



CSCS RISK ASSESSMENT & CONTROL FORM

DOCUMENT NUMBER:

Risk Assessment description- Area/Process/Equipment:	
Location risk assessment conducted:	
Date risk assessment conducted:	Time risk assessment conducted:
List special requirements/needs for risk assessment:	
Name:	Sign:



STEP 1. IDENTIFY Hazards and Risks

Tick each box in the guideline below to indicate that the potential hazards and risks listed below have been considered, alternatively add new.

Note: Use the 'Risk Control Measures form' located at the end of this document to complete the risk assessment.

Hazard & Risk Guideline (reference)

Temp: Hot / Cold, Sun, UV	Fire hydrant/Fire extinguisher	Spiders, Snakes, Birds	Sharps
Weather: Windy, Fog, Rain	Telecommunication pits	Pests, Vermin	Confined Space
Trees, Gardens, Plants	Pinch and Crush Points	Uneven Surfaces	Roofs, Ladders, Scaffolds
Rocks, Stones, Pebbles	Working at Height	Traffic: Cars, Human, Pedestrians	Noise, Vibrations
Taps, Hoses, Irrigation	Access & Egress	Other Workers, Colleagues	Light or Dark Areas
Drains, Sewer, Water pipes	Green waste: Lawn, Leaves, Dirt	Equipment Tools E.g. Shovel, Rakes	Lifting, Carrying, Push, Pull
Footpath, Roads, Walkways	Sprinkler Heads, Watering System	Electricity Cords, Power Outlets	Chemicals: Spills, Vapours, Incorrect containers
Ditches, Mud, Bark, Holes	Buildings, Sheds, Cottages	Overhead power lines	
Pinch and Crush Points	Other:		



Hazards & Risks identified.

Optional - can be added directly to the Risk Control Measures form found at the end of this document

<u>No.</u>	<u>Summary of the risks or hazards identified (Step 1)</u>	<u>Detail or description of the risks or hazards identified</u>
<u>1</u>		
<u>2</u>		
<u>3</u>		
<u>4</u>		
<u>5</u>		
<u>6</u>		
<u>7</u>		
<u>8</u>		
<u>9</u>		
<u>10</u>		



STEP 2. Establish a RISK RATING on the hazards and risks identified

Note: Use the 'Risk Control Measures form' located at the end of this document to complete the risk assessment.

The Risk Rating "Category & Number" is identified by using the vertical columns and horizontal rows in the RISK MATRIX (see page six). The risk matrix asks you to consider the two questions seen below and choose from the options dot pointed:

QUESTION 1 ▼ **CONSEQUENCE** – Potentially how severe is the consequence or outcome of the risk or hazard identified (Vertical Column's in Matrix)?

- Fatality / Permanent Disability / Extensive Damage & Financial loss
- Long term Illness or Significant injury / Major – Damage & Financial loss
- Medical attention more than one week off normal duties / Serious Damage & Financial loss
- Medical attention less than one week off normal duties / Minor Damage & Financial loss
- 1st Aid injury / Negligible Damage & Financial loss

QUESTION 2 ► **LIKELIHOOD** – Potentially what is the likelihood of the risk or hazard identified occurring (Horizontal Rows in Matrix)?

- Almost certainly will occur
- Good chance it could occur
- Likely to occur Unlikely to occur
- Extremely unlikely to occur



The table below displays another way to look at the RISK MATRIX. Listed below is all the Risk Rating categories and numbers (25 = Highest Risk, 1 = Lowest Risk)

