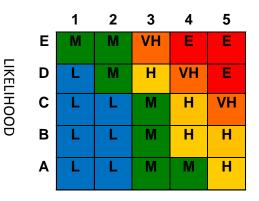


| Location: | | | Work Order/Project No: | | | | | | Time: | |
|--|---|-------------|------------------------|---------|-------------------|------------------|-----------------------|-------------------------|-------------------------------------|--|
| Job Description: | | | | | | | | | | |
| | | | | | | | | | | |
| Potential Environmental Hazards | Potential Workplace Health and Safety Hazards | | | | | | | | | |
| Air pollution (dust, fumes) □Y □N | Rotating equipment \Box | Y □N Ele | ctrical \Box |]Y □N | Work at height | ts* □Y□ | IN Biological | \square Y \square N | Other (list): | |
| Spills to ground □Y □N | Lifting equipment \Box | Y □N Ho | t work 💢 | ⊒Y □N | Chemicals** | □Y□ | N Hot surfaces | \square Y \square N | | |
| Spills to water □Y □N | Mobile plant □ | Y □N Pre | essure [| ⊒Y □N | Asbestos*** | □Y □ | IN Lighting | \square Y \square N | | |
| Other (list): | Manual handling □\ | ′□N No | ise 🗆 | ∃Y □N | Gas | □Y□ | N Weather | \square Y \square N | | |
| | Ergonomics \Box | Y □N Coi | nfined space | ⊒Y □N | Dust/fumes | □Y [| Other workers | \square Y \square N | | |
| *If WORKING AT HEIGHTS selected: Complete a Working at Heights Checklist and attached to this JSEA Yes Attached No Not applicable ** If CHEMICALS selected: Review Safety Data Sheet (SDS) for additional safety precautions and attach all SDS's to this JSEA Yes Attached No Not applicable | | | | | | | | | | |
| Environmental Control Measures | Workplace Health and Safety Control Measures | | | | | | | | | |
| Bunding □Y □N | Isolations □Y □N | Fall protec | ction □Y □N | Portabl | e lighting 🗆 | Y□N H | earing protection | \square Y \square N | Head protection □Y □N | |
| Spill kits □Y □N | Gas detection □Y □N | Barricades | s □Y □N | Ventila | tion fans 🔲 | Y □N E | ye protection | \square Y \square N | Other (list): | |
| Soaker pads □Y □N | Intrinsic equip □Y □N | Rescue eq | Juip □Y □N | Extract | on fans | ⁄ □N R | espiratory protection | □Y□N | | |
| Other (list): | Fire extinguishers □Y □N | 2-way rad | ios □Y □N | Work b | reaks \square Y | □N F | ace protection | \square Y \square N | | |
| | Fire blankets □Y □N | Scaffoldin | g □Y □N | UV pro | tection \square | ′□N H | and Protection | \square Y \square N | | |
| | Sentry/Observer □Y □N | Housekee | ping □Y □N | Protect | ive clothing □Y | □N F | oot protection | \square Y \square N | | |
| | | | | | | | | | | |
| Access Authority and number (where applicable) | | | | | | | | | | |
| ☐ Mechanical access ☐ Electrical / HV | | | ☐ Hot work | | | ☐ Confined space | | ☐ Auth | ☐ Authority to work in the vicinity | |
| A/A: | A/A: | | A/A: | | | A/A: | | A/A: | | |



Risk Matrix CONSEQUENCE



LIKELIHOOD

E = Almost Certain (Multiple per year)
D = Likely (Time to time/ 1 per year)

C= Possible (Occasional/ 1 in 3 years) B = Unlikely (Possible / 1 in 3-9 years)

A = Rare (Unusual/once every 10 years

WHS CONSEQUENCE

- 5 = Severe (Fatality or permanent disability)
- 4 = Major (Lost time injury or illness)
- 3 = Moderate (Medical treatment/short term)
- 2 = Minor (First aid treatment)
- 1 = Insignificant (Incident report only)

ENVIRONMENTAL CONSEQUENCE

- 5 = Severe (Substantial widespread permanent damage)
- 4 = Major (Long term effects on environment)
- 3 = Moderate (Widespread temporary damage)
- 2 = Minor (Localised low level damage)
- 1 = Insignificant (Contained/no environmental impact)

TASK BASED RISK ASSESSMENT PROCESS

- Decide the likelihood then consequence to determine the level of risk for each step of the task.
- Risk levels may be extreme, very high, high, medium or low as per the risk matrix. Example: C Likelihood and 4 Consequence = High risk score
- Score potential risk first (without any controls in place) and then re-score the actual risk (with controls in place).
- If the actual risk score is LOW: Proceed with the job task safely.
- If the actual risk score is **MEDIUM**: Review to see if additional controls can be put in place to further reduce the risk AND/OR obtain approval to proceed from your Line Supervisor.
- If the actual risk score is HIGH, VERY HIGH OR EXTREME: Do not proceed with task. Discuss with your Line Supervisor.

| | TASK SEQUENCE What are you going to do? | HAZARD(S) What could cause harm or damage? | Potential Risk Score (no controls) | CONTROL MEASURE(S) What will be put in place to keep you safe? | Actual Risk Score (with controls) | RESPONSIBLE PERSON Who will do this? |
|---|---|--|--|--|-----------------------------------|--------------------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |



| | TASK SEQUENCE What are you going to do? | HAZARD(S) What could cause harm or damage? | Potential Risk Score (no controls) | CONTROL MEASURE(S) What will be put in place to keep you safe? | Actual Risk Score (with controls) | RESPONSIBLE PERSON Who will do this? |
|----|---|--|--|--|-----------------------------------|--------------------------------------|
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| Work Team Members sign on: I understand and accept the job analysis and hazard control measures described on this JSEA | | | | | | | | |
|--|------------|-------|-----------------|----------|-------|--|--|--|
| Name: Signatur | e: | Date: | Name: Si | gnature: | Date: | | | |
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| Team Leader/Coordinator/Peer review: Review and approval for work to proceed | | | | | | | | |
| Name: | Signature: | | Job role: Date: | | | | | |