Early Medical Assessment



Domestic Appliance Retailing

Manufacturing

1. Domestic Appliance Retailing
2. Manufacturing

Dear Doctor: This form will take up to 5 minutes to complete. Please review each task the worker undertakes (both picture and written description) and tick whether or not the worker can complete this task. If modification required, please leave comments. Space at the end of this document is available for final comments and recommendations.

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* Small parts kept on shelving to both sides of the bench within easy reach.
* Use of tools and drill. Specialized tools have been created such as T for tightening nuts and washers. Held in dominant hand.
* Very fine motor skills required. Handling of very small objects.
* Repetitive work performed as time allows therefore it is not an all day task.
 | Doctor Approval[ ]  Yes [ ]  NoComments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\IMG_2109.JPGL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\IMG_2120.JPGL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\IMG_2122.JPGL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\IMG_2138.JPGL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\IMG_2144.JPG | **Manufacturing of Light Fittings*** A large variety of machinery used to make light fittings.
* Constant standing and walking required whilst operating machinery. Each used for a period of time (not all day) .
* Timber work - timber turning machine, lathes, sanders, spindle moulder, inverted router and copy lathe.
* Metal Work – Spinner, lathes, benching machine, powder coater used.
* Repetitive gripping and grasping, light push/pull force, forward reaching required. Many are bilateral tasks. Some bending may be required when performing precision work.
* Variety of tools are used within the machines requiring training.
 | Doctor Approval[ ]  Yes [ ]  NoComments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\Picture 053.jpgL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\Picture 059.jpg | **Plating*** Used to turn aluminum and steel into gold, nickel, brass and bronze finishes.
* Hanging fittings off racks (up to 10kg loaded).
* Holding bilaterally from the top dunking rack into solution and taking it out when necessary (time varies).
 | Doctor Approval[ ]  Yes [ ]  NoComments: |
| L:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\Picture 067.jpgL:\RTW Fund Project\Stage Three SAWIC Codes 472801, 473601 & 485601\Domestic Appliance Retailing\The Light Factory\Picture 069.jpg | **Stores*** Sack truck and hand driven forklift available for use to move products.
* Storage area is in upstairs rafter. Forklift used to lift pallets up to rafter. Then unpacked by hand from upstairs.
* Infrequent large deliveries received due to the large amount of stock held and manufacturing side of the business.
* Orders are picked upstairs and put on pallets which are lifted down using forklift.
* Upstairs stock is stacked on top of each other. Most boxes <5kg, there may be some boxes up to 10kg. Items can be taken out individually to reduce load.
* Customer service workers can access upstairs stock as required throughout the day.
 | Doctor Approval[ ]  Yes [ ]  NoComments: |

1. Work Capacity Form

**Doctor Review (include final comments)**

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I confirm that in my view, subject to the above comments, the worker is able to perform certain duties detailed in this Early Medical Assessment.

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| These duties should be reassessed on: |  | Date: |

|  |  |  |
| --- | --- | --- |
| Signature : |  | Date: |

**Employers Declaration:**

I confirm that I/we have reviewed the Doctor’s recommendations and comments. I/we will make suitable changes to make allowances for the Dr’s recommendations.

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| --- | --- | --- |
| Signature : |  | Date: |

**Employees Declaration**

My Doctor has discussed their recommendations with me. I have been given the opportunity to participate in this process.

|  |  |  |
| --- | --- | --- |
| Signature : |  | Date: |

For information on completing this form, please contact Business SA on 08 8300 0000.

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