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| A picture containing logo  Description automatically generated**WHS Risk Assessment Form** |

Use this form to conduct a WHS risk assessment about work and learning activities, events, equipment and ‘things’ or the Manual Handling Risk Assessment form when the activities are about manual handling.

Alternatively, use the *Chemwatch* Risk Management or Credo Modules (chemical mixing processes) to conduct assessments about specific hazardous chemicals. *See page 4 for guidance about conducting a WHS risk assessment.*

**When should a WHS risk assessment be conducted?** An assessment should be conducted whenever the relevant safety issues and solutions are not immediately clear or complex, and they haven’t been assessed. WHS risk assessments should also be regularly reviewed. Read the WHS Risk Management Procedure for more information.

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| **Section 1: Describe what is being assessed and your consultations**  |
| Assessment Date:  | Completed by (incl. work area): | Campus/Location (incl. level and room): |
| Describe what is being assessed for hazards:  |
| The following people were consulted during this WHS risk assessment: |
| Potential impacts that may result in injuries, property damage or the damage to the natural environment: |
| Photos/Diagrams of the Hazard (s) |
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| **Section 2: What are the safety issues and solutions?** **Section 2: Assess the Hazards and Risks** *Formally assess hazards and risks, below, and refer to Appendix A and other resources for guidance.*  |

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| **Risk Analysis****What are the safety issues and consequences?** | **Risk Analysis****Determine whether additional treatments are required**  | **New Risk Treatments****To reduce the risk rating** |
| **Describe the Process, Activity, or ‘Thing’****Provide enough detail so that the relevant safety and wellbeing issues can be identified e.g., peak periods of work, manual handling aspects of a task, the parts of a learning activity that can’t be performed while physical distancing**  | **Hazard(s)**e**.g. hazardous chemicals, peak-hour driving, working alone, manual handling, tight deadlines, aggressive clients (on placements), contact sport, lack of support from colleagues**  | **Risk** **What harm (consequence) could result from being exposed to the listed hazards?** **e.g.** **Back injury that results in Lost Time Injuries, COVID-19 infection that leads to hospitalisation, adjustment disorder, cuts, and concussion**  | **Existing Treatments (risk controls)****Identify any existing treatments that are applied to eliminate/reduce the risk of harm e.g. manual handling training, use fume hood, wearing N95 masks, consulting/ responding to feedback about workload pressure**  | **Risk Rating****Determine the risk rating (see Appendix A) - based on applying existing treatments.**  | **New Treatments** **Prioritise actioning treatments to manage the most significant risks. Higher level treatments controls should be used to manage the most significant risks (refer to Hierarchy of Control, Page 5)**  | **Action Owner****Responsible for actioning treatments** | **New Risk Rating****Informed by applying existing and new treatments (Appendix B)**  |
|  |  |  |  | **Risk Rating:**  |  |  | **Risk Rating:**  |
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| **Section 3: Gain Approval/Authorization for this WHS Risk Assessment** |

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| **Required control and/or actions that require expenditure approval (incl. any costs)**  | **Action Owner (Person/s implementing controls)** | **Due Date** | **Date Applied** | **Verified by**  |
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| **Supervisor Signoff** |
| Is the risk acceptable/Not acceptable? (Please circle)  | Approved by (Name and Job Title of Nominated Supervisor/Manager):  | Signature:  |
| **Member of Executive recommendation if residual risk ratings are above a Medium 1**  |
| Member of Executive recommendation(If recommended Controls have budgetary implications or residual risks are rated above Medium 1) Member of Executive Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_/\_\_\_/\_\_\_\_\_ |
| **Senior Executive sign-off is required for risks that are rated above Medium 1**  |
| Senior Executive sign-off (if residual risk/s exceed Medium 1) ☑I am aware that at least one of the residual risk ratings exceeds ACU risk tolerance for community wellbeing (WHS) risks and accept this risk. Senior Executive: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_/\_\_\_/\_\_\_\_\_ |

**Retain a copy of the assessment and upload to** [**Service Central**](https://acu.service-now.com/service_central?id=servicecentral_home)(WHS Risk Assessment Form)

**Guidance about completing a WHS Risk Assessment**

**Section 1** - When you complete this section, consider attaching relevant photographs to support you to consult with subject matter experts, relevant staff and others.

