

MBRC

**SAFETYfirst1**

*It's in your hands*

# Personal HSE Toolkit

WORK SAFE  
HOME SAFE

What am I about to do?  
What could go wrong?  
How could it be done more safely?

Issue date - July 2012  
Review date - July 2014

Office of Environmental Relations

Moreton Bay  
Regional Council





It's in your hands

# Site Specific Risk Assessment

000001-000030

Issue date - July 2012  
Review date - July 2014

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## COUNCIL TASKS MANAGING SITE RELATED RISKS

A Site Specific Risk Assessment (SSRA) has been developed as a quick and easy field based tool to be used on work sites before any task commences to identify any site based risks and put controls in place to minimise or eliminate these risks prior to starting work.

### SSRA

**Required when:**

- You are about to set up to commence a task

**The SSRA prompts you to:**

- Stop and think before proceeding
- Identify hazards and risks associated with the site and task
- Ensure all risks identified are documented
- Ensure corrective actions are provided to reduce these risks to acceptable
- Identify when a location changes the risks of the task may change
- Consider if the controls do not reduce the risks to acceptable levels do not continue with the task without discussing with your supervisor

### WI SWMS

Once the SSRA has been completed, all corrective actions are agreed and in place, ensure the Safe Work Method Statement (SWMS) or Work Instruction (WI) are followed as required.

If risks cannot be managed using a SSRA/WI/SWMS

**STOP**  
**CONTACT SUPERVISOR**



*It's in your hands*

**When book is completed, please print and sign name and date and hand to your supervisor.**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Supervisor to print and sign name and date and forward to Human Resources (Health, Safety and Environment) for replacement.**

Supervisor's Name \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date \_\_\_\_\_

OFFICE USE ONLY

Number range of new book issued \_\_\_\_\_

Date issued \_\_\_\_\_

Office of Employee Relations

OUR Disclosure Log

## Site Specific Risk Assessment

000001

Name of person completing assessment \_\_\_\_\_  
 Date \_\_\_\_\_ Location \_\_\_\_\_  
 Job Request ID or Task \_\_\_\_\_ Section \_\_\_\_\_  
 Team members present \_\_\_\_\_

### Team Safety for this task Tick if (1-25) Applicable Risk Rating

Is anyone in the work team ...	
Unskilled or inexperienced (or not performed task in past 2 months)	<input type="checkbox"/>
Using incorrect tools and equipment	<input type="checkbox"/>
Not inducted into the plant/equipment to be used	<input type="checkbox"/>
Using/wearing incorrect PPE?	<input type="checkbox"/>

### Task Safety Tick if (1-25) Applicable Risk Rating

Is the following a risk ...	
Working alone (does anyone know where I am)	<input type="checkbox"/>
Interaction with members of public	<input type="checkbox"/>
Working at height	<input type="checkbox"/>
Manual handling	<input type="checkbox"/>
Confined space	<input type="checkbox"/>
Inadequate standard of equipment/machinery (pre start failures)	<input type="checkbox"/>
Electric shock	<input type="checkbox"/>
Traffic management	<input type="checkbox"/>

### Worksite Safety Tick if (1-25) Applicable Risk Rating

Does the worksite ...	
Weather conditions create a safety hazard	<input type="checkbox"/>
Have asbestos contamination	<input type="checkbox"/>
Have loose/unstable/uneven ground	<input type="checkbox"/>
Have slip/trip hazards	<input type="checkbox"/>
Have crush hazards	<input type="checkbox"/>
Have overhead/underground power/cables	<input type="checkbox"/>
Involve work on or near a road/cliff/water	<input type="checkbox"/>
Have risk from animals	<input type="checkbox"/>
Create risk to others (vehicles/pedestrians/plant)	<input type="checkbox"/>
Have inadequate storage for equipment	<input type="checkbox"/>
Have inadequate chemical spill controls	<input type="checkbox"/>

Note - Any yes box ticked requires a risk ranking and corrective action.

**BOTH SIDES MUST BE COMPLETED**

**Corrective Actions** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Corrective Actions** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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**Corrective Actions** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have performed a SSRA and did not identify any risks that required further controls/actions.

I have entered the SSRA into the system.

Now that all site hazards have been managed ensure SWMS, WI is followed when performing task.

