Risk Assessments are a component of WHS requirements for the Faculty of Science and Health detailed in-

**FOSH Research WHS Requirements Policy and Procedure** - S:\Academic\FOS\TS - Research Information\AA\_ Research WHS documentation policy and procedure

**FOSH Undergraduate and postgraduate Course Work Documentation policy and Procedure** - S:\Academic\FOS\Technical Services Undergrad & Postgrad Course Work\Supporting Documentation\Policy & Procedure

|  |
| --- |
| **Step 1: Background information (activity, location and people assessing risk)**  |
| **School/Research Centre:** |  |
| **Title/subject:** |  |
|  **Location** |   |
|  **Prepared by:** |  | **Staff/student number** |  |
|  **Project type:** | [ ] Undergraduate  | [ ] Postgraduate | [ ] Staff  | [ ] Other Click or tap here to enter text. |
| **Type of activity/task:** | [ ] Teaching | [ ] Laboratory work  | [ ] Fieldwork | [ ] Clinical work | [ ] Commercial |
| [ ]  Research | [ ] Specialist teaching [ ] Other Click or tap here to enter text.\* *Where more than 1 type selected, this form MUST include risk controls specific for each*  |
| **Date/Session for project/activity:** |  |  |
| **Description of task/project/****activity:**(list the substances, equipment, and methods) |   |

|  |
| --- |
|  **Standard conditions**   |
| **CSU Laboratories / Clinics** comply with Australian Standards and have: trained wardens, trained first aid officer/s, first aid kit/s, the emergency notification system regularly tested and annual trial evacuations conducted, chemical spill kits available, manufacturer SDSs available for all chemicals, all required personal protective equipment available and appropriate waste disposal streams. Additional task specific controls should be implemented as required and should be outline in this risk assessment. Standard risk controls should be consulted for common hazards. By signing this risk assessment, you acknowledge that these standard conditions will be implemented, and you agree to these controls  |

|  |
| --- |
| **Step 2: Special approvals**  |
| **Has approval been obtained from the following? Please attach as appropriate.** | Is approval required? | Are documents attached? |
| Ethics in Human Research Committee (EHRC) | Choose an item. | Choose an item. |
| Animal Care & Ethics Committee (ACEC) | Choose an item. | Choose an item. |
| Institutional Biosafety Committee (IBSC) | Choose an item. | Choose an item. |
| Radiation Safety Committee (RSC)  | Choose an item. | Choose an item. |
| Office of the Gene Technology Regulator (OGTR) | Choose an item. | Choose an item. |
| Department of Agriculture, Fisheries and Forestry (DAFF) | Choose an item. | Choose an item. |
| Afterhours access required (details must be included in this risk assessment) | Choose an item. | Choose an item. |
| Other (e.g. permits) | Choose an item. | Choose an item. |

|  |
| --- |
| **Step 3: Online WHS Training**  |
| Complete required Online safety training (Research only, not required by undergraduate students\*).Tick the box/s for training completed and tick box/s if results are saved to s-drive Staff - [ELMO @ CSU (elmotalent.com.au)](https://csu.elmotalent.com.au/)Research Students- <https://www.csu.edu.au/division/learning-teaching/help-and-resources/support-available-to-students/student-online-training-modules> |
| **Compulsory** | **Training complete** | **Results saved to S-drive (research only)** | **Project Specific** | **Training complete** | **Results saved to S-drive (research only)** |
| Your safety (Safe U @CSU) |[ ] [ ]  Radiation General Induction\* |[ ] [ ]
| Fire and Emergency Procedures |[ ] [ ]  Human Research and Ethics |[ ] [ ]
| WHS Risk Management | [ ]  |[ ]  Animal Care and Ethics |[ ] [ ]
| Chemical Safety @CSU  |[ ] [ ]  Research Integrity |[ ] [ ]
| Introduction to Research Data Management | [ ]  |[ ]  Personal Protective Equipment for Infection Control |[ ] [ ]
| Information Security Awareness |[ ] [ ]   |  |  |
| Defence Trade Control Act | [ ]  |[ ]   |  |  |
| Greenlabs @CSU | [ ]  | [ ]  |  |  |  |
| \*Radiation General Induction to be completed by all radiation users including undergraduate students  |

