

Volunteers are prohibited from applying herbicide with hand held or other spray applicators unless they hold a Chemcert or equivalent qualification and have gained the approval of their Bushcare coordinator.

## Job Safety Analysis

<b>Area/Unit/Location:</b>		<b>Project/Job Name/No:</b>		<b>Manager:</b>	
<b>Work Activity/Task: Use of herbicides (cut &amp; paint)</b>		<b>Staff consulted: Name</b>		<b>Signature</b>	<b>Date</b>
<b>Date to commence:</b>	<b>Date of JSA:</b>				
<b>Prepared by:</b>					
<b>Signature:</b>					
Item	Job Step Break the job down into steps.	Potential Hazard What can harm you?	Risk Rating	Controls What you are going to do to make the job as safe as reasonably practicable.	Person Who Will Ensure this Happens
1.	Decant herbicide and herbicide from bulk container into labelled applicator bottles. Add water if appropriate.	<ul style="list-style-type: none"> <li>• Neat herbicide/Active ingredient</li> <li>• Skin contact/absorption</li> <li>• Splashes to eye, mouth, ear face</li> <li>• Breathing vapours / inhalation</li> </ul>	M	<ul style="list-style-type: none"> <li>• Have a good working knowledge of herbicide. Read MSDS (attached). Wear required PPE to protect skin &amp; eyes. Perform task in chemical shed (to contain spills) Doors open for ventilation.</li> </ul>	staff member with Chemcert or equivalent training.
2.	Load and transport applicator bottles	<ul style="list-style-type: none"> <li>• Spills of neat or high percentage herbicide. Resulting in Skin contact/absorption or Splashes to eye, mouth, ear and face.</li> <li>• Theft of herbicide from vehicle</li> </ul>	M	<ul style="list-style-type: none"> <li>• Transport labelled applicator bottles upright in a sealed, labelled container. NB label must show correct signal heading of herbicide.</li> <li>• Securely attach container to vehicle.</li> <li>• If vehicle is to be left unattended lock herbicide container in a secured box, locker, or vehicle cabin.</li> </ul>	staff member or Bushcare volunteer

In the event of a spill or splash resulting in contamination of a person see attached FIRST AID PROCEDURES  
 ALL HERBICIDE USAGE MUST BE LOGGED see attached HERBICIDE APPLICATION RECORD



## Record of Job Safety Brief

**Workplace:**

**Date:**

**Supervisor/presenter:**

**Subject:**

**Duration:**

Print Name	Signature	Print Name	Signature

**Documentation and other information provided (including video):**

**Comments & points raised:**

Corrective Action	Action by	Action Complete	
		Sign off	Date

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