**Risk Assessment Method Statement**

**(Signed Copies must be left with Genzyme on completion of work)**

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| **Company Name:** |  |
| **Company Contact:** |  |
| **Contact Number:** |  |
| **Project:** |  |
| **Work Description:** |  |

**Revision History:**

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| --- | --- | --- | --- |
| **Document Version** | **Author** | **Date** | **Reason for Update** |
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**Approval:**

Status Code:

A=Accepted

B=Accepted with Comments

C=Revise & Resubmit

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| **Role / Department** | **Print Name** | **Signature** | **Date** | **Status** |
| Requestor |  |  |  |  |
| Technical Review |  |  |  |  |
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**Comments:**

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| **Section** | **Comment** | **Vendor Acceptance (Initial)** |
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| 1. **Contractor:** | **(2) Contact Name:** | | | | **(3) Address:** | | | | | | | | **(4) Tel:** | | | |
| **(5) E-mail:** | | | |
| **(6) Project Name:** |  | | | | | | | | | | | | | | | |
| **(7) Description of the Task/Activity and Location(s) on Site:** |  | | | | | | | | | | | | | | | |
| **(8) Site Address/Location:** | Genzyme Ireland Ltd. | Old Kilmeaden Road | X91 TP27 | Waterford | Ireland | | | | | | | **(9) Start Date/Time:** | | | | | **Finish Date/Time:** | | | |
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| **(10) Personnel Involved:**  **Name(where possible):** | | | **Role/Trade:** | | | | | | | **Specific Training (submit copies)** | | | | | | |
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| **(11) Site Supervisor:** |  | | | | | | | | | | | | | **Tel:** | | |
| **(12) Safety Officer:** |  | | | | | | | | | | | | | **Tel:** | | |
| **(13) Key Plant, Equipment and Tools: (Attach Certification)** | **List details regarding delivery of equipment here and method for loading/unloading**  [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(14) Other Essential Equipment:**  (I.e. access platforms/winches/ladders, etc.) | [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(15) Sequence of Operations:**  **(step by step detail of how the work will be carried out. Include sketches**  **if required)** | **Generic requirements**   * **All persons involved with the work will receive, read, understand and agree with the method statement before work commences.** * **Works to be discussed with Area Owner.** * **All personnel working on this task will have appropriate training and competent to carry out the task in hand** * **Before work commences all personnel will make themselves familiar with the locations of emergency equipment and emergency arrangements. .** * **All personnel involved in works will have completed the Genzyme Contractor Induction as a minimum.** * **No works to commence until all permits are in place, read and signed off by all relevant personnel.** * **When it is found necessary or where a new or previously unrealised risk is highlighted, the RAMS will be amended and re-signed by those involved.** * **All updates will be communicated to personnel working on task** * **There must be up to date Portable Appliance Testing test on all equipment** * **All ladder work should be carried out from Genzyme approved ladders with working platform. Where this is not possible a risk assessment must be carried out prior to using the ladder.** * **Protection of persons not involved in work at height: verify that the area where the ‘work at height’ is to take place is made safe before issuing the permit. He/she must verify that the area below is barricaded off, that personnel working close-by have been informed and ensure that safe routing around the cordoned off area as well as access/egress from the area has been arranged** * **Hot work is defined as any temporary work that involves the use of open flames, or which produces sparking or which requires the use of flammable compressed gases or supplied fuels or which generates a hot surface. All hot work must be risk assessed and work can only commence once a hot work permit is in place.**   List sequence of works: | | | | | | | | | | | | | | | |
| **(16) PPE:** | Tick the appropriate PPE  [ISO Symbol Wear High-Visibility Clothing Symbol Label](http://www.safetysign.com/images/catlog/product/large/J6798.png)        Other as deemed by risk assessment (goggles, welding visor, fire resistant PPE etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |
| **(17) Method of Access and Egress to the work area:** (Ladders/MEWPS/Scaffold/ Step Ladder, etc.) | [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(18) Rescue Procedure:** | **The proper anticipation of and pre-planning for emergency events are essential elements of the Genzyme Ireland Safety & Environmental Management Systems and are also a mandatory element required by the Safety Health & Welfare at Work Act 2005 and associated Regulation.**  **The site Emergency Response Team will have a full complement of members during normal working hours. Outside of this time security will call the external Emergency Services directly and put out a pager call to any ERT members that may be on site to provide support.**  **Note: Rescue procedures must also be managed by the Vendor, e.g. rescue harness and lanyard available in the event of rescue from height**  [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(19) Fall Protection Measures:**  (Where work at height cannot be eliminated – consider both Personnel & Materials, i.e., Guard Rails/Toe Boards/Brick Guard/Safety Harnesses/Exclusion Zones, etc.) | [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(20) Hazardous Substances:**  **(Attach SDS if required)**  **Applicable? Yes / No :** |  | | |  | |  |  | | | |  |  | | |  | |
| **Very Toxic** | | | **Harmful / Irritant** | | **Corrosive** | **Dangerous**  **For the Environment** | | | | **Oxidizing** | **Highly flammable** | | | **Explosive** | |
| **Yes/No** | | | **Yes/No** | | **Yes/No** | **Yes/No** | | | | **Yes/No** | **Yes/No** | | | **Yes/No** | |
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| **(21) Chemical Substances Storage** | List (attached the most recent Safety Data Sheet-must be from within the last 5 years) and outline how they will be stored: | | | | | | | | | | | | | | | |
| **(22) Waste Disposal (if relevant)** | **Vendors must outline how they propose to segregate, remove and store waste prior to collection. Contractors are responsible for removal of all waste generated by work activities themselves. Vendors must use a waste vendor with current Waste Licence and Waste Collection Permit. This can be audited at any time.**   1. [Enter here if applicable] | | | | | | | | | | | | | | | |
| **(23) Details of Permits to Work:** | **All contractor work requires a General Permit to Work at minimum**  Tick appropriate boxes  Pipeline Breaking Procedure  Hot Work  Confined Space Entry  Work at Height (includes roof work)  Excavation Work Procedure  Live Electrical Work  Isolation of Equipment or Systems Energy (Lock Out/Tag Out) | | | | | | | | | | | | | | | |
| **(24) Safe Working Loads:** |  | | | | | | | | | | | | | | | |
| **(25) Works on/near critical systems.**  **Detail surrounding critical systems impacted by works and access potential impact** | Yes  No  Comments: | | | | | | | | | | | | | | | |
| **(26) Detail any isolations on any part of the system not covered under electrical isolation procedure** | Confirmation of isolation has been completed: Signed By­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Confirmation of isolation reinstated: Signed By­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |

