

Policy & Procedure Manual	Procedure: Proc.14	Date:
General Environmental Risk	Authorised by: <i>managing dir.</i>	Page: 1 of 1

14. General Environmental Risk

1.0 Policy

- 1.1 In recognition of our general environment duty, all reasonable and practicable measures are taken to prevent and/or minimise any activity that is likely to cause environmental harm.

2.0 Purpose

- 2.1 This procedure describes how our general environmental duty is performed.

3.0 Scope

- 3.1 This procedure applies to our general environmental duty as described in Environment Protection Legislation.

4.0 References

- 4.1 *see the Environmental Protection Act or the equivalent legislation in your State*

5.0 Definitions

Nil

6.0 Procedure

- 6.1 The Managing Director will decide on and implement all reasonable and practicable measures to prevent or minimize any operational activity that pollutes, or might pollute, the environment.
- 6.2 The following factors are to be considered in deciding upon the required measures:
- The nature of the harm or potential harm;
 - The sensitivity of the receiving environment;
 - The current state of technical knowledge for the activity;
 - The likelihood of successful application of the different measures that might be taken; and
 - The financial implications of the different measures as they would relate to the type of activity.

Policy & Procedure Manual	Procedure: Proc.15	Date:
Air Quality	Authorised by: <i>managing dir.</i>	Page: 1 of 3

15. Air Quality

Policy

1.0 Policy

- 1.1 'The primary drycleaning emissions of solvents are to air through both fugitive and direct emissions at the end of the cycle when the machine door is opened during loading and unloading operations.' (National Pollutant Inventory Emission Estimation Technique Manual for Drycleaning 3.1)

'The major potential hazard in the use of perc in drycleaning is the inhalation of vapours at concentrations above those prescribed for safe operation' (Code of Practice and Training Program for Safe Handling of Perchloroethylene Solvent in the Drycleaning Plant p13).

We endeavor to optimise air quality by ensuring that exposure and emissions are minimised by operating a safe environment by adopting effective means for limiting the concentration of perc and other solvent vapours in the atmosphere by:

- . proper maintenance of equipment;
- . ensuring adequate ventilation;
- . training staff in the safe handling of solvents, our policies and procedures; and
- . ensuring our policies, procedures and practices are consistent with Drycleaning Industry Regulation Standard.

Exposure to Perc (and other solvents) should be kept as low as practicable, as recommended by Worksafe Australia.

The threshold limit values (TLVs) should not exceed an 8-hour time-weighted average (TWA) of 50 ppm and a 15-minute short-term exposure limit (STEL) of 150 ppm.

Exposure Limits for Perchloroethylene		
NOHSC* Exposure Standard	Vapour Conc. Ppm	Recommended Max Limits
8-hour TWA	50	8 hrs/day (40hrs/week)
15-minute STEL	150	Not to be exceed in any 15 min period (the 8-hour TWA must still be met)

Procedure

2.0 Purpose

- 2.1 This procedure describes how air quality is maintained.

3.0 Scope

- 3.1 This procedure applies to the maintenance of air quality through management of emissions to air of Perchloroethylene (and other solvents).

4.0 References

- 4.1 National Pollutant Inventory Emission Estimation Technique Manual for Drycleaning
- 4.2 Code of Practice for the Safe Handling of Perchloroethylene in the Drycleaning Plant
- 4.3 Code of Practice and Training Program for Safe Handling of Perchloroethylene Solvent in the Drycleaning Plant
- 4.4 Manufacturer's instructions or Material Safety Data Sheets
- 4.5 Procedure No. 12 Spills and Leakages

5.0 Definitions

- 5.1 NOHSC National Occupational Health and Safety Commission
- 5.2 STEL Short Term Exposure Limits
- 5.3 TLV Threshold Limit Values
- 5.4 TWA Time Weighted Average

6.0 Procedure

Loading/Unloading**

- 6.1.1 The loading door shall be kept closed except while loading and unloading garments, and adding new solvent.
- 6.1.2 Machines are not to be opened during a cycle. Garments may not be added during a cycle. Once started, machines are to remain closed until the cycle is completed.
- 6.1.3 Loading and unloading garments should only take place in bulk. Garments should not be removed one at a time and placed on hangers.

