









## Slips, trips and falls at level risk management worksheet

This worksheet can be used to help prevent incidents following a slip, trip or fall at level (STFAL) or a misstep on stairs, which commonly involves over or under stepping on steps and losing balance.

Please note that this worksheet is not appropriate for falls from one level to another, such as falls from heights and falls that happen when accessing or leaving vehicles.

Review all ticked boxes and decide on controls to prevent further incidents.

Dat	e of assessment:	Assessed by:		
Sta	ff/others consulted to comple	te this worksheet:		
Ste	ep 1: Record incident	details <b></b>		
Inci	ident/reference number:			
Loc	ation and time of incident:			
Wh	at happened (including activit	ty undertaken at time, nature of incident, any structure/equipment involved)?		
Job	title of person involved:			
Ste	p 2: Identify issues t	hat may have contributed to the incident		
Que	estion 1 For slips only, ch	eck:		
☐ Is the walking/ground surface too slippery for expected use? (Tick all that apply.)				
☐ Is the surface generally too slippery for expected activities and people who walk in the area?				
[	☐ Is it slippery in particular	areas?		
[	☐ Is there not enough grip o	n a sloped surface?		
[	Is there different level of §	grip between different adjoining floor surfaces?		
Are cleaning practices/systems ineffective to properly clean walking surface of contamination (e.g. rain/mud. grease, spills, litter)? (Tick all that apply.)				
[	Is the correct cleaning me	thod used for the floor type?		
[	Is the cleaning program a	dequate for amount/type of contamination?		
[	Is cleaning equipment cle	an and in good condition?		
[	☐ Is cleaning scheduled for	times when there is minimal pedestrian traffic?		
[	Are pedestrians effectivel	y kept off areas until the surface is fully clean and dry?		
[	Are spills attended to pro	mptly?		
	pected water and/or other contamination (including rain and mud) in walkways/work area? tion: (Tick all that apply.)			
[	Can the source of the con			
[	Can the contamination be			

Qu	estion 2 For trips only, check:			
	Are there walking surface irregularities e.g. holes, protrusions, loose mats, uneven paths or rough ground including soil clods and large rocks, potholes including indents by heavy machinery?			
	Are there temporary obstacles in walkways or work areas e.g. cables, pallets, equipment, boxes, formwork bracing/ steelwork etc?			
	Are walkways and work areas cluttered or unclean restricting safe access?			
	Do access-ways and walk-ways lack clear markings?			
	Are there any unmarked, unmovable trip hazards?			
Qu	estion 3 For missteps involving stairs only*, check:			
*Fo	r these questions, view the <u>Safe design and use of stairs</u> found at worksafe.qld.gov.au.			
	Are stair dimensions inconsistent with design requirements?			
	Are stairs in poor condition (e.g. tread surface is not maintained or slippery with loose /protruding items)?			
	Is the nosing/edge of step rounded, slippery, in poor condition, hard to see, loose, protruding or slippery?			
	Are handrails difficult to use, grip or reach?			
For all incidents, complete questions 4 to 8.				
Qu	estion 4 Check hazard visibility and detectability:			
	Is there inadequate or uneven lighting to clearly see hazards or changes to the path ahead e.g. in stairwells?			
	Are there any other circumstances that make hazards difficult to see or detect?			
	Do hazards blend into the background?			
	Are hazards unexpected e.g. immediately around a corner?			
	Are edges of steps, changes in walking surfaces, start/end of ramps difficult to see e.g. are edges clearly defined and visible edges?			
Qu	estion 5 Check work activities that require more attention or physical demands when walking:			
	Are carrying, pushing or pulling tasks required while walking? These tasks require more grip between shoe and flooring and challenge balance.			
	Are workers unable to break a fall e.g. they're unable to grab handrails?			
	Are workers unable to clearly see the path ahead including any hazards e.g. do they handle bulky items that obstruct their view?			
	Does the activity or surroundings distract or impact on workers' attention?			
	Is there interaction with other workers or/activities that could distract their attention e.g. a congested workspace where many trades are working together in one area?			
	Is there a fast pace of work, time pressures or poor scheduling that increase rushing?			
Qu	estion 6 Check the worker's footwear:			
	Is footwear inappropriate for the task and conditions?			
Che	eck:			
	☐ Does it have insufficient grip for activity and work area?			
	☐ Is it uncomfortable and doesn't stay on feet?			
	☐ Does it have clogged treads/no footwear cleaning equipment available?			
	Does the worker have unsuitable and unmaintained footwear?			

Question 7 Check if the way work	is organised creates STFAL risks					
Does planning of current and future work not adequately address STFAL risks e.g. actions following wet weather or changes to accessways?						
$\hfill \Box$ Do production demands and incentive						
	☐ Is there a lack in training/supervision to reduce STFAL risks?					
Are workers unaware of how to repor						
Are outcomes to reduce STFAL risks not shared or used for future work planning?						
Question 8 Check who can impact on STFAL risks at your workplace						
Project managers/Principal contractors, Sub-contractors, Supply chain/customers, Landlord, Body corporate						
Attach relevant photographs:						
To add images, click on the boxes below and then click browse. Insert relevant details of photograph below e.g. location.						
Photo 1:	Photo 2:	Photo 3:				
		0				
	10					
Additional comments:	<b>S</b> &					
If you ticked Yes to any part of questions 1 to 7, you need to take action on any issues that were ticked to eliminate/reduce the risk of another injury.						
Consult with those listed in question eight as required to identify solutions.						
Step 3: Control the risks						
Consider the hierarchy of control—a rang	e of controls may be required					
Look at the items that you have identified in step two. What actions can you take to eliminate or reduce the risk of STFAL injuries?						
Who approves control actions?						
Who carries out control actions?						
Step 4: Review the controls ■						
Planned date for review:	Actual date reviewed:					
Reviewed by:						
Have the controls adequately eliminated state.)	or reduced risks? $\square$ Yes $\square$ No. (If no, do a	new review process for the current				
Are there any other issues? $\square$ Yes $\square$ No. (If yes, do a new checklist for those issues or capture in your risk management plan.)						