**Step 4: Identify hazard types**

|  |
| --- |
| Use the following lists to identify types of hazards associated with the task/ activity. **Each hazard** identified should be addressed in **Step 6**. If hazard not listed below, select other and provide specific details in Step 6. |
| **Project/activity hazards** | **Workplace conditions hazards** | **Environmental impacts** |
| *(Potential hazards associated with the task or activity)* | *(Potential hazards relating to the work environment where activity/task will occur)* | *(Potential hazards to the environment or property from the task/activity)* |
| [ ] Sharps[ ] Manual handling[ ] Physical hazard (being struck, crushed, or entangled)[ ] Infectious agents/materials[ ] Biological hazard/s[ ] Chemical hazard/s[ ] Machinery/vehicles/power tools[ ] Radiation hazard/s[ ] Vibration or noise[ ] Slips, trips, and falls[ ] Stress or fatigue[ ] Electrical[ ] GMOs[ ] Animals[ ] Other (specify) Click or tap here to enter text. | [ ]  Temperature extremes[ ]  Weather extremes[ ] Solar radiation[ ] Other radiation forms[ ]  Working in isolation/alone[ ] Working after hours[ ] Animals/ Insects[ ] Working in water[ ]  Bush fire[ ] Transporting chemicals/dangerous goods[ ] Dusts, fumes, vapors[ ]  Other (specify) Click or tap here to enter text. | [ ]  Hazardous emission[ ] Hazardous waste[ ] Release of organisms[ ] Dust generated[ ] Nuisance noise[ ]  Other (specify):Click or tap here to enter text. |

|  |
| --- |
| **Step 5: Specialised risk assessments**  |
| If task/activity involves the following hazard categories, specialised risk assessment/s should be completed and attached to this form. The hazard/s should be listed in **Step 6**, with reference to attached risk assessment for detailed risk controls. |
| **Hazard category** | **Risk assessment/s required?** | **Risk assessment/s attached?** |
| Hazardous chemical  | Choose an item. | Choose an item. |
| Microorganisms | Choose an item. | Choose an item. |

|  |
| --- |
| **Step 6: Risk Assessment- Identify hazards, assess the level of risk and propose controls**  |
| For work in FoSH facilities and/or field work complete the relevant table below. * Provide detailed description of all hazards identified in Step 4. (*Insert additional rows if required)*
* Outline controls and determine risk rating using risk matrix (*see Appendix 1*). Include standard risk controls laboratory/fieldwork, where applicable and add additional controls as required
* Specify the control type (from hierarchy Appendix 1).
 |
| **FOSH facility** | **Facility type** Choose an item. **Other** Click or tap here to enter text.*For multiple facilities include details* Click or tap here to enter text. |
| **Hazard** | **Proposed controls** (What will be done to eliminate or reduce the risk? E.g. refer to special risk assessment and SWPS) | **Risk rating** | **Control type** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **Fieldwork** | **On campus** [ ]  **Off campus** [ ]  |
| **Hazard** | **Proposed controls** (What will be done to eliminate or reduce the risk? E.g. refer to special risk assessment and SWPS) | **Risk rating** | **Control type** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Step 7: List of attachments (e.g. SWPs, approvals, field maps)** |
|  |
|  |
| **Step 8: Additional comments** |
|  |
|  |
| **Step 9: Approvals and acknowledgments** **(As per approvals flow chart)** |
| As per approval flow chart in Appendix 2 |
| **Assessor** |  | **Signature** |  | **Date** | Click here to enter a date. |
| **Supervisor (Research)****Subject Coordinator/Convenor (Teaching)** |  | **Signature** |  | **Date** | Click here to enter a date. |
| **Technical Manager**  |  | **Signature** |  | **Date** | Click here to enter a date. |
| **Associate Head of School, Research (or delegate)** |  | **Signature** |  | **Date** | Click here to enter a date. |
|  **Director, Research Institute (or delegate)** |  | **Signature** |  | **Date** | Click here to enter a date. |

|  |
| --- |
|  |
| All additional persons performing these tasks must sign that they have read, understood and will follow the risk assessment.*Note: For activities which are low risk or include a large group of people (e.g. BBQ’s, marketing activities 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 (safety information sheet, safety briefing, induction) providing this is clearly specified in the risk assessment.* |
| **I have read, understood and will follow this risk assessment.** |
| **Name** | **Signature** | **Date** |
|  |  | Click here to enter a date. |
|  |  | Click here to enter a date. |
|  |  | Click here to enter a date. |
|  |  | Click here to enter a date. |