It is important to consult broadly about the WHS assessment and associated treatments (controls measures) that are developed. Ensure you engage staff and others that are familiar with processes, have subject-matter expertise and/or will apply the treatments (control measures) that are developed. WHS risk assessments should also be discussed during staff meeting. These consultations will support you to develop shared ownership and an understanding of the relevant hazards and associated WHS risks, and safe systems of work that have been developed.

**Section 2 -** Consider the relevant safety issues and solutions, which are associated with the activity or ‘thing’ you are assessing. Use higher level treatments (reference the Hierarchy of Control, right) to manage the most significant WHS risks. Prioritise eliminating WHS risks. If this is not possible, reduce the WHS risks. Place a high priority on applying higher level treatments (controls) to manage your most significant WHS risks. Whenever treatments are considered, refer to the Hierarchy of Control.

**Section 3** -Listthe treatments (risk controls) that will be applied to manage the risk (s) and the responsible Action Owner. Gain endorsement for the WHS risk assessment from your nominated Supervisor/Manager.

The relevant Executive must also recommend WHS assessments that detail proposed treatments that will incur significant costs (aligned with the staff member’s financial delegation).

Members of the Senior Executive must approve WHS risk assessments whenever any residual risk rating exceeds Medium 1.

These and other significant organisational-unit wide risks should be uploaded to your organisational unit risk register (uploaded to CARM).

**Ongoing engagement**

Consider what support you can provide (e.g. supervision and training) to ensure that the treatments (risk controls) are understood and applied by staff and others. These treatments (control measures or safe work method statements) should also be highly accessible, and supervisors should support staff and others to apply them. ‘Check in’ with relevant staff and others to ensure they know how to access them.

 **Hierarchy of Control (Treatments)**



**APPENDIX A: Risk Matrix (Risk Rating Table)**

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| **How to Determine the Risk Rating** Step 1: Assess the Likelihood Rating by assessing the likelihood of exposure to a hazard e.g. Possible (0.3)Step 2: Determine the Consequence Rating of being exposed e.g. Minor (3) Step 3: Now align the two values to identify the risk rating e.g. a Possible likelihood rating (0.3) and Minor consequence rating (3) = Medium (0.9)  | **Consequence Rating** |
| **Insignificant** * Unlikely to result in an injury
 | **Minor** * Minor injury or illness/not resulting in lost workday
* First aid provided/no further treatment
* Safety practices inconsistent with safety policy/ procedures
* Hazardous substance release - potential to cause short term/minor adverse effects
 | **Moderate** * Could result in injury/ illness resulting in Lost Time Injury (LTI)/
* Hospitalisation
* Reversible, temporary (<2 years) impairment

Notification and attendance by a WHS Investigator * Multiple instances of sexual harassment, bullying or assault
 | **Major** * Could result in permanent partial disabilities/injuries or illness resulting in hospitalisation of multiple persons
* Reversible, temporary (>2 years) impairment

Provisional Improvement Notice requiring investigation and report to the regulator and/or penalties for breach |  **Catastrophic** * Could result in death, permanent total disabilities or severe injuries affecting multiple persons
* Breach of legislation and/or regulations may result in loss of ACU’s status as a university
* Regulatory sanctions imposed (including fines/penalties) and or criminal prosecution/civil proceedings
 |
| **Likelihood Rating** | **Factors**  |  | **(3)** | **(10)** | **(30)** | **(100)** |
| **Almost Certain** >90%: expected to occur in most circumstances, each month  | **(3)**  | **Medium (3)** | **Medium (9)** | **High (30)** | **High (90)** | **High (300)** |
| **Likely** 60 - 90%: Very likely/probably occur at least once (between 1 month and 1 year)  | **(1)** | **Medium (1)** | **Medium (3)** | **Medium (10)** | **High (30)** | **High (100)** |
| **Possible** 40 - 59%: might occur sometime between 1 and 5 years  | **(0.3)** | **Low (0.3)** | **Medium (0.9)** | **Medium (3)** |  **Medium (9)** | **High (30)** |
| **Unlikely** 10 - 39%: Possible but not likely and could occur at some time between 1 and 20 years | **(0.1)** | **Low (0.1)** | **Low (0.3)** | **Medium (1)** | **Medium (3)** | **Medium (10)** |
| **Rare** Conceivable but extremely unlikely  | **(0.03)** | **Low (0.03)** | **Low (0.09)** | **Low (0.3)** | **Medium (0.9)** | **Medium (3)** |