No.	RISK:	CATEGORY:	LIKELIHOOD:	CONSEQUENCE / SEVERITY:
25.	CRITICAL	1	Almost certainly will occur.	Fatality / Permanent Disability / Extensive Damage & Financial loss.
24.	CRITICAL	1	Good chance it could occur.	Fatality / Permanent Disability / Extensive Damage & Financial loss.
23.	CRITICAL	1	Almost certainly will occur.	Long term Illness or Significant injury / Major – Damage & Financial loss.
22.	CRITICAL	1	Likely to occur.	Fatality / Permanent Disability / Extensive Damage & Financial loss.
21.	HIGH	2	Good chance it could occur.	Long term Illness or Significant injury / Major – Damage & Financial loss.
20.	HIGH	2	Almost certainly will occur.	Medical attention more than one week off normal duties / Serious Damage & Financial loss.
19.	HIGH	2	Unlikely to occur.	Fatality / Permanent Disability / Extensive Damage & Financial loss.
18.	HIGH	2	Likely to occur.	Long term Illness or Significant injury / Major – Damage & Financial loss.
17.	HIGH	2	Good chance it could occur.	Medical attention more than one week off normal duties / Serious Damage & Financial loss.
16.	HIGH	2	Almost certainly will occur.	Medical attention less than one week off normal duties / Minor Damage & Financial loss.
15.	HIGH	2	Extremely unlikely to occur.	Fatality / Permanent Disability / Extensive Damage & Financial loss.
14.	HIGH	2	Unlikely to occur.	Long term Illness or Significant injury / Major – Damage & Financial loss.
13.	HIGH	2	Likely to occur.	Medical attention more than one week off normal duties / Serious Damage & Financial loss.
12.	MODERATE	3	Good chance it could occur.	Medical attention less than one week off normal duties / Minor Damage & Financial loss.
11.	MODERATE	3	Almost certainly will occur.	1st Aid injury / Negligible Damage & Financial loss.
10.	MODERATE	3	Extremely unlikely to occur.	Long term Illness or Significant injury / Major – Damage & Financial loss.
9.	MODERATE	3	Unlikely to occur.	Medical attention more than one week off normal duties / Serious Damage & Financial loss.
8.	MODERATE	3	Likely to occur.	Medical attention less than one week off normal duties / Minor Damage & Financial loss.
7.	MODERATE	3	Good chance it could occur.	1st Aid injury / Negligible Damage & Financial loss.
6.	MODERATE	3	Extremely unlikely to occur.	Medical attention more than one week off normal duties / Serious Damage & Financial loss.
5.	MODERATE	3	Unlikely to occur.	Medical attention less than one week off normal duties / Minor Damage & Financial loss.
4.	LOW	4	Likely to occur.	1st Aid injury / Negligible Damage & Financial loss.
3.	LOW	4	Extremely unlikely to occur.	Medical attention less than one week off normal duties / Minor Damage & Financial loss.
2.	LOW	4	Unlikely to occur.	1st Aid injury / Negligible Damage & Financial loss.
1.	LOW	4	Extremely unlikely to occur.	1st Aid injury / Negligible Damage & Financial loss.



CSCS Risk Matrix

▶ LIKELIHOOD (probability)	▼ CONSEQUENCES				
	▼ If the risk event actually occurs what is the severity of Injuries/Potential damages/Financial impacts?				
▶ How likely is the event to occur?	▼ DISASTROUS	▼ MAJOR	▼ SERIOUS	▼ MINOR	▼ NEGLIGIBLE
		<ul style="list-style-type: none"> Fatality / Permanent Disability. Extensive Damage & Financial loss 	<ul style="list-style-type: none"> Long term Illness or Significant injury. Major – Damage & Financial loss 	<ul style="list-style-type: none"> Medical attention more than one week off normal duties. Serious Damage & Financial loss 	<ul style="list-style-type: none"> Medical attention less than one week off normal duties. Minor Damage & Financial loss
▶ ALMOST CERTAINLY WILL OCCUR	CAT 1. CRITICAL RISK No. 25.	CAT 1. CRITICAL RISK No. 23	CAT 2. HIGH RISK No. 20	CAT 2. HIGH RISK No. 16	CAT 3. MODERATE RISK No. 11
▶ GOOD CHANCE IT COULD OCCUR	CAT 1. CRITICAL RISK No. 24	CAT 2. HIGH RISK No. 21	CAT 2. HIGH RISK No. 17	CAT 3. MODERATE RISK No. 12	CAT 3. MODERATE RISK No. 7
▶ LIKELY TO OCCUR	CAT 1. CRITICAL RISK No. 22	CAT 2. HIGH RISK No. 18	CAT 2. HIGH RISK No. 13	CAT 3. MODERATE RISK No. 8	CAT 4. LOW RISK No. 4
▶ UNLIKELY TO OCCUR	CAT 2. HIGH RISK No. 19	CAT 2. HIGH RISK No. 14	CAT 3. MODERATE RISK No. 9	CAT 3. MODERATE RISK No. 5	CAT 4. LOW RISK No. 2
▶ EXTREMELY UNLIKELY TO OCCUR	CAT 2. HIGH RISK No. 15	CAT 3. MODERATE RISK No. 10	CAT 3. MODERATE RISK No. 6	CAT 4. LOW RISK No. 3	CAT 4. LOW RISK No. 1



Risk Rating + Risk Rating “Category & Number”

Optional - can be added directly to the Risk Control Measures form found at the end of this document

No.	Summary of the risks or hazards identified (Step 1)	Risk Rating “Category & Number” (Step 2)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		



STEP 3. CONTROL THE RISK

Tick each box in the guideline below to indicate that the potential control measures listed below have been considered, alternatively add new.

