ATTACHMENT 92 (PART A)
HAZARD IDENTIFICATION, RISK ASSESSMENT AND CORRECTIVE ACTION FORM

HAZARD IDENTIFICATION, RISK ASSESSMENT AND CORRECTIVE ACTION FORM

Step 1A. Hazard identification – completed by employee or employer

If urgent please ring or contact employer immediately, control situation as best you can without exposing yourself or others to undue harm. Then follow up as soon as possible with completion of this form.

Date: ………………………... Hazard raised by (please print name): …………………………………………………

Please describe possible workplace hazard in as much detail as possible including where it is located, source if known, who might be exposed to harm, how long it’s been around, if there are precautions that are already in place, if you think there are problems with these existing precautions, and any ideas you have on more effective precautions.

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Step 1B. Hazard notification – completed by employee and employer

This form forwarded to management or employer representative on [insert date]: ……………………………

Name of employer representative: ………………………………………………………………………………………

Signature of employer representative: ………………………………………………………………………………………

Step 1C. Hazard analysis – completed by employer in consultation with employee(s)

Cross-reference to other documents and date: ………………………………………………………………………

Other information reviewed and assistance received:

………………………………………………………………………………………………………………………………………………
………………………………………………………………………………………………………………………………………………

Hazard/item/task to be assessed: …………………………………. Date: ………………………

Location(s) of hazard/item/task:

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Possible reasons for presence of hazard and identify hazard source if known or suspected:

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Step 2. Risk assessment – completed by employer in consultation with employee(s)

Use the spreadsheet table in this form. To help determine the Risk Level (if required) please use this Risk Assessment Tool, or other tool as agreed by the employer team.

When you use the matrix, try not to be too concerned about the need to always get the ‘correct’ risk level. Whether the risk is precisely ‘high’, ‘medium’ or ‘low’ is only an approximate indication of real situations involved and the tool is intended to provide a useful guide in deciding priorities in controlling the risk.

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Telephone 03 9489 3500 or 1300 730 119 (rural)
Risk level = likelihood x consequence

**Likelihood**
- Almost certain: we can be sure it will happen
- Likely: good chance it will happen
- Possible: perhaps it will happen sometime
- Unlikely: could happen but it would be unusual
- Rare: could happen but probably never will

**Consequence**
- Catastrophic: person is killed or totally disabled
- Major: very serious injury or long-term illness
- Moderate: quite serious injury/illness involving some days off work
- Minor: some first aid or minor medical attention, but no lost time
- Insignificant: some discomfort, but no medical attention needed

**Step 3. Determine corrective action (risk control measures) required – completed by employer in consultation with employee(s)**

Use the spreadsheet table in this form. To help determine possible risk control measures you need to consider:

- Ensuring your OHS issue resolution procedure is being followed,
- What risk controls are in place and are these working effectively,
- If these are not effective analyse why not,
- Seeking assistance from one or more of:
  - WorkSafe Victoria hotline Tel: (03) 9641 1444
  - KPV Tel: (03) 9489 3500
  - Your Worker’s Compensation Insurer or Agent
  - An OHS Consultant
  - Employee representative organisations such as Trade Unions (note that Trades Hall Council has a possibly useful website http://www.vthc.org.au.)
• Ensuring you consider the possibility of alternation to risk levels, or introduction of new hazards and risks due to proposed changes including corrective action and risk controls.

• Ensure you consider your recovery or emergency response measures are suitable for existing, improved and new risk controls (i.e. consider are relevant persons including employees prepared if these risk controls fail? And under what circumstances might these risk controls fail?).

If required, record details of other information reviewed and assistance received:

**Step 4. Monitor and review effectiveness of risk controls and changes made – completed by employer in consultation with employee(s)**

Use the spreadsheet table in this form. Responsible persons need to be assigned, and they need to agree to monitoring and reviewing the effectiveness of risk controls and any changes made. These persons need to report their findings to other employer representatives. The employer representatives then need to determine if the corrective action has been completed, instigate other action as needed, and keep records on file.