**APPENDIX B: SOME EXAMPLES OF HAZARDS**

**Here are some examples of hazards to consider. Circle the relevant hazards and consider the listed and other treatments.**

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| **General Hazards** |  |  |
| Lack of training in safe systems of work | Lifting and pushing | Handling heavy, unstable, or awkward objects/loads |
| Animal, insect, or spider bites/stings | Temperature extremes or uncomfortable temperatures | COVID-19 positive people attending campus  |
| Chemical exposures | A lack of knowledge about safe work processes | Damage to electrical parts or power cords |
| Sharps or needle exposures | High levels of exposure to the sun | Poor posture and repetitious movements |
| Uneven surfaces (could result in a fall)  | Steps without railing or coloured markings | Heavy traffic  |
| Activities that don’t support physical distancing  | Exposure to liquids like cleaning products, paints, acids, and solvents | Working from heights, including ladders, scaffolds, roofs, or any raised work area  |
| Moving patients on placement  | Lack of awareness about emergency processes  | Steep staircases  |
| **Psychosocial Hazards**  |  |  |
| Listening to accounts of trauma | Lack of connection between colleagues | Contact HR about trauma counselling support for staff and insurance.finance@acu.edu.au about student support |
| Exposure to violence or traumatic events | Criticism and other negative interactions | Review and monitor workloads and staffing levels |
| Lack of clarity about a role  | **Some examples of treatments (risk controls)**  | Prioritise the actioning of specific work during peak workload periods |
| Gaps in consultations and involvement of staff in decision making | Consult with impacted staff as early as possible (re changes)  | Supervisors act upon inappropriate behaviour |
| Changes in supervisory arrangements, technology, or methods | Regularly review position description to develop a shared understanding of role clarity | ‘Check in’ with staff to ensure they are comfortable with their workload  |
| Exposure to staff/students with mental health issues  | Management supervision, support, and training  | Seek and act on feedback about changes |
| Perception: performance measures/timeframes are not realistic | Leadership coaching  |  |
| **Chemical Hazards**  |  |  |
| **Health Effects** | **Hazardous Reactions**Explosive (chemical may have changed form)Flammable Spontaneous reactivityWater reactiveOxidiserOther dangerous reactions**Duration of Work/Day – Related to Exposures**Infrequent0 – 15 minutes16 minutes – 1 hour1 – 4 hours | **Evidence of Exposure**  |
| Acute toxicity (short term) Chronic toxicity (long term)CorrosiveIrritantSensitiserMutagenTeratogenAsphyxiateRadioactivityInfectious Also consult manufactures’ labels, Safety Data Sheets, Chemwatch and labels. | Explosive (chemical may have changed form) | Presence of dust/odours |
| Chronic toxicity (long term) | Flammable  | Leaks/spills/residue |
| Corrosive | Spontaneous reactivity | Staff/student symptoms |
| Irritant | Water reactive | Direct contact |
| Sensitiser | Oxidiser | **Routes of Exposure** |
| Mutagen | Other dangerous reactions | Inhalation |
| Teratogen | **Exposure Duration**  | Ingestion |
| Asphyxiate | Infrequent | Skin absorption |
| Radioactivity | 1 – 4 hours | Eye contact |
| Infectious  | 16 minutes – 1 hour | Injection/needle skin |
| Refer to manufactures’ labels, Safety Data Sheets, Chemwatch and labels. | 0 – 15 minutes | **Form**  |
| Liquid, powder, paste, gas, concentrate, dilute, other (has it changed form?) |
| **Chemical Chemicals Continued…** |  |  |
| **Some examples of treatments**  |  |  |
| Safe Operating Procedure (SOP | Safety equipment | Ensure chemical register is up to date  |
| Dry/inert atmosphere | Emergency procedures  | Apply ACU Chemical Management Procedure  |
| Reference Safety Data Sheets (Chemwatch)  | Accessible First aid  | Staff and student inductions  |
| Spill kits | PPE/blast shield/respirator | Corrosives Cabinet |
| Storage facility | First aid | Create awareness about emergency processes  |
| Fire-fighting equipment | Appropriate training/instruction | WHS inspections  |
| Fume cabinets | Health monitoring  | Audits  |
| **Field Trips**  |  |  |
| Security  | Uneven surfaces and other trip hazards  | Serviceable vehicles  |
| Poisonous plants  | Floods  | Driver safety briefings  |
| Communicable diseases in community  | Heavy traffic and other traffic hazards  | Servicing and testing of equipment  |
| Weather conditions  | **Some examples of treatments**  | Appropriate staff/student ratios  |
| Hypothermal/frostbit  | Survival training | Fire extinguishers  |
| FatigueManual Handling  | Training – equipment | Emergency procedures  |
| Manual Handling  | Sunscreen | Staff/student medical information provided  |
| Hazardous chemicals  | Personal Protective Equipment and suitable clothing | Appropriate briefings  |
| Firearms/explosives  | Maps/compass (mobile coverage may be limited)  | Contact 1300 729 452 (ACU Security) in the event of emergency services being contacted.  |
| Faulty equipment  | Adequate water and food supplies  |
| Bush fires  | First aid qualified staff attend the trip  | Fire extinguishers |
| Working in water  | Communication and ‘check in’ procedures  |  |
| **Machinery**  |  |  |
| Rotational motion | **Some examples of treatments**  | Safe Work Method Statements  |
| Linear motion  | Follow manufacturer’s manual  | Training and induction  |
| Vibration  | Proactive servicing  | Plant WHS risk assessments  |
| Noise  | Guarding  | Emergency responses  |
| Fumes  | Emergency shutdown  | Fire extinguishers  |
| Moving Parts  | Personal protective equipment  |  |

