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| --- |
| Date: |
| Name: |
| Task: |

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| **1** | **STOP AND THINK** – *What am I about to do?* | **Y** | **N** |
|  | - Am I trained and competent? |  |  |
|  | - Have I spoken to others that may be affected by my job (if required)? |  |  |
|  | - Do I know how I am going to do the job? |  |  |
| **2** | **STOP THE HAZARDS** – *What can cause harm to people or the environment?* | | |
|  | - Am I fit for work? |  |  |
|  | - Is my equipment safe to use? |  |  |
|  | - Is housekeeping acceptable? |  |  |
|  | - Is heavy lifting, carrying, or pulling required? |  |  |
|  | - Will my actions introduce new hazards? |  |  |
| **3** | **ASSESS THE RISK** – *What can go wrong?* | | |
|  | - Could I slip, trip, fall or suffer a strain? |  |  |
|  | - Contact with energy (pressure, electricity)? |  |  |
|  | - Could I be crushed by mobile plant/vehicles? |  |  |
| **4** | **CONTROL** – *How do I manage the risk?* | | |
|  | - Have I got the correct PPE? |  |  |
|  | - Is isolation needed (guards, lockout)? |  |  |
|  | - Do I have permission to complete the task? |  |  |
|  | - Am I following a procedure or JHA? |  |  |
|  | - Is there adequate emergency equipment available in case of an accident? |  |  |
| **5** | **PROCEED SAFELY** |  |  |
|  | - I have controlled all hazards |  |  |
|  | - I can do the job safely |  |  |

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| **HAZARD** | **CONTROL** | **RISK** |
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| **Risk Matrix** | | | **Consequence** | | | | |
| **Low** | **Minor** | **Moderate** | **Major** | **Critical** |
| **1** | **2** | **3** | **4** | **5** |
| **Likelihood** | **Almost Certain** | **A** | **11** | **16** | **20** | **23** | **25** |
| **Likely** | **B** | **7** | **12** | **17** | **21** | **24** |
| **Possible** | **C** | **4** | **8** | **13** | **18** | **22** |
| **Unlikely** | **D** | **2** | **5** | **9** | **14** | **19** |
| **Rare** | **E** | **1** | **3** | **6** | **10** | **15** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Legend** | **Low** | **Medium** | **High** | **Very High** |

|  |  |
| --- | --- |
| **Risk level and Action** | |
| **Very High** | Senior management attention needed to approve action plans and management responsibility specific |
| **High** | Senior management attention needed to approve action plans and management responsibility specific |
| **Medium** | Manage by specific monitoring or response procedures with management responsibility specified |
| **Low** | Manage by routing procedures, unlikely to need specific application or resources |