|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***PLANT DESCRIPTION:*** | **⏵** | | | ***Assessed by:*** | ***College/ Portfolio*** | ⏵ |
| ***NAME(S):*** | ⏵ |
| ***RISK ASSESSMENT NO:*** | **⏵** | ***Assessment Date:*** | ⏵ | ***Review Date:*** | ⏵  when circumstances, procedures &/or information change | ***Area Supervisor:***  ⏵ |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Plant details (if relevant):*** | | | |  | ***\*Associated / cross-reference documents (if relevant):*** | | |
| *Location:* | ⏵ | *Make/Model:* | ⏵ |  | *HazChem RA(s)* | ⏵ | *SWP:* |
| *Serial #:* | ⏵ | *Asset/EST #:* | ⏵ |  | *Plant RA(s)* | ⏵ | ⏵ |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Identified Hazards | | | **Risk Assessment** | | **Risk**  **Level**  **(see matrix )** | **Required Controls**  **(consider control hierarchy)** | **Residual Risk** | | **Risk**  **Level**  **(see matrix )** | **Controls**  **implemented** | |
| **Hazard Class** | **Hazard Description Prompts** | **Comment / Specific Details** | **Consequence** | **Likellihood** |  |  | **Consequence** | **Likellihood** |  | **Yes** | **No** |
| **Physical** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Environment** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Chemical** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Biological** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Radiation** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Ergonomic** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Training** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Combination** |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  |  | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
| **Other** | ⏵ | ⏵ |  |  |  | ⏵ |  |  |  |  |  |
|  | ⏵ | ⏵ |  |  |  | ⏵ |  |  |  |  |  |

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| **ADDITIONAL INFORMATION:** | | | | |
|  | ***List any relevant Standards, Regulations, Codes of Practice, policies pertinent to the design and/or safe operation of this plant:*** | | | |
|  | ⏵ | ⏵ |  | |
|  | ⏵ | ⏵ | **YES** | **NO** |
|  | ***Is this plant required to be registered under the Work Health and Safety Regulations?*** | |  |  |
|  | If YES, is inspection and maintenance information available? | |  |  |
|  |  | |  |  |
|  | ***Is the operator of this plant/equipment required to be licenced, certificated or deemed competent?*** | |  |  |
|  | If YES, is relevant documentation available? | |  |  |
|  |  | |  |  |
|  | ***Is an operation manual available for this plant/equipment?*** | |  |  |
|  |  | |  |  |
|  | ***\*Have you identified any hazardous chemicals used with this plant/equipment? – You must risk assess all associated hazardous chemicals.*** | |  |  |
|  | If YES, please enter document cross-reference details on page 1. | |  | |
|  |  | |  |  |
|  | ***\*Have Safe Work Procedures been developed for this plant/equipment?*** | |  |  |
|  | If YES, please enter document cross-reference details on page 1. | |  | |

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| --- | --- | --- |
| **SUMMARY OF RISK:**  **Review the risk measured, and the controls, then please select the relevant risk summary statement**: | | |
| **A** | The assessment reveals that the potential risk to health from the use of the plant is not currently significant |  |
| **B** | The assessment reveals that the potential risk to health from the use of the plant is significant, however controls are in place that reduce risk to acceptable levels |  |
| **C** | The assessment reveals that the potential risk to health from the use of the plant is significant. Interim controls are in place to reduce risk to acceptable levels. |  |

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| --- | --- | --- | --- |
| **Approved by Area Supervisor:** | **⏵** |  | ⏵ |
|  | ***signature*** |  | ***date*** |

**REVIEW OF CONTROL MEASURES**

Control measures are effective – yes  \*no  (\*If no, you must do another Risk Assessment)

|  |  |  |  |
| --- | --- | --- | --- |
| Date Reviewed: | ⏵ | Signed: | **⏵** |

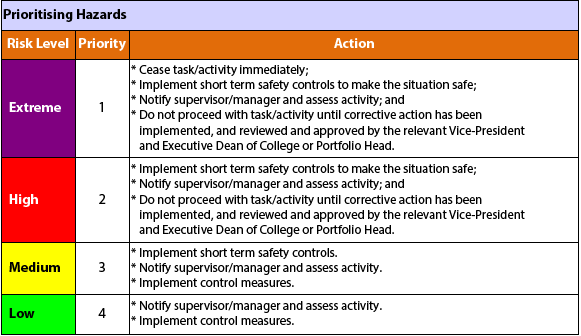
**HOW TO ASSESS THE RISK**

**Step C – Calculate the Risk Level**

1. Take the Step A rating and select the correct line in the matrix below.
2. Take the Step B rating and select the correct column in the matrix below.
3. Circle the risk level where the two ratings cross in the matrix below

Risk level =

|  |  |  |  |
| --- | --- | --- | --- |
| **Step A - Consider the consequences** | | **Step B - Consider the likelihood** | |
| For each hazard, consider the consequences if something happens. Consider what could reasonably have happened, as well as what actually happened (if there was an accident/incident). Look at the descriptions below and choose the most suitable consequence below. | | How likely is it that something will happen as a result of the hazard?  Choose the most suitable Likelihood below. | |
| **Consequence** | **Description** | **Likelihood** | **Description** |
| Catastrophic | May cause death or permanent disability, and/or permanent ill health | Very likely | Expected to occur in most circumstances |
| Major | Severe injury or illness | Likely | Will probably occur in most circumstances |
| Minor | Minor (usually reversible) injury or illness resulting in days off work | Possible | Might occur occasionally |
| First Aid | First aid level medical treatment | Unlikely | Could happen at some time |
| Negligible | No treatment required | Highly unlikely | May happen only in exceptional circumstances |



|  |  |
| --- | --- |
| **Control Hierarchy** | |
| Elimination | *Remove hazard* |
| Substitution | *Use a less hazardous alternative* |
| Isolation | *Eg Restrict access, use in a closed container, fume cabinet* |
| Engineering | *Eg Trolleys to move loads, guards on machinery, Fume cupboard* |
| Administration | *Eg: Training, Safe Work Procedure, signage* |
| PPE - Personal  Protective Equipment | *Eg: Gloves, respirator, safety glasses* |

**Risk Matrix**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Consequence** | **Likelihood** | | | | |
| **Very likely** | **Likely** | **Possible** | **Unlikely** | **Highly unlikely** |
| **Catastrophic** | Extreme | High | High | High | Medium |
| **Major injury** | High | High | High | Medium | Medium |
| **Minor injury** | High | Medium | Medium | Medium | Medium |
| **First aid** | Medium | Medium | Medium | Low | Low |
| **Negligible** | Medium | Medium | Low | Low | Low |