Leak Detection**

- 6.2.1 A thorough leak test of all pipe work, valves, gaskets and the access door seals is conducted weekly. Tests are conducted whilst the machines are in operation using an electronic leak detector, or *self indicating detector tubes*. If a halide lamp is used care must be taken to avoid the potential risk of toxic gas production if there is a high concentration of volatile solvent in the area.
- 6.2.2 A leak test is conducted after the replacement of new gaskets.
- 6.2.3 All leaks are fixed immediately upon detection and the rectification work is recorded in the maintenance records.
- 6.2.4 Results of leak detection tests and air monitoring tests are recorded. (see Register 12 Air Quality Register).

Door Seals**

- 6.3.1 All door seals shall be kept clean and should be wiped daily.
- 6.3.2 Access door seals are replaced at least annually, or sooner, whenever a leakage is found and recorded in the maintenance records.

** Adapted and/or taken from the Code of Practice and Training Program for Safe Handling of Perchloroethylene Solvent in the Drycleaning Plant. Drycleaning Institute of Australia 1996.

Emissions Measurement (see pages 14,15 & 16 of the Code of Practice for the Safe Handling of Perc)

6.4.1 Emissions to air are monitored, responded to appropriately and recorded.

6.4.2 When using an electronic leak detector:
. a very fast ticking indicated high vapour levels; and
. a continuous squealing indicates a serious leak.

Spill Containment Measures

6.5 Spill containment measures are instituted to prevent/minimize chemicals being discharged into drains or off-site.

NB. Do not flush spills down stormwater or sewer systems.

Advise Neighbours

6.6 Advise neighbours if there is risk of them being effected by a spill.

Venting

6.7 Vapour absorbers are used when venting fumes arising from a spill and, as much as possible without compromising other buildings, vapours are vented externally.

NB. Impacts on neighbours are considered before any venting.

Notify Authority

6.8 The relevant Environmental Protection Authority is notified if spills escape beyond the boundaries of the premises or down drainage/sewer systems.

Policy & Procedure Manual	Procedure: Proc.16	Date:
Cooling Towers and Legionella	Authorised by: <i>managing dir.</i>	Page: 1 of 3

16. Cooling Towers and Legionella

Policy

1.0 Policy

1.1 Legionnaires' disease is a potentially fatal form of pneumonia that can affect anybody but there are a number of risk factors required to create a risk of acquiring the disease:

- The presence of legionella bacteria
- Conditions suitable for multiplication of the organisms eg. suitable temperature (20°C-50°C) and a source of nutrients such as sludge, scale, rust, algae and other organic matter
- A means of creating and disseminating breathable droplets eg. the aerosol generated by a cooling tower, shower or spa
- The presence (and numbers) of individuals who may be exposed, especially in premises where the people are particularly susceptible because of age, illness, weakened immune system, smoking etc.

During the normal operation of a cooling tower, aerosols are formed which will be carried to the environment through the tower exhaust. If legionella are present in the tower water, breathing the aerosols can result in infection, particularly if the person is susceptible to infection by legionella.

Procedure

2.0 Purpose

2.1 This procedure describes how cooling towers are maintained and tested to prevent legionella.

3.0 Scope

3.1 This procedure applies to the maintenance and testing of all cooling towers

4.0 References

- 4.1 AS/NZS 4360 1999 Risk Management
- 4.2 State Building Act's and Building (Cooling Tower) Regulations
- 4.3 Plumbing (Cooling Tower) Regulations
- 4.4 Health (Legionella) Regulations
- 4.5 Occupation Health and Safety Act
- 4.6 Regulatory Impact Statement, Health (Legionella) Regulations 2001
- 4.7 AS/NZS 3666 1995, 2000 Air-handling and water systems of buildings – Microbial control, Drift Eliminators.