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| **(27)** | | | | | |
| **Genzyme Security Emergency Phone +353 51 594 181**  **Emergency Services Number: 112 or 999** | | | | | |
| **Group Radio – Channel [Enter here if applicable]** | | | | | |
| **First Aiders** | | | | | |
| Name | Company | | Phone | | Radio |
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| **Local Hospital** | | | | | |
| Area | | Address | | Telephone | |
| Waterford Medical Centre | | Waterford | | 051- 852999 | |
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| **On hearing evacuation alarm sounders**  • Bring any equipment you are using to a safe stop where possible.  • Evacuate buildings by the **shortest** available safe route.  • Do not stop to collect personal belongings. Close doors and windows as you go.  • Proceed by the shortest available route to your designated assembly area.  • Keep the area around the control room clear as you exit. Crowding this area will cause delays in dealing with developing emergencies.  • **Direct all visitors/ contractors to the relevant assembly point where the visitor’s roll call will be read. Company names between A – F go to assembly point D (A – F). Company names between G – Z go to assembly point D (G – Z)**  • When at your assembly point listen attentively for names of colleagues that may not be there. If you know their whereabouts respond immediately to the Team Member reading the list.  • Assist the Team Member calling out the list in accounting for colleagues.  • Remain at your designated assembly point and await further instructions from the SEC relayed to you. Do not re-enter until instructed to do so by your Fire Warden | | | | | |
| **On discovery of a Fire**  **All Personnel - If you discover a fire:**  • Activate the nearest break glass unit.  • Contact Security (**+353 51 594 181 ext. 4181**) immediately and tell them:  • Who you are.  • Where the fire is.  • The type and extent of the fire (e.g. wood or solvent fire, small or large etc**.**)  • Attempt to fight the fire, only if it is safe to do so and you have been trained in the use of fire extinguishers. Never remain in the area alone – get help and support.  • Check that you have the correct fire extinguisher type before attempting to fight the fire.  • Ensure that you maintain your means of exit at all times when fighting a fire. Never put yourself or any of your colleagues in danger.  • If the fire appears to be getting out of control, do not continue to attempt to fight it- evacuate the building Immediately via your nearest emergency Exit. | | | | | |

