|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Take Five | ***1. Stop*** | ***2. Think*** | ***3. Look for Hazards*** | ***4. Plan*** | ***5. Proceed*** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **WORK DETAIL** *To be completed for all work* | | | | Title | |
| WMH Facility: | Unit: | Work Description | | Work Centre | Work Order No. |
| No. of Workers: | Works Lead Name  Signature: Date: | | Supervisor Name:  Signature: Date: | | |

Infrastructure and Assets-WHS-Take Five Risk Assessment-Rev 6.1 April 2020

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***1.******STOP*** | | ***2. Think through the task*** | | | | **Yes** | **See your Supervisor** | **No** |
| Am I clear on what the task is | | | | | |  |  |
| Do I have the necessary work permits and/or authorities to do the task | | | | | |  |  |
| Is there a JHA/SWMS/SOP/Work Instruction for this task | | | | | |  |  |
| Do I have the required skills, training and licenses for the task | | | | | |  |  |
| Are my tools/equipment appropriate for the task and in good working order | | | | | |  |  |
| Do I have the correct personal protective equipment for the task | | | | | |  |  |
|  | | | | | |  |  |  |
| ***3.1 Look for Hazards*** | | | | | | **Yes** |  | **No** |
| 1. **Gravitational** | | Slips, trips, falls at the same level | Fall from Heights | Access/work beneath suspended load | Falling objects |  |  |  |
| 1. **Kinetic /Mechanical** | | Caught in/between moving plant or parts; | Struck by moving vehicles/mobile plant | Contact with sharp objects | Struck by projectiles. |  |  |  |
| 1. **Noise and Vibration** | | Excessive noise | Vibrating plant/vehicles | Contact with vibrating tools/objects | |  |  |  |
| 1. **Electrical** | | Exposed or faulty wiring or equipment; static shocks | Contact with live electrical parts; electrical arcing | Exposure to high fault currents | Mechanical damage to power leads, fixed electrical wiring; |  |  |  |
| 1. **Chemical** | | Ingestion, absorption or inhalation of chemicals | Uncontrolled spill | Burns / splash in eyes | Specific exposure: Asbestos /Lead |  |  |  |
| 1. **Thermal and Work Environment** | | Lighting workplace and equipment/tool design; Restricted working space | Uneven/unstable ground or work surface | Weather and atmospheric conditions; Remote and isolated work | Contact with hot/cold objects / surfaces/ liquids |  |  |  |
| 1. **Biological** | | Exposure to algal, bacterial, fungal, viral or parasitic agents | Animal, insect and spider bites/stings | Sharps injury/needle-stick exposure | Specific exposure: Contact with raw sewage |  |  |  |
| 1. **Fire / Explosions** | | Condition leading to fire/explosion | | Ignition of gas/dust in a hazardous area | |  |  |  |
| 1. **Manual Tasks** | | Repetitive or sustained force; High or sudden force; Handling heavy loads | Repetitive movement; Sustained or awkward posture; | Exposure to vibration; Tool use which requires excessive force; | Handling unstable or awkward objects /loads; |  |  |  |
| 1. **Pressurized energy** | | Release of a stored energy i.e. gases, water, oil subject to high/ low pressures | | Release of spring/tension energy |  |  |  |  |
| 1. **Psycho-social and medical** | | Exposure to workplace bullying, harassment, violence & aggression | Exposure to traumatic incidents; | Working for excessive time periods and/or while fatigued | Working under the influence of alcohol/drugs |  |  |  |
| 1. **Radiation** | | Non iodizing radiation: Ultraviolet light (artificial/sunlight), laser, infra-red, microwave, radio frequency, welding arc light | | | |  |  |  |
| ***3.2 Assess the Hazards*** Refer to the Risk Management Guide | | | | | |  |  |  |
| **What is the risk level** | | **Extreme High Moderate Low** | | | |  |  |  |
| ***STOP! - SEE YOUR SUPERVISOR AND/OR COMPLETE/UPDATE JHA/SWMS*** **Risk Level = E /H /M** | | | | | |  |  | **L** |
|  | | | | | |  |  |  |
| ***4. Plan the work - Make the Hazards Safe (refer to the Hierarchy of Control)*** | | | | | |  |  |  |
| **Haz No.** | **Controls are established to manage the hazard(s)** e.g.Barricades erected / warning signs / specialised PPE | | | | | **Yes** |  | **No** |
|  |  | | | | |  |  |  |
|  |  | | | | |  |  |  |
|  |  | | | | |  |  |  |
|  |  | | | | |  |  |  |
|  |  | | | | |  |  |  |
|  |  | | | | |  |  |  |
| ***5. PROCEED TO COMPLETE THE TASK SAFELY*** Are all hazards removed or minimised to a low risk level | | | | | |  |  |  |
|  | | | | | |  |  |  |
| ***STOP - DO NOT START THE TASK! - DISCUSS WITH YOUR SUPERVISOR BEFORE PROCEEDING*** | | | | | |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***4. Plan the work - Make the Hazards Safe (refer to the Hierarchy of Control)*** | |  |  |  |
| **Haz No.** | **Controls are established to manage the hazard** Eg Barricades erected / warning signs / specialised PPE | **Yes** |  | **No** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| ***5. PROCEED TO COMPLETE THE TASK SAFELY*** *Are all hazards removed or minimised to a low risk level* | |  |  |  |
|  | |  |  |  |
| ***STOP - DO NOT START THE TASK! - DISCUSS WITH YOUR SUPERVISOR BEFORE PROCEEDING*** | |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **WORKER DECLARATION** | | | |
| I have been given the opportunity to comment on the context of this Take 5. I have read, understood and agree with how to safely carry out the activities listed above. | | | |
| **Names of workers consulted** | **Signature of workers** | | **Date** |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
| **COMPLETION** | | | |
| Has the work area been left tidy and safe | | Are changes to equipment documented and communicated | |
| Are site personnel aware of status of work including remaining isolations | | Are all incidents, near miss incidents, unsafe situations reported | |