5.0 Definitions

- 5.1 Biocide means a physical or chemical agent capable of killing micro-organisms, including legionella
- 5.2 Clean means to render free from visible sludge, foam, slime (including algae and fungi), rust, scale, dirt, and any deposit or accumulation of impurities or other foreign material
- 5.3 Disinfect means to carry out a process which-
 - (a) is intended to kill or remove pathogenic micro-organisms, including legionella; and
 - (b) consists of dosing the system water with-

- (i) a chlorine-based compound, equivalent to at least 10mg/L of free chlorine for at least one hour, while maintaining the pH of the water between 7.0 and 7.6; or
 - (ii) a bromide-based compound, equivalent to at least 20mg/L of free bromide for at least one hour, while maintaining the pH of the water between 7.0 and 8.5
- 5.4 Responsible person means the person who owns, manages or controls the cooling tower system.

6.0 Procedure

6.1 Water

Cooling tower water is kept clean and is continuously treated with

- (a) biocide(s) to control the growth of legionella and other micro-organisms including legionella; and
- (b) chemicals and other agents to minimize scale formation, corrosion and fouling

6.2 Start-Up and Shut Downs

Before initial start-up and after shut-downs of more than one month cooling tower systems must:

- (i) have a chlorine-compatible bio-dispersant added,
- (ii) be disinfected, cleaned and
- (iii) re-disinfected.

6.3 Minimum Six-Monthly Disinfection

At a minimum cooling tower systems must:

- (i) have a chlorine-compatible bio-dispersant added,
- (ii) be disinfected, cleaned and
- (iii) re-disinfected.

6.4 Minimum Monthly Operating Inspection and Testing

6.4.1 Cooling towers are inspected at least monthly (may be fortnightly during late summer and autumn) to check that the system is operating correctly and without defects,

6.4.2 At least once each month (may be fortnightly during late summer and autumn) a sample of recirculating water is taken and is delivered to a laboratory for testing and reporting on for bacterial count.

6.5 Minimum Monthly Bacterial Count

Cooling towers are inspected at least monthly (may be fortnightly during late summer and autumn) to determine the system's total bacterial count

6.6 Bacteria in excess of 100,000 per Millilitre

6.6.1. Within 24 hours of receiving a report that tested water contains in excess of 100,000 bacteria per millilitre:

- (i) the water must be manually dosed with additional quantities of biocide or an alternative biocide to that being used,
- (ii) the water treatment program, tower operating and maintenance program must be reviewed,
- (iii) any faults must be corrected,
- (iv) any changes necessary to prevent a re-occurrence of the faults must be implemented,

- (v) the water must then be re-tested between 2-4 days and another sample taken and delivered to a laboratory for testing and reporting on for bacterial count.
- 6.6.2 Within 24 hours of receiving a report that the re-tested water contains in excess of 100,000 bacteria per millilitre
 - (i) the tower must be disinfected, cleaned, re-disinfected and further re-tested
 - (ii) the above steps must be repeated within 2 - 4 days until the bacteria count does not exceed 100,000 bacteria per millilitre in two consecutive water samples taken approximately one week apart, or, alternatively, the system must be closed until the problem has been remedied.

6.7 Legionella in Water (without suspected or known case/s of legionellosis)

- 6.7.1 Where legionella is detected in the system (without suspected or known case/s of legionellosis)
 - (i) the system must be disinfected
 - (ii) the water treatment program, tower operation and maintenance program must be reviewed,
 - (iii) any faults must be corrected, and any changes necessary to prevent a re-occurrence must be implemented
 - (iv) the water must then be re-tested within 24 hours
 - (v) if legionella is still present, the water must be disinfected, cleaned, re-disinfected and further re-tested within 2 – 4 days with a further sample taken and delivered to a laboratory for testing and reporting on for legionella
 - (vi) where legionella is still present, the above steps must be repeated until legionella is not detected in two consecutive water samples taken approximately one week apart, or,
 - (vii) alternatively, the system must be closed until the problem has been remedied.

6.7 Legionella in Water (suspected or known case of legionellosis)

- 6.7.1 The system is promptly tested and a sample taken and delivered to a laboratory for testing and reporting on for legionella.
- 6.7.2. Decontaminated as directed by Statutory Authority.

6.8 Records – Maintenance Log Book

- 6.8.1 A full up-to-date maintenance log book is maintained on the premises showing:
 - (i) all maintenance activities
 - (ii) all biological sample test results
 - (iii) any Government issued approval authorising a different method of maintenance and testing.

