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| **Safety Task Card** |
| **CAT 16** |  **Microwave Ovens**  |
| **Workplace Safety Hazards** |
| What are the hazards?Contact with hot surfaces, hot foods, hot liquids and steamEruption of heated liquids and liquefied foodsOver-heating foodElectrical hazards | How might they be harmed?Burns and ScaldsElectric shockFire and explosion |
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| **Safe System of Work** |
| * Microwave ovens only to be used and cleaned by trained employees, all users must complete the Preventing Burns and Scald Injuries Safety Conversation 3
* Where microwave ovens are provided for customer use, user instructions must be displayed.
* Follow manufacturer's user instructions where these are available
* Microwave ovens to be maintained by competent persons and in accordance with manufacturer's guidance where available
* Cooking/heating instructions to be followed where provided, especially in respect of foods that contain a high fat or sugar content.
* Microwave ovens to be sited on a stable level surface that is not above eye-level and away from main walkways whenever practicable.
* Only microwaveable food containers are to be used in microwave ovens.
* Metal containers and metal utensils must not be used in the microwave oven.
* Where food is covered with food-film/cling film, the film should be pierced to allow steam to escape during heating.
* If there is a likelihood of hot water collecting on the top of any container lid or cover, the containers should be tilted slightly away from the body before attempting to remove it from the microwave oven.
* When heating liquids and liquefied foods, the microwave oven should be stopped half way through the heating process and the food/liquid should be stirred to prevent super heated pockets from developing.
* Oven cloths/gloves or other sector specific PPE to be used when handling and removing hot foods or containers from the microwave oven.
* Spillages to be cleaned up as they occur.
* Implement the Safe System of Work/Control Measures in Cooking, Ref. CAT 15 and Electrical Safety, Ref. MAN 05 Risk Assessments including annual PAT tests.

**For Sector Specific Controls please review and complete the box below** |
| **Site Specific Actions**List any actions required in addition to the above safe system of work |
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| The above control measures are implemented within my unit. All relevant staff are aware of these control measures and this is recorded in the training record for this safety task card. |
| Unit Manager Name | Signed | Date |
| **Safety Card Training Record** |
| **CAT 16** |  **Microwave Ovens** |
| I confirm that I fully understand the risks and control measures associated with the taskand that I will follow the Safe System of Work at all times.  |
| Operative Name | Signature | Date |
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