

JOB SAFETY ANALYSIS WORK SHEET/SAFE WORK PROCEDURE

JOB:	Deep Fryer Operation			DATE	
ANALYSIS BY			REVIEW & APPROVED BY		
REQUIRED AND/OR RECOMMENDED PERSONAL PROTECTIVE EQUIPMENT:			Uniform, gloves, safety footwear, apron		
STEPS	SEQUENCE OF BASIC JOB STEPS	POTENTIAL ACCIDENTS OR HAZARDS	RISK RANKING	RECOMMENDED SAFE STEPS	RESIDUAL RISK RANKING
1.	Prior to using equipment, appliances and tools, check that it is in a safe and hygienic condition.	Injury, electric shock, damage, fire, contamination	2	Ensure all equipment is clean, not damaged & correctly assembled Check that electrical equipment has a current test tag. 'Yearly' for catering unless otherwise specified Drip containers must be in place where required and designed. <b><u>Never wipe hot surfaces with wet or damp cloths. Use correct gloves at all times.</u></b>	5
2.	Check oil level.	Fire	1	Oil level must be at operating level.	5
3.	Test & use portable residual current device (RCD/ELB) on all portable electrical equipment	Electric shock	2	Reference Generic SWP 39 Portable RCD	5
4.	Turn power on to fryer.	Back injury.	2	Bend knees.	5
5.	Adjust thermostat to warm.	Fire.	4	Warm or melt frying oil at low temps.	5
6.	Adjust to operating temperature.	Product damage, fire	2	Not above 200°C.	5
7.	Ensure oil is free of food particles.	Breakdown of oil.	4	Should be cleaned after use.	5
8.	Place baskets securely.	Splash, burn.	2	Secure baskets on fitting provided.	5
9.	Fill baskets with food.	Splash, burn.	2	Not too full - gently and slowly ( <b><i>Avoid water contamination</i></b> ).	5
10.	Lower into oil gently.	Splash, burn.	2	Avoid any splashing what-so-ever.	5
11.	Shake baskets gently.	Splash, burn.	2	To rotate food for even cooking.	5
12.	Remove baskets and secure.	Splash, burn	2	Hang basket on rail provided.	5
13.	Tip food into receptacle.	Splash, burn, contamination	2	Place food into hygienic container	5
14.	Wash baskets and put away.	Contamination	4	Store in a hygienic area	6

SWMS No: 432	VERSION 1B	ISSUING DATE: 22.06.2012	REVISION DATE: 22.06.2013	PAGE 1 OF 4
--------------	------------	--------------------------	---------------------------	-------------

STEPS	SEQUENCE OF BASIC JOB STEPS	POTENTIAL ACCIDENTS OR HAZARDS	RISK RANKING	RECOMMENDED SAFE STEPS	RESIDUAL RISK RANKING
15.	Turn fryer off.	Back injury, fire	2	Bend knees - ensure fryer is turned off properly	6
16.	Scoop oil clean.	Burns, slips	4	Caution hot oil - place unwanted particles in rubbish without spilling drips on floor etc.	6
17.	Wipe fryer down	Burns	2	Caution hot oil - do not lean on fryer	5
18.	On completion place metal lids on fryers	Burns, contamination	2	<ul style="list-style-type: none"> <li>• Ensure that the fryer lids are fitted properly.</li> <li>• Check to ensure lids display "Caution - Hot Surface" signs.</li> </ul>	5
<b>Fish Frying</b>					
1.	Lay battered fish into oil so that splash is away from you	Burns	2	Caution - Don't dip fingers in oil.	5
2.	Clean up all spills.	Slips/falls	2	Clean up immediately	5
3.	Use scoop to take fish out of fryer	Contamination, burns	2	Use clean scoops and place fried product on hygienic trays	5

**NOTE: The Risk Score Matrix must be used to calculate the risks of each step**

**Safe Work Method Statement (part 3) SWMS 432**

**Training Required to Complete Activity:** Instruction under supervision of an experience employee

List of Training Required, e.g., Hazardous Substance, First Aid, PPE Usage	Training details are located on (please tick box):	List Codes of Practice, Legislation, Standards which apply to this Activity:
1. Manual Handling	Project File: <input type="checkbox"/> Training Data Base: <input type="checkbox"/> Other (specify): <input type="checkbox"/>	NSW WHS Act 2011 NSW WHS Regulation 2011 Australian Standards Codes of Practice

List Plant/Equipment/Personal Protective Equipment required for this Activity:	List Equipment Maintenance Checks required for this Activity: PPE, Tooling	Engineering Certificates/Permits/Approvals required for this Activity
		WorkCover Notification

List:	Complete daily maintenance check:  First aid kit:  PPE Required:	Type	Reference/Document

Person(s) Responsible for Supervising/Inspecting Work:

**Risk Assessment**

- Identify each step in the task.
- Identify all hazards associated with each step or work environment factor. Record the hazard in the table above. Use the Hazard Identification Checklist as a guide.
- Identify the 'severity' & 'likelihood' (using the information on page 1) for each hazard with no controls in place. Determine the 'risk score' for each hazard using the grid shown and record it in the table above.
- Identify all existing controls and/or action required for each hazard (using the hierarchy of control on page 1) and record them in the table below.
- Identify the 'severity' & 'likelihood' (using the information on page 1) for each hazard with controls implemented. Determine the 'risk score' for each hazard using the grid shown and record it in the table below.
- Identify any future controls that may assist in reducing the risk further

**Hazard Identification Checklist**

Severity	Likelihood			
	A – Very likely	B - Likely	C – Unlikely	D – Very unlikely
<b>1-Catastrophic</b>	Very High (1)	High (1)	Medium-High (2)	Medium (3)
<b>2-Major</b>	High (1)	Medium-High (2)	Medium (3)	Medium-Low (4)
<b>3-Moderate</b>	Medium-High (2)	Medium (3)	Medium-Low (4)	Low (5)
<b>4-Minor</b>	Medium (3)	Medium-Low (4)	Low (5)	Very Low (6)

**Safe Work Method Statement Training Record SWMS 432**

Person(s) responsible for supervising the work, inspecting and approving work areas, work methods, protective measures, plant equipment and power tools.  
 NB list of qualifications/experience is held on local files

NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:
NAME:	POSITION:	SIGNATURE:

For full list of names and signatures of staff instructed in this SWMS see training records?

End this Document.

SWMS No: 432	VERSION 1B	ISSUING DATE: 22.06.2012	REVISION DATE: 22.06.2013	PAGE 4 OF 4
--------------	------------	--------------------------	---------------------------	-------------