6.9 Drift Eliminators

- 6.9.1 Drift Eliminators (appropriate to the cooling tower) are fitted and maintained.

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Hazardous Substances Risk Assessment	Authorised by: <i>managing dir.</i>	Page: 1 of 4

17. Hazardous Substances Risk Assessment

Policy

1.0 Policy

- 1.1 We ensure that all risks with any hazardous substances associated with drycleaning operations are identified, assessed and responsibly managed.

Procedure

2.0 Purpose

- 2.1 This procedure describes how any hazardous substances associated with drycleaning operations are identified, assessed and responsibly managed.

3.0 Scope

- 3.1 This procedure applies to all hazardous substances associated with drycleaning operations.

4.0 References

- 4.1 AS/NZS 4360 1999 Risk Management
- 4.2 Occupational Health and Safety Act
- 4.3 Occupational Health and Safety (Hazardous Substances) Regulations
- 4.4 Code of Practice for Hazardous Substances
- 4.5 List of Designated Hazardous Substances
- 4.6 Approved Criteria for Classifying Hazardous Substances

5.0 Definitions

- 5.1 'Hazardous substances are classified only on the basis of health effects (whether they may be immediate or long term), while dangerous goods are classified on the basis of immediate physical or chemical effects such as fire, explosion, corrosion and poisoning, affecting property, the environment or people'.

6.0 Procedure

6.1 Consultation

- 6.1.1 Consultation occurs with staff when practicable:
 - (i) when identifying hazardous substances to establish priorities for assessment
 - (ii) during the assessment process
 - (iii) when determining which control strategies should be applied
 - (iv) when reviewing the effectiveness of control measures.

6.2 Material Safety Data Sheets (MSDS)

- 6.2.1 Current MSDS are maintained and are easily accessible
- 6.2.1 MSDS details are entered in register #7 MSDS Register/ Register of Hazardous Substances

6.3 Register of Hazardous Substances

6.3.1 the product name of all hazardous used in the workplace is entered in #7 MSDS Register/Register of Hazardous Substances

6.3.2 the register is updated when new hazardous substances are introduced, when an existing hazardous substance is discontinued, or when an MSDS is revised.

6.4 Labels

6.4.1 All containers of hazardous substances are labelled with the manufacturer's or importer's label.

6.4.2 the supplied label must be in English and contain:

- (i) the product name
- (ii) name, address and telephone number of the Australian manufacturer or importer of the substance
- (iii) information relating to its ingredients
- (iv) relevant health and safety information
- (v) the word HAZARDOUS or other words such as dangerous poison, warning or caution that indicate the severity of the hazard.
- (vi) If the contents of a container are not known a label such as CAUTION DO NOT USE: UNKNOWN SUBSTANCE should be affixed to the label.

6.5 Risk Assessment

6.5.1 A risk assessment based on a thorough and practical understanding of the workplace and its work practices is undertaken.

6.5.2 All hazardous substances are identified and their MSDS and labels checked and all risks associated with the product or its use are identified.

6.5.3 In reviewing the information about a substance, the following is considered:

- (i) Routes of Exposure eg
 - Inhalation – breathing in the substance
 - Ingestion – swallowing it
 - Absorption – through the skin or eyes, or
 - Injection – though accident or contaminated sharp objects
- (ii) Form and concentration such as solid, liquid or gas
- (iii) Chemical and physical properties such as vapour etc given off at high and low boiling points
- (iv) Health Effects such as:
 - Adverse health effects – immediate and or delayed
 - Adverse health effects resulting from repeated exposure
 - Sensitisation or allergic reactions
 - Cancer
 - Harmful effects on human reproduction
 - Effects when exposure occurs with other substances.

6.5.4 The nature of the work in which hazardous substances are used is considered against the following

- (i) actual work practices and conditions
- (ii) the occurrence of any incidents, illnesses or diseases
- (iii) the conditions and circumstances under which exposure could occur.
- (iv) the likely frequency of any exposure and
- (v) the extent (quantity) of the exposure.

