

# RISK ASSESSMENT



Work Activity/Task	<b>Treatment of Cluster Fly</b>
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Date of Assessment	<b>15/01/2025</b>	Risk Assessment Assessor	<b>Mick Kilburn</b>	Signature of Assessor	
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Location of Activity/ Task	Site Contact Name
	Site Contact Number

SEVERITY	LIKELIHOOD					SEVERITY					1 - 4 Low Risk	5 - 9 Medium Risk	10 - 15 High Risk	16 - 25 Very High Risk
	5	4	3	2	1	5	4	3	2	1	Continue with existing control, however monitor for changes. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires attention to reduce the rating as well as regular ongoing monitoring. Implement any additional control measures required, within the timescales given in the risk assessment.	Requires immediate attention to bring the risk down to an acceptable level. Implement the control measures required, within the timescales given in the risk assessment and continue to review working practices to reduce the probability of an accident to the lowest possible level.	Stop immediately – the risk is too high. Take immediate action to reduce the risk to the lowest level possible.
	5	4	3	2	1	5	4	3	2	1				
	4	3	2	1		4	3	2	1					
	3	2	1			3	2	1						
	2	1				2	1							
	1					1								
	LIKELIHOOD													

## COSHH Hazardous Substances

## Personal Protective Equipment

Are any products used in this task harmful/Irritant? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Are any products used in this task Corrosive? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Are any products used in this task Flammable? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Does this task require Head protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require eye protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require foot protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require ear protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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**No pesticides will be used during this audit/survey**

**PPE will be worn in accordance with site specific rules**

Are any products used in this task explosive? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Are any products used in this task a health hazard? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Are any products used in this task harmful to the Environment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Does this task require hand protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require Hi Visibility? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require clothing protection? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Does this task require raspatory protection? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Please highlight all substances being used in this work task and any personal protective equipment required to protect the user.

Identified Hazards	Persons who may be affected	Risk Level before any control measures S x L = R				Risk Mitigation Measures	Additional Control Measures Required	Actions Required and completed by	Final Risk Level S x L = R			
		S	L	R	RR				S	L	R	RR
Unknown Hazards	EPM & Site personnel	5	5	25	VHR	<p>Ensure the Client is aware that you are on site.</p> <p>Where possible sign in and sign off on the site either verbally and/or by filling in the visitor's book.</p> <p>Ensure familiarity with site, client's activities and specific safety rules. Complete induction if required.</p> <p>Fill out the appropriate permits to work when working in certain areas designated by the client where applicable.</p>			2	2	4	LR
Slips, Trips & Falls	EPM Staff	3	3	9	MR	<p>Safety boots with good grip to be worn at all times. Ensure all work areas are clear.</p>			2	1	2	LR
Contact with Machinery	EPM Staff	4	4	16	VHR	<p>EPM staff are not to use or approach any machinery without the permission of site contact. The permit to work system is then required before inspection of any machinery.</p>			2	2	4	LR
Moving Vehicles	EPM Staff	5	5	25	VHR	<p>If vehicles are present on site, EPM personnel must ensure site contact is aware of your existence and wear a high visibility vest/coat. Keep to authorised walkways.</p>			2	2	4	LR

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		S	L	R	RR				S	L	R	RR
Noise	EPM Staff	4	2	12	HR	An assessment must be completed before entry to any site and PPE worn as instructed. Always wear ear protection where mandatory signs are shown			2	2	4	LR
Application of Pesticides	EPM & Site Personnel	4	2	12	HR	<p>Only approved pesticides to be used.</p> <p>Ensure amount of pesticides used is kept to a minimum with the emphasis on treating the harbourage of the pests concerned. If the pesticides are used outdoors ensure it has appropriate approval. Place rodenticides in protected bait boxes.</p> <p>Restrict access to pets by placing baits in bait boxes, if necessary these should be tamper-resistant</p> <p>Contact dust and gel only applied to known harbourages and not placed in the open.</p> <p>Where applicable mix the rodenticide in an area where spillage can be speedily cleared up. Dispose of excess rodenticide and packaging in a practical, appropriate manner. Packaging should be ripped or punctured to prevent further use.</p> <p>Provide information to the</p>			2	2	4	LR

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		S	L	R	RR				S	L	R	RR	











## Method Statement



Work Task	<b>Treatment of Cluster Fly</b>		
Client Name			
Site Address			
Site Contact		Contact Number	
 Project Manager		Contact Number	
 Contact		Contact Number	

### **Description of work carried out**

1	EPM personnel must inform site contact to arrange for permission to carry out work activity and inform the estimated time of arrival.
2	On arrival EPM personnel are to sign in the visitor's book and read the site specific health & safety rules. Before the commencement of any contract works, attendance of a site induction will be required if necessary. If a permit to work is required this will be completed before work commences.
3	Once the appropriate paperwork has been completed and permission has been granted the EPM operative will undertake a full inspection of the premises.
4	A detailed inspection will be carried out to all relevant areas to establish the source of the Cluster fly infestation and identify the area. The technician will then determine the course of action required.
5	All treatments must be carried out in line with the BPCA principles and Guidance document as can be found at the bottom of this method statement.
6	Once treatment has been completed all pesticides and tools are to be collected and removed from site and all areas cleaned and tidied.
7	Once the treatment has been completed the technician will report to a designated area to compile a report. This will then be discussed with the site manager or contact. A signature will be required from the site contact before leaving site.


**Accident & Emergency Procedures**

In the event of an accident this must be reported to the site manager/contact. All accidents must be reported in the site accident book. Contact should also be made with the EPM office and accidents reported in the accident book. If first aid can be applied this must be carried out using the first aid equipment stored in the vehicle. If the accident is serious the emergency services need to be contacted via the 999 number. Please ensure H&S Data sheets are available if required.

**Equipment Likely to be used.**

Torch, monitoring station keys, screwdrivers, scrapers, laptop tablet, metal detectable pen, Eradi Bee Jacket and Veil, rodent glue boards, (for emergency use only),

**Personal Protective Equipment expected to be used**

Safety Boots, Coveralls, Safety Glasses, Ear protection, hard hat, disposable gloves, Hi-visibility vests. Face mask with appropriate filters.

**Certification Required**

Minimum of a British Pest Control Association Diploma, see <https://bpca.org.uk/a-z-of-pest-advice/cluster-flies-control-get-rid-of-cluster-flies-bpca-a-z-of-pests/189170> for guidance.

**EPM Personnel Involved in the task**
