you already doing to control the risks?** |
| Falls from height | Compass employees  Agency staff | Death, bruising, fractures, concussion, flesh wounds and other impact injuries | * Hoist must be installed and tested by competent persons. * Hoists must be provided with safety interlock systems. * Where provided, manufacturer's user instructions must be followed. * Provide a guide on how to use the hoist safely in the Safe System of Work/ Control Measures in Part 3 of this Risk Assessment for each type of hoist installed for use. * Hoists only to be used by trained employees listed on the authorised user list. * Authorised users must be 18 years old or above. * Maximum load limits must be adhered too. * Hoists must not be operated during strong winds – the wind speed limits must be adhered to. * Staff operating pallet trucks must wear safety footwear with reinforced toe caps. * Any damage or malfunction must be reported immediately, and operation of the hoist ceased. |

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| **What are the hazards?** | **Who might be harmed?** | **How might they be harmed?** | **What is required to control the risks?** |
| Falling objects | Compass employees  Agency staff | Death, bruising, fractures, concussion, flesh wounds and other impact injuries | * All edges must be provided with suitable edge protection. * Staff must make sure that all items are contained within the hoist cage and that goods are loaded evenly and securely. |
| Manual handling | Compass employees  Agency staff | Back and muscle strain | * Implement manual handling safety precautions. * Consider the task – what is the safest way to lift load, is more than one person needed? * Staff only to lift what they can manage safely and to get assistance if needed. |
| Entrapment | Compass employees  Agency staff | Cuts and bruising to fingers, hands and feet | * Hands and fingers must be kept clear or closing mechanisms, doors, gates, ramps and interlocks * Feet must be kept clear of ramps and gates. * Goods must be loaded so that there is easy access to hoist controls and gate mechanisms. * Staff operating pallet trucks must wear safety footwear with reinforced toe caps. |
| Damaged or faulty equipment | Compass employees  Agency staff | Electrocution/burns as a result of contact with faulty equipment | * Any damage or malfunction must be reported immediately, and operation of the hoist ceased. | |

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| **Part 3 – Additional Specific Hazards / Controls** |

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| **What are the hazards?** | **Who might be harmed?** | **How might they be harmed?** | **What is required to control the risks?** |
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| **Part 4 – Safe System of Work** |

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| Step 1 |  | Step 2 |  |
| Step 3 |  | Step 4 |  |
| Step 5 |  | Step 6 |  |
| Step 7 |  | Step 8 |  |
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| **Part 5 – Authorised User Register** |

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| **Employee name** | **Employee signature** | **Trainer name** | **Trainer initial** | **Date** |
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