6.5.5 The likelihood of a risk injury or illness is evaluated into three categories:

- (i) In cases where no likelihood of injury or illness the results of the assessment should be recorded, no further control action is necessary, but a maintenance

- program for existing controls should be implemented.
- (ii) In cases where the likelihood of injury or illness is uncertain further information should be obtained until the risks are known and all possible steps taken to prevent, or if this is not practicable, reduce exposure and appropriate records maintained.
- (iii) Where there is a likelihood of injury or illness immediate measures for preventing or reducing exposure to the hazardous substances are implemented.

6.6 Records

6.6.1 Risk assessment outcomes are documented showing:

- (i) the assessor's name
- (ii) assessment date
- (iii) the workplace/unit/process assessed
- (iv) the substance assessed
- (v) the controls in place to prevent a risk to health
- (vi) the degree of exposure or nature of the risk identified
- (vii) the reasoning behind decisions made about risks
- (viii) results of monitoring activities.

6.7 Review and Revision of Risk assessments

Risk assessments are reviewed and where appropriate revised at a minimum every five years or where:

- (i) a new hazardous substance is introduced
- (ii) the process or plant is modified
- (iii) new information about a hazard becomes available
- (iv) health surveillance, biological monitoring and/or air monitoring indicates inadequate exposure control
- (v) accidents or near misses have occurred which may be due to inadequate control, or
- (vi) new or improved control measures become available or practicable.

6.6 Risk Controls

6.6.1 All hazardous risks are eliminated as far as practicable taking into account:

- (i) the severity of the hazard or risk
- (ii) the current state of knowledge of the risk and ways of controlling them
- (iii) the availability and suitability of ways to remove or mitigate the risk
- (iv) the cost of removing or mitigating the risk.

6.6.2 A hierarchy of measures are used to control risks in the first instance by:

- (i) substitution – using an alternate substance that carries no or less risk
- (ii) isolation – physical barriers or measures to isolate or distance people from the risk
- (iii) engineering controls –physical controls that eliminate or reduce the risk ,
- and once the above measures have been applied to the full extent practicable then by
- (iv) administrative control (systems of work or safe work practices) which reduce risk,
- and, after all the above measures have been applied by
- (v) the use of appropriate personal protective equipment by properly trained staff.

6.6.3 Risk Control measures are maintained, reviewed and/or revised through

- (i) frequent measures
- (ii) visual checks to ensure that they are being properly applied by staff
- (iii) testing of equipment
- (iv) preventive maintenance of engineering controls and personal protective equipment, and
- (v) remedial work.

6.7 Exposure Standards

- 6.7.1 Exposure standards are not exceeded and exposures are as much as practicable eliminated or minimised.

6.8 Atmospheric monitoring

6.8.1 Atmospheric monitoring is carried out

- (i) when there is an exposure standard for a hazardous substances, and
- (ii) there is potential for the exposure standard to be exceeded or;
- (iii) monitoring is required to determine if there is a health risk through inhalation under particular work conditions.

6.8.2 Monitoring is undertaken by an appropriate person

6.8.3 Where monitoring tests positive, action is taken to eliminate or reduce the risk as much as practicable

6.8.4 Atmospheric monitoring records are kept for 30 years (unless otherwise specified by WorkCover)

6.9 Health surveillance

6.9.1 The health of staff exposed to hazardous substances is monitored. Monitoring may include:

- (i) biological monitoring which may include blood, urine or expired samples
- (ii) medical tests
- (iii) medical examinations
- (iv) a review of present and past medical and work histories; and
- (v) a review of medical records and occupational exposure.

6.9.2 Such health surveillance is required when:

- (i) staff are exposed to a 'scheduled' hazardous substance, and
- (ii) there is a reasonable likelihood of the occurrence of an adverse health effect.

6.9.3 Health surveillance is carried out under the supervision of a Registered Medical Practitioner who is provided with:

- (i) a list of the registered substances to be tested for
- (ii) a copy of relevant MSDS's, and,
- (iii) any relevant assessment reports.

