

For additional information refer to HS329 [Risk Management Procedure](#)

Faculty/Division:		School/Unit:		
Document number	Initial Issue date	Current version	Current Version Issue date	Next review date

Risk management name

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Form completed by		Signature	Date
Responsible supervisor/ authorising officer		Signature	Date

Identify the activity and the location of the activity

Description of activity

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Description of location

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Identify who may be at risk from the activity:

This may include fellow workers, visitors, contractors and the public. The types of people may affect the risk controls needed and the location may affect the number of people at risk

Persons at risk

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How they were consulted on the risk

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List legislation, standards, codes of practice, manufacturer's guidance etc used to determine control measures necessary

Work Health and Safety Act 2011
Work Health and Safety Regulation 2011

Identify hazards and control the risks.

1. An activity may be divided into tasks. For each task identify the hazards and associated risks. Also list the possible scenarios which could sooner or later cause harm.
2. Determine controls necessary based on legislation, codes of practice, Australian standards, manufacturer's instructions etc.
3. List existing risk controls and any additional controls that need to be implemented
4. Rate the risk once all controls are in place using the matrix in HS329 Risk Management Procedure

SHADED GREY AREAS

If you need to determine whether it's reasonably practicable to implement a control, based on the risk complete the shaded grey columns

Feel free to resize the boxes to suit your situation/the amount of text you need to use

Task/ Scenario	Hazard	Associated harm	Existing controls	Any additional controls required?	Risk Rating			Cost of controls (in terms of time, effort, money)	Is this reasonably practicable Y/N
					C	L	R		
			•						
			•						
			•						
			•						

List emergency procedures and controls

List emergency controls for how to deal with fires, spills or exposure to hazardous substances and/or emergency shutdown procedures

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Implementation

Additional control measures needed:	Resources required	Responsible person	Date of implementation

REVIEW

Scheduled review date:			
Are all control measures in place?			
Are controls eliminating or minimising the risk?			
Are there any new problems with the risk?			
Review by: (name)			
Review date:			

Acknowledgement of Understanding

All persons performing these tasks must sign that they have read and understood the risk management (as described in HS329 Risk Management Procedure).

Note: for activities which are low risk or include a large group of people (e.g. open days, BBQ's, student classes etc), only the persons undertaking the key activities need to sign below. For all others involved in such activities, the information can be covered by other methods including for example a safety briefing, induction, and/or safety information sheet (ensure the method of communicating this information is specified here)

Risk management name and version number:		I have read and understand this risk management form	
Name		Signature	Date