|  |  |  |
| --- | --- | --- |
| Risk Management Guidance | | |
| Definition  “*A hazard is a situation or thing that has the potential to harm a person*”. Hazards at work may include noisy machinery, a moving forklift, use and storage of chemicals, electricity, working at heights, a repetitive job, bullying and violence at the workplace.  Risk is the possibility that harm (death, injury or illness) might occur when exposed to a hazard.  Expressed as a risk Statement  “The risk of <harm> due to <exposure to hazard> resulting in <consequence>”. | **Hazard Category** | **Risk control** means taking action to eliminate health and safety risks so far as is reasonably practicable, and if that is not possible, minimising the risks so far as is reasonably practicable.  The Table below illustrates the hierarchy of controls.  **Hierarchy of Control** |
| 1. Gravitational |
| 1. Kinetic /Mechanical |
| 1. Noise and Vibration |
| 1. Electrical |
| 1. Chemical |
| 1. Thermal and Work Environment |
| 1. Biological |
| 1. Fire / Explosions |
| 1. Manual Tasks |
| 1. Pressurized energy |
| 1. Psycho-social and medical |
| 1. Radiation |

|  |  |  |  |
| --- | --- | --- | --- |
| ***What is the LIKELIHOOD of an event occurring*** | | | |
| **Descriptor** | **Definition** | **Frequency** | **Probability** |
| ***Rare*** | No identified or known events occurring. Only occurs in exceptional circumstances. | Event expected to occur less than once every five years. | Less than 5 percent |
| ***Unlikely*** | Evidence of event occurring in the past, but unlikely to occur in the future. | Event expected to occur once in the next five years. | 5-30 percent |
| ***Possible*** | There is evidence of several events in the past. It would not be a surprise if it occurred. | Event expected to occur once in the next two years. | 30-60 percent |
| ***Likely*** | Event occurs from time to time. | Event expected to occur once in the next year. | 60 - 90 percent |
| ***Almost Certain*** | Risk event is expected to occur. | Event expected to occur within the next three months. | More than 90 percent |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***What would be the CONSEQUENCES should an event occur*** | | | | |
| ***Negligible/***  ***Insignificant*** | ***Minor*** | ***Moderate*** | ***Major*** | ***Extreme / Catastrophic*** |
| No injury/illness/time lost. Minor adjustment to operational routine. | No lost time injury. An injury requiring first aid or medical treatment. | An injury involving a temporary loss of function or a notifiable event (illness/injury requiring overnight inpatient hospitalisation, or a dangerous event requiring notification). | An event resulting in permanent loss of function or disability. | An event resulting in loss of life. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Indicate the **LIKELIHOOD** and **CONSEQUENCE** in the table below to establish the **RISK RATING** | | | | | |
| **LIKELIHOOD** | **CONSEQUENCES** | | | | |
| **Negligible/ Insignificant** | **Minor** | **Moderate** | **Major** | **Extreme** |
| **Rare** | Low | Low | Medium | Medium | High |
| **Unlikely** | Low | Low | Medium | High | High |
| **Possible** | Low | Medium | High | High | Extreme |
| **Likely** | Medium | Medium | High | Extreme | Extreme |
| **Almost Certain** | Medium | Medium | High | Extreme | Extreme |

|  |  |
| --- | --- |
| Risk Rating | Minimum Action Required (specific to safety risks) |
| LOW | Monitor to ensure no change to risk level occurs. |
| MEDIUM | Action required within one month. |
| HIGH | * Detailed risk assessment required. * Action required within one to two weeks (short and/or long-term controls). * Report in accordance with West Moreton Health (WMH) risk requirements * Report within one week to the local Work Safety and Wellbeing (WSW) Unit. * Long term control plan including detailed risk assessment required with management involvement/review. |
| EXTREME | * Immediate action required (short and/or long-term controls). * Work activity/component may be ceased/restricted until short term controls implemented to reduce risk level. * Report in accordance with WMH risk requirements. Report immediately to the local WSW Unit. * Long term control plan including detailed risk assessment required with senior management involvement/review. |