**Appendix 1: Risk Rating Guides and Hierarchy of control**

Please consult the [Risk Management Guidelines](https://policy.csu.edu.au/download.php?associated=1&id=532&version=3) for the complete risk guidelines (including impact ratings) and the [Risk Appetite Statement](https://policy.csu.edu.au/download.php?associated=1&id=941) for risk tolerance.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |
| --- |
| **Risk Likelihood Ratings Guide** |
| **Likelihood Rating** | **Description** | **Indicative Frequency of Occurrence**  |
| **5. Almost Certain** | The event will occur within the planning period. | Greater than 90% chance of occurring/known to occur every year. |
| **4. Likely** | The event is likely to occur within the planning period. | 51% to 90% chance of occurring/once every 1-2 years. |
| **3. Possible** | The event may occur within the planning period.  | 30% to 50% chance of occurring/once every 2–3 years. |
| **2. Unlikely**  | The event is not likely to occur in the planning period. | 5% to 30% chance of occurring/once every 3–5 years. |
| **1. Rare** | The event will only occur in exceptional circumstances. | Less than 5% chance of occurring/once every 5–10 years. |

 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Risk Ratings Matrix** |  |  |  |  |
| **Risk Matrix** | **1. Insignificant** | **2. Minor** | **3. Moderate** | **4. Major** | **5. Catastrophic** |
| **5. Almost Certain** | Medium | High | High | Very High | Very High |
| **4. Likely** | Medium | Medium | High | High | Very High |
| **3. Possible** | Low | Medium | Medium | High | High |
| **2. Unlikely** | Low | Low | Medium | Medium | High |
| **1. Rare** | Low | Low | Low | Low | Medium |

 |
|

|  |  |
| --- | --- |
| **Level of Risk** | **Recommended Action** |
| **Low:** | Manage risk with existing controls in place |
| **Medium:** | Acceptable provided current and additional controls are verified as effective and in place by the site, task or activity manager or their delegate |
| **High** | Only acceptable if it is not practicable or efficient to reduce the level of risk and approved by Division or Faculty head or their delegate |
| **Very high** | Not permitted unless approved by the executive leadership team. If approved, long term reduction plan required. |

 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Hierarchy of control**  |  |  |  |
| **Level** | **Control** | **Abbreviation**  |
| **1** | **Elimination-** e.g eliminate the chemical or hazard by use of alternative means. | **ELI** |
| **2** | **Substitution-** e.g. substitute with a safe chemical. | **SUB** |
| **3** | **Isolation-** isolate or separate the person from the hazard. | **ISO** |
| **4** | **Engineering-** engineering solution e.g. fume cabinet. | **ENG** |
| **5** | **Administration-** use of procedure, safe working procedures and / or training. | **ADM** |
| **6** | **PPE -** use of personal protective equipment. | **PPE** |

 |

**Appendix 2: Approval Flow charts**

**Research Approval Undergraduate Teaching Approval**

Clinic/Institute Director or delegate

**Research Fieldwork**

**Institute**

**Research Fieldwork**

**School**

**Research Laboratory**

**School**

**Research Laboratory**

**Clinic/Institute**

Researcher/s and participants (e.g. project team members)

Researcher/s and participants (e.g. project team members)

Researcher/s and participants (e.g. project team members)

Researcher/s and participants (e.g. project team members)

Supervisor / Lead Researcher

Supervisor / Lead Researcher

Supervisor / Lead Researcher

Area Technical Manager

Head of School or delegate

Head of School or delegate

Institute Director or delegate

Supervisor / Lead Researcher

Subject Coordinator/convener

**Undergraduate Teaching:**

Laboratory, specialist teaching space, clinical and fieldwork

Area Technical Manager

Head of School or delegate