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| **Sharps/Needles**  |  |  |
| Pipette  | **Some examples of treatments**  | Training  |
| Glassware  | First aid  | Sterilisation procedures  |
| Scissors  | Personal Protective Equipment (PPE)  | Clean up procedures  |
| Syringes  | Appropriate supervision  | Remind students about the hazards |
| Scalpels/blades  | Disposal bines  | Apply lessons from riskware incidents  |
|  | Report incidents, including placement, inriskware  |  |
| **Electrical Hazards**  |  |  |
| 240 Volt  | Burns  | Testing and tagging (inspection of cords)  |
| High voltage  | Fatality  | First Aid  |
| Power loss  | **Some examples of treatments**  | Safe Work Method Statements (instructions)  |
| **Potential consequences**  | Residual Currency Device (RCD)/circuit breaker  | Shut-off switches  |
| Electric shock  | Circuit protection devices  | Inspection cords/tags  |
| Fire  | Regular servicing | Non-sparking induction motors/air motors  |
| **Radiation**  |  |  |
| Laser  | **Some examples of treatments**  | Safe Work Method statements (instructions)  |
| Ionising (e.g., gamma) | Spill kits | Decontamination protocol  |
| Non-ionising (e.g., infrared, microwave)  | First aid  | Appropriate training of staff and students  |
| Other: | Appropriate storage  | Waste disposal protocol |
|  | Adequate signage | Reference relevant compliance resources  |
| **Thermal**  |  |  |
| Hot  | **Some examples of treatments**  | Emergency procedures  |
| Cryogenic  | Heat mats | Safe Work Method Statements (instructions)  |
| Cold | Insulated gloves | Tongs  |
| Other:  | Personal Protective Equipment (PPE)  | First aid  |