**(28) Determining the risk category**

1. **Likelihood Categories**

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| **Likelihood** | **Description** |
| High (4) | Expected/very likely to occur during activity |
| Medium (3) | Likely to occur during activity |
| Low (2) | Unlikely to occur during activity |
| Remote (1) | Possible but not expected to occur-not probable |

1. **Consequence Categories**

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| **Consequence** | **Description** | **Loss (Euro)** |
| Catastrophic (4) | Fatality or offsite Environmental release | >5000,000 |
| Severe (3) | Sever injury/Illness/Onsite Environmental release | 100,00 to 500,00 |
| Minor (2) | Minor injury/Occupational illness/Onsite contained release | 5,00 to 100,000 |
| Negligible (1) | No injury/Illness/Harm to the Environment | <5,000 |

1. **Risk Assessment Matrix to Determine the Risk Category**

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|  | **Consequence** | | | |
| **Likelihood** | **Catastrophic (4)** | **Severe (3)** | **Minor (2)** | **Negligible (1)** |
| **High (4)** | **16** | **12** | **8** | **4** |
| **Medium (3)** | **12** | **9** | **6** | **3** |
| **Low (2)** | **8** | **6** | **4** | **2** |
| **Remote (1)** | **4** | **3** | **2** | **1** |

1. **Hazard Traffic Light**

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| **Risk Category Index** | |
| **16-12** | **Activity not permitted without further risk reduction measures** |
| **9-8** | **Risk is deemed to be in control and further risk reduction actions may be applied but are not mandatory** |
| **6-1** | **No further risk reduction/control measures required** |

**Risk Assessment must be completed or the document will not be reviewed**

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| **Task –** **[Enter here]** | | | | | | | | |
| **ACTIVITY / HAZARD / RISK** | **Before control measures** | | | **ACTIONS TO CONTROL RISKS** | **After control measures** | | | **RESPONSIBILITY** |
| **L** | **C** | **Risk** | **L** | **C** | **Risk** |
| **Hazard:** Mobile Elevated Working Platform (boom)  **Risk:** Fall from height,dropped objects  **Example only. Please delete row for submission** | 3 | 4 | 12 | * GA1 (thorough examination to be available and in date) * Only trained personnel to operate MEWP’s * Harness and lanyard to be worn & tied off to anchor point provided in the basket * MEWP check and GA3 to be completed * Harness certified by competent person every 6 months. Pre-use checks to be carried out before using harness * Exclusion zone to be formed around the MEWP where reasonably practicable. If exclusion zone isn’t possible then a spotter must be in place. * Signage to be in place also to alert other trades of the works taking place overhead * Good housekeeping within MEWP. | 1 | 3 | 3 | Operative  Supervision |
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| **Physical Hazards** | **List of possible hazards**  Manual handling  Slips/Trips/Falls  Work at height  Objects falling from a height  Entanglement in moving parts  Plant/Equipment/Machinery  Crushing/Trapping/Impact  Introduction of new machinery or work systems  Fire/Hot Works  Confined Space  Punctures/Lacerations  Ejection of material  Electricity  Buried Underground Services  Overhead Power lines  Roof work  Hot substances or surfaces  Hand tools (noise, eye injury, electrocution)  Housekeeping  Excavations  Pressure systems |
| **Hazardous Substances/ Health Hazards** | Negative stress  Noise  Harmful dusts  Gases  Vapours  Unsuitable lighting levels  Vibration (e.g. from pneumatic rock or concrete breakers or drills)  Extremes of temperature  Asphyxiants  Corrosives  Fungus, bacterium, virus, biological toxin etc.  Spills/release of hazardous substances to soil/water/air |
| **Human aspects** | Requirements/resources  Role/responsibility  Lone Work  Venerable People |

**Please note this list is non exhaustive and risks should be based on a task specific risk assessment**

**Task: [Enter here]**

Briefing delivered by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We (the undersigned) have read and understood the attached method statement and risk assessments and will comply with the specified requirements and control measures. If the work activity changes or deviates from that originally envisaged, we will seek further advice and request an amended method statement which we will submit to site management.

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