Note: Use the 'Risk Control Measures form' located at the end of this document to complete the risk assessment.

Control Measure Guideline (reference)

Training, Licenses	Signage	Hats, Sunscreen, Repellent	First Aid Kit, Spill Kits, Sharps Kits
Safe Work Method Statements SWMS	Lock out Tags	Safety Goggles, Sunglasses	Harness, Ropes, Anchor points
Permits, Procedures, Policies, SDS	Barriers, Bunting, Tape	Hi Vis Clothing	Inspection of tools before use
Communication	Bollards, Witches Hats	Spot Lights, Torches	Rest Periods, Shade, Food, Water, Breaks
Work Plans, Job Diary	Traffic Control, Pedestrian/Vehicular	Respirators, Dust Masks	House Keeping
Emergency Plan	Trained Observer, Spotter	Ear plugs, Ear muffs	Group Lift, Bend with Knees
Warning mediums e.g. Aps, SES, Dial -A -Dig	Services & Utilities e.g. Phone, Water	Gloves e.g. Rubber, Leather	3 Points Contact E.g. Ladder
	Isolate utility supplies e.g. Gas, Electricity	Full Enclosed Uppers E.g. Leather	Other:

Using the hierarchy of controls as a guide detail the control measures you will implement to eliminate or minimise the hazards/risks you identified in step 1.

HIERARCHY OF CONTROLS

ELIMINATE	SUBSTITUTE	ISOLATE	ENGINEERING	ADMINISTRATION	PPE
<p>Eliminate the hazard altogether. For example – get rid of the dangerous machine.</p>	<p>Substitute the hazard with a safer alternative. For example – replace the machine with a safer one.</p>	<p>Isolate the hazard from anyone who could be harmed. For example – keep the machine in a closed room and operate it remotely.</p>	<p>Use engineering controls to reduce the risk. For example – attach guards to the machine to protect users.</p>	<p>Use administrative controls to reduce the risk. For example – train workers how to use the machine safely.</p>	<p>Use personal protective equipment (PPE). For example – wear gloves and goggles when using the machine.</p>



Risk Rating + Risk Rating “Category & Number” + Control Measure

Optional - can be added directly to the Risk Control Measures form found at the end of this document

<u>No.</u>	<u>Summary of the risks or hazards identified (Step 1)</u>	<u>Risk Rating “Category & Number” (Step 2)</u>	<u>Control Measure (Step 3)</u>
<u>1</u>			
<u>2</u>			
<u>3</u>			
<u>4</u>			
<u>5</u>			
<u>6</u>			
<u>7</u>			
<u>8</u>			
<u>9</u>			
<u>10</u>			



STEP 4. Action Plan

Note: Use the 'Risk Control Measures form' located at the end of this document to complete the risk assessment.

Develop an action plan to implement the control measures identified in step 3 e.g. "sign post immediately", actioned by – "name" and the "date" action to be completed

Risk Rating + Risk Rating "Category & Number" + Control Measure + Action Plan

Optional - can be added directly to the Risk Control Measures form found at the end of this document

No.	Summary of the risks or hazards Identified (Step 1)	Risk Rating "Category & Number" Identified (Step 2)	Control Measure Identified (Step 3)	Action Plan - include by who and when (Step 4)
<u>1</u>				
<u>2</u>				
<u>3</u>				
<u>4</u>				
<u>5</u>				
<u>6</u>				
<u>7</u>				
<u>8</u>				
<u>9</u>				
<u>10</u>				



STEP 5. Residual Risk

Note: Use the 'Risk Control Measures form' located at the end of this document to complete the risk assessment.

Once the control measures are in place determine the Residual Risk Rating "Category & Number", this is the same process as shown in step 2. If the risk is still not acceptable reassess control measures as shown in step 3. Document the relevant data into the **CSCS Hazard & Risk Register**, this is where hazards/risks and actions are monitored and reviewed.

Risk Control Measures form

No.	Summary of the risks or hazards Identified (Step 1)	Risk Rating "Category & Number" Identified (Step 2)	Control Measure Identified (Step 3)	Action Plan - include by who and when (Step 4)	Residual Risk Rating "Category & Number" (Step 5)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					