6.9.4 Staff are advised of the reasons for the health surveillance and the confidential nature of the reports.

6.10 Staff Training

6.10.1 Staff are trained appropriately in accordance with Procedure 13 Training, and details of the training is maintained in the Training Register (Register # 10)

Drycleaning Industry Regulation Standard

Registers

1	Document Register	Register 1
2	Accredited Supplier	Register 2
3	Corrective and Preventive Action Requests	Register 3
4	Hazard and General Risk Management and Control Measures Audit	Register 4
5	License and Registered Plant Register	Register 5
6	Maintenance of Drycleaning Equipment Schedule	Register 6
7	Material Safety Data Sheets	Register 7
8	Safety and Measuring Equipment	Register 8
9	Safety Standard Identification	Register 9
10	Training Register	Register 10
11	Waste Record	Register 11
12	Air Quality	Register 12
13	Cooling Tower Maintenance and Testing Register	Register 13



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1. Document Register

Document Number	Document Type	Document Title	Document Purpose	Issue Number	Date of Issue	Review by date	Approved by (Title)	Status
Registers								
3	Register	Corrective and Preventive Action Requests Register	Summary of Status of Corrective and Preventive Action Requests					
1	Register	Document Register	Lists documents and issue status of our system					
4	Register	Hazard & General Risk Management & Control Measures Audit Register	Summary of the status of hazard management audits					
5	Register	License & Registered Plant Register	Register of licenses - Perc. Accredited Operators and Equipment such as boilers					
7	Register	Material Safety Data Sheet Register of Hazardous Substances	Lists hazardous materials, identifies supplier, gives short Emergency treatment, availability of MSDS					
6	Register	Maintenance of Drycleaning Equipment Schedule	Schedule for the cleaning, maintenance and servicing of drycleaning equipment					
8	Register	Safety and Measuring Equipment Register	Lists what safety and measuring equipment is available, the supplier, service period, location					
9	Register	Safety Standard Identification Register	Identifies applicable safety standard for items of equipment or chemicals					
2	Register	Accredited Supplier Register	Lists suppliers whose performance has been assessed & reviewed					
10	Register	Training Register	Summarises training undertaken					
11	Record	Waste Records	Record of Solvent waste disposal					
12	Register	Air Quality	A register of air testing and emissions management					
Policies & Procedures								
1.	Policy	System Policy	Our System Policy to comply with the Standard					
3.	Procedure	Assessment of Risks	Procedure for the assessment & management of risks					
4.	Procedure	Corrective and Preventive Action	Procedure for issuing & managing C.A.R.'s					
5.	Procedure	Cleaning & Maintenance of Equipment	Procedure for cleaning & maintenance of equipment					
6.	Procedure	Fire and Medical Emergency	Procedure handling fire's and medical emergency's					
7.	Procedure	Product or Service Problem Notification	Procedure for notifying problems					
2.	Procedure	Accredited Supplier Review	Procedure for reviewing supplier performance					
8.	Procedure	Safe Operation of Equipment	Procedure for operating equipment					
11	Procedure	Serious Incident Notification	Procedure for notifying the DIA					

1. Document Register

12	Procedure	Spills and Leakages	Procedure for handling spills and leaks of Perc.				
9.	Procedure	Safe Storage & Handling	Procedure for safe storage & handling of PERC				
10.	Procedure	Safe Waste Disposal	Procedure for the safe disposal of waste				
13.	Procedure	Training	Procedure for training				
14.	Procedure	General Environment	Procedure for general environmental duty				
15.	Procedure	Air Quality	Procedure for maintaining & managing air quality				
16	Procedure	Cooling Towers and Legionella	Procedure for maintaining legionella in cooling towers				
17	Procedure	Hazardous Substances Risk Assessment	Compliments Procedure 3 Risk Assessment by specifically addressing hazardous substances				
Other	Documents						
Form 1	Form	Corrective Action Request	Form for initiating a CAR				
Form 5	Form	Final Incident Report	Form for the final report on a serious incident				
Form 3	Form	Statutory Declaration	Statutory Declaration of compliance				
Form 4	Form	Initial Incident Report	Form for the initial report of a serious incident				
Form 2	Form	Management Review Minutes	Pro forma management review minutes				
Form 6	Form	Compliance Checklist	Checklist to assess compliance with Standard				
Other	Cover	Manual Cover, indexes etc	Intro, policies, procedures, etc. in manual				
	Records						
	Record/s	Cleaning & Maintenance Records <i>Individualized by each</i>	Cleaning & Maintenance Records <i>drycleaner if required.</i>				
	Records	Employment Records	Employment Records (as req'd) State & Fed				

