INDIVIDUAL VIBRATION RISK ASSESSMENT



Document created:	Version Number:	Version Date:	
Service:	<u> </u>	Section/Department:	Approved by/Document Owner:
Task:			Individual affected:
Reason for Vibration Risk Assessment? (Referral / Smoker / Young Person / Circulatory Problems) *delete as appropriate	Healthcare Provider referral for:	Health Surveillance Registered?	YES/NO
Work Location: Various EDC Council Areas			
Equipment/Plant: Vibrating tools (HAVS Risk): Vibrating Tools (WBV):			
Training or Competence Requirements: Annu	ual HAVS Training & regular HAVS TBT		

Risk Rating Calculator Action Level Table

	Likelihood (L) that hazardous event will occur		Consequences (C) of hazardous event occurring	Risk (R) rating	Action
1	very unlikely	1	insignificant – no injury	20–25	Stop – stop activity and take immediate action
2	unlikely – may happen	2	minor – minor injuries needing first aid	15–16	Urgent action – take immediate action and stop activity if necessary, maintain existing controls rigorously
3	fairly likely	3	moderate – up to three days' absence	8–12	Action – improve within specified timescale
4	likely	4	major – more than seven days' absence	3–6	Monitor – look to improve at next review or if there is a significant change
5	very likely - certain	5	catastrophic – death or severe/life changing injury	1–2	No action – no further action but ensure controls are maintained and reviewed

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Ref.	Activity / Hazard	Potential Loss	Control Measures		Control Measures		Risk R		
No.				L	С	R (LxC)			
1.	Use of Hand Held/Operated Vibrating Tools	Hand Arm Vibration Syndrome, Loss of dexterity, Reduced circulation, Raynaud's Disorder	 This Vibration Risk Assessment will be used in conjunction with task specific risk assessment that covers specific controls & PPE requirements. Where possible the need to use vibrating tools will be eliminated and other ways of working will be considered. Careful planning will be carried out in advance to ensure the Daily Vibration Points are kept below the Exposure Action Value (EAV) and under no circumstances will exceed the Exposure Limit Value (ELV). The use of Vibrating tools will be RESTRICTED (see below) until further diagnosis is received from Health Surveillance Provider. Maximum EAV - 50 points per day Maximum ELV - 100 Points per day Daily Vibration Points is a cumulative total of points used from different tools during that day and accurate trigger times will be recorded for each tool used. HAVWEAR Operator ID card will be reprogrammed with restricted values. Vibration points will be accurately recorded using a HAVWEAR monitor, extra care will be taken to ensure each tool used is synced to HAVWEAR before use. Work will stop, when safe to do so, on receipt of an EAV alarm. Line Manager will set up a report showing Sensed Exposure Points (SEP) & Tool Exposure Points (TEP) and use the highest value points to calculate Daily Vibration Points. Review of daily operator tool use will be carried out by line management on a weekly basis to ensure daily vibration points remain below the EAV. Tools being used will be tagged and recorded with tool ID, vibration magnitude, date of measurement and max daily usage. Where possible tools being used will be chosen for their low vibration magnitude. Regular breaks will be taken, hands kept warm and every effort made to increase blood circulation. 						

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No.					O	R (LxC)
2.	Exposure to Whole Body Vibration (WBV)	Back Pain, Musculoskeletal Disorders, Reduced circulation, Raynaud's Disorder	 Equipment being used will be chosen for their low vibration magnitude All plant will be maintained by EDC plant workshop under a preventative Maintenance program. Where plant is recognised as creating excessive vibration, this will be reported to the plant workshop. Off-road driving will be kept to a minimum. 			
3.	Inadequate Health Surveillance participation	Escalation of HAVS diagnosis	 Requests for information from EDC Occupational Health Provider will be dealt with in a timely manner. Individual: Will provide accurate & timely information to Occupational Health Provider and attend clinic as requested. Line Manager: Will provide effective two-way communication with individual on vibration reports, requests to attend clinic & assessment of risk. Health & Safety Team: Will provide advice, guidance, information & training to reduce the risk to ALARP. 			

Ref No.	ADDITIONAL CONTROL MEASURES		L (1 – 5)	C (1 – 5)	R (1 – 25)	Actioned By (Print Name) & Target Date	Date Control implemented	Sign to Confirm
1.								
	ASSESSOR(s) PRINT NAME/JOB TITLE:	ASSESSO SIGNAT		•			ASSESSM	IENT
ASS	BESSMENT REVIEWED BY:	REVIEW D	ATE:				D,	ATE:

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