**NOTE -**

**All additional assessments must be included in return documents/info to enable close of job**

Assess the likelihood and consequences from the hazards or risks		CONSEQUENCES				
		Insignificant No injury	Minor First aid injury	Moderate Medical treatment	Major Serious injury	Catastrophic Death
LIKELIHOOD	<b>Almost Certain</b> Is expected to occur most times	16 Med	10 High	6 Ext	3 Ext	1 Ext
	<b>Likely</b> Will probably occur most times	19 Med	14 High	9 High	5 Ext	2 Ext
	<b>Moderate</b> Might occur some time	22 Low	18 Med	13 High	8 Ext	4 Ext
	<b>Unlikely</b> Could occur at some time	24 Low	21 Low	17 Med	12 High	7 Ext
	<b>Rare/impossible</b> May occur in rare circumstances	25 Low	23 Low	20 Med	15 High	11 High

**RISK ASSESSMENT CALCULATOR RISK PROCESS**

**Identify** the hazards or risks of the work

**Assess** the likelihood and consequences from the hazards or risks

**Decide** on the measures to control the risks

**Implement** the chosen Control Options

**Monitor** and Evaluate Control Options to ensure adequate control

RANKING	RISK	TOLERABILITY	CONTROL OPTIONS
1-8	Extreme - Extreme risk, immediate action required	Intolerable	<b>Eliminate</b> - Eliminate the process, material or substance completely <b>Substitute</b> - Replace the process, material or substance with a safer one
9-15	High - High risk, prioritised action required	Intolerable	<b>Isolate</b> - Isolate the person(s) from the process, material or substance <b>Engineer</b> - Design or redesign the process, material or substance
16-20	Medium - Moderate risk, planned action required	Reduce	<b>Administrative</b> - Limit exposure to the risk by job rotation
21-25	Low - Low risk, acted by routine procedures	Acceptable	<b>Operate</b> - Operate the equipment

## SITE SPECIFIC RISK ASSESSMENT CHECKLIST

This checklist is a guide to assist in identifying hazards and risks so you can manage them using the SSRA, SWMS or WI

### 1. Think through the task

**Get it right -** Information, tools, procedures, permits, authority, induction/training, design, plans

**Think about -** Travel, people affects, getting in/out, nearby plant, vehicles, traffic, other activities in close proximity, other ways to do it

### 2. Personal safety for the task

**Think about -** Skill set/experience of team, correct tools and equipment condition, wearing correct PPE and it is safe operating condition, all training and tickets required and current

### 3. Task safety

**Think about -** Interaction with public, working alone, working at height, manual handling, confined space work, permits required, electric shock, traffic management, plant and equipment condition (no pre start failures)

### 4. Worksite safety

**Think about -** Weather conditions creating a risk, loose/unstable ground, slip/trip hazards, crush hazards, asbestos contamination, overhead/underground power cables/lines in area, involves work on or near road/cliff/water, risks from animal interaction, your work creates risks to others in area (vehicles, pedestrians, plant) chemical spill kits in place, storage space for work equipment

Office of Environmental Relations  
Please turn over



**SITE SPECIFIC  
RISK ASSESSMENT CHECKLIST**

This checklist is a guide to assist in identifying hazards and risks so you can manage them using the SSRA, SWMS or WI

**5. Assess the risk (using the matrix)**

What is the consequence if that risk occurs?  
What is the probability of the consequence happening?

**6. Control the risk**

Discuss the controls with the team and document the corrective action

**7. Are you making a change that could result in new risks?**

Eg the controls you put in place create a new risk that is dangerous, review the control with supervisor

If the risk is still high ie. The suggested controls do not reduce the risk of starting the task to an acceptable level, stop and get further advice

**8. Do the task/job safely**

<b>BEHAVIOUR</b>	Right tool for job	Keep out of the line of fire	Eyes on hands
	Eyes on path	Pre starts completed	PPE in place

Office of Occupational Relations

# emergency

## D DANGER

Ensure the area is safe for yourself, others and the patient.

## R RESPONSE

**Check for response** - ask name, squeeze shoulders

### No response

- send for help

### Response

- make comfortable
- check for injuries
- monitor response

## S SEND for help

Call **Triple Zero (000)** for an ambulance or ask another person to make the call.

## A AIRWAY

**Open mouth** - if foreign material is present:

- place in the recovery position
- clear airway with fingers

**Open airway** by tilting head with chin lift.

## B BREATHING

**Check for breathing** - look, listen and feel.

### Not normal breathing

- start CPR

### Normal breathing

- place in recovery position
- monitor breathing
- manage injuries
- treat for shock

## C CPR

**Start CPR - 30 chest compressions : 2 breaths**

Continue CPR until help arrives or patient recovers.



For closure