4. Hazard & General Risk Management & Control Measures Audit Register Location:

Audit Date	Audit Number	Item	Status	Comments	Audited by	Date of next Audit
		Equipment				
		Boiler/s				
		Air Compressor/s				
		Vacuum Pump/s				
		Drycleaning Machine/s				
		Cooling Tower/s				
		Utility Press/s				
		Evaporative Cooler/s				
		Dryer/s (Gas, Electric, Steam)				
		Washer Extractor/s				
		Spotting Table/s				
		Hand and Puff Irons				
		Form Finishers				
		Automatic Press/s				
		Pants Topper/s				
		Steam Cabinet/Tunnel/s				
		Chemical				
		Storage				
		Waste Disposal				
		General Risks/Hazards				
		e.g. Electrical, floors, doors, irons, pipes,				
		do a second page if necessary				

Drycleaning Industry Regulation Standard Policy and Procedures Manual
 NB. A separate Register is required for each plant and assessment to be conducted in accordance with the requirements of the Code of Practice for plant in the Drycleaning Industry

6. Maintenance of Drycleaning Equipment Schedule

Item	daily	weekly	month	3 months	half year	annual	other
Door Seals							
All door seals should be kept clean and wiped daily with a clean cloth	X						
Access door seals should be replaced at least annually or sooner whenever leakage's are found						X	X
Leak Detection							
A thorough leak test of all pipe work, valves, gaskets, access door seals, pumps, solvent base tanks, solvent and waste storage containers, water separators, sludge units, distillation units/condensers, diverter valves			X				
lint basket, lint storage, cartridge filter housings shall be conducted at least monthly.			X				
A leak test shall be conducted after replacement of all new gaskets							X
Water Separator (where a second water separator has not been installed)							
Liquid waste from the water separator is drained into a transport container, sealed & left for 5 days							X
Distillation							
The still in the drycleaning machine should be dried in accordance with the manufacturers instructions							X
Condensers							
Lint screens or lint bag every three loads or according to the manufacturer's instruction	X						X
Condensers shall be cleaned at least annually							X
Refrigeration and water coils shall be removed and services at least every six months					X		
Pump Strainers							
Pump strainers shall be cleaned daily	X						
Water Strainers							
Water strainers should be cleaned daily	X						
Cooling Tower							
Specified water flow must be maintained							
Tower interior must be kept clean							
Water must be treated and pH value maintained							
Check for growth of algae, slime, scale and sludge build up in the basin monthly			X				
Thoroughly clean tower every three months or after a prolonged shut down				X			
Drain on a 2-4 weekly cycle (NB. Drain to sewer not to storm water drain)		X	X				
Check chemicals and top up weekly		X					
All Equipment - monthly checks			X				

Drycleaning Industry Regulation Standard

Forms

- | | | |
|----|---|--------|
| 1. | Corrective and Preventive Action Requests | Form 1 |
| 2. | Management Review Meeting Minutes | Form 2 |
| 3. | Statutory Declaration | Form 3 |
| 4. | Serious Incident Notification | |
| | . Initial Report | Form 4 |
| | . Final Report | Form 5 |
| 5. | Standard Compliance Checklist | Form 6 |



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Form 1. Corrective and Preventative Action Request

CAR Number:

Issued by:

Date:

Description of the problem/improvement:

.....
.....
.....
.....

Root cause of the problem/improvement:

.....
.....
.....

Action requested to fix the problem/ put the improvement in place:

.....
.....
.....

Action taken:

.....
.....
.....
.....

Any follow-up required:

.....
.....
.....

Completion date:

Signature:
Signed by owner/manager/quality assurance officer etc.

Form 2. Management Review Minutes

Date of Meeting:

Present:

.....

Review of compliance with the System and its effectiveness and efficiency:

.....
.....
.....

Report on Corrective and Preventative Action Requests:

.....
.....
.....

Report on any Serious Incidents or and Product or Service Problem Notification:

.....
.....
.....

Training:

.....
.....
.....

Preferred Suppliers:

.....
.....
.....

Other Matters:

.....
.....
.....

Dated:

Signed:
Signed by chairman/owner/manager/quality assurance officer etc.

Drycleaning Industry Regulation Standard

Form 3.

Statutory Declaration

I, _____ of in the State of *your State, Company Director*, solemnly and sincerely Declare as follows:

1. I am a Director of *Your Company Drycleaners* of *your address*
2. *Your Company Drycleaners* has attempted to comply with the provisions contained in the Drycleaning Industry Regulation Standard during the year ending *today's date* and will use its best endeavors to comply with the said Standard during the forthcoming year.
3. That *Your Company* operates drycleaning stores/plants at:
.....
.....
.....
.....

I acknowledge that this Declaration is true and correct and I make it in the belief that a person making a false declaration is liable to the penalties of perjury.

Declared at in the State of *Your State*
this day of 2000

Signed (by the person making the Declaration):

Before me:(witness signature)
Full Name (please print)
Address (please print)
Qualification (to witness Statutory Declarations)

Serious Incident Notification

Form 4.

Initial Report

To: The Drycleaning Institute of Australia Ltd. (*Your State*)

.....
..... State Postcode

From:

.....
..... State Postcode

Telephone: (.....) Fax: (.....)

Contact Person: Position:

Incident Date:/...../19....

Incident Description:

.....
.....
.....

Outcome (e.g. death, deterioration, major spillage):

.....
.....
.....

Your initial assessment of the causes:

.....
.....
.....

Expected date of follow up report:

.....

Corrective Action proposed (if any):

.....
.....
.....

Projected timing:

.....

Signed:

Position:

NB: Serious Incident Notification - Final Report to be completed when the incident is finalised.

Form 5.

Final Report

To: The Drycleaning Institute of Australia Ltd. (*Your State*)
.....
..... State Postcode

From:
.....
..... State Postcode
Telephone: (.....) Fax: (.....)
Contact Person: Position:

Report Date:/...../19.... Incident Date:/...../19....

Result and Conclusion of investigation:
.....
.....
.....
.....
.....
.....
.....

Further Investigation required (if any):
.....
.....
.....

Corrective Action undertaken (if any):
.....
.....
.....

Industry Recommendations (if any):
.....
.....
.....

Signed: Position:

NB: Refer to the Initial Report for details of this incident.

Form 6. Compliance Checklist

Element	Comply		Comment
	Yes	No	
Policy Statement			
The Policy Statement is clearly displayed			
Staff know the Policy			
Policies and Procedures			
The following policies and procedures are followed by all staff:			
Accredited Supplier Review			
Assessment of Risks			
Corrective and Preventative Action			
Cleaning & Maintenance of Equipment			
Fire and Medical Emergencies			
Product or Service Problem Notification			
Safe Operation of Equipment			
Safe Storage and Handling			
Safe Waste Disposal			
Serious Incident Notification			
Spills and Leakage			
Training			
Registers			
The following registers are maintained:-			
Document Register			
Accredited Supplier			
Corrective and Preventative Action Requests			
Hazard and General Risk Management Audit			
License and Registered Plant Register			
Maintenance of Equipment Schedule			
Material Safety Data Sheets			
Safety and Measuring Equipment			
Safety Standard Identification			
Training Register			
Codes of Practice			
The following codes are practiced:-			
Code for Safe Handling of Perchloroethylene			
Code of Practice for Plant			
Statutory Declaration			
Statutory Declaration is made			

Reviewed by: Review date:

Comments on the effectiveness and efficiencies of the Standard:-

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Other Records & Information

1. Other Records – (separate records kept)
 - . Equipment Maintenance and Cleaning Records
 - . Hazard Assessment Records
 - . Employment Records
 - . Injury Register
2. Update Information – (attached)



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Disclaimer Whilst all care was taken in their preparation, EA, the NHT and the DIA accepts no responsibility or liability for the use of, or reliance on, the pro-forma registers, records, forms and/or other information contained in this Policy and Procedure Manual. User onus and responsibility applies at all times and in all circumstances. It is the responsibility of each drycleaner to observe the legislation and regulations affecting their operations.