

WHS Risk Assessment and Control Template

This Risk Assessment and Control template must be completed when assessing risk and implementing control measures:

Instructions for completing this template:

1. Discuss with relevant colleagues, Senator/Member the process or task that presents as a hazard, any associated hazards, risks and controls.
2. In the 'Hazards Involved' column, list the hazard/s identified.
3. Assess the risk using the risk matrix on page 2, and then add this to the 'Risk Rating' column.
4. For each hazard, work through the hierarchy of control (see list below) and choose a control measure to reduce the risk. Add this to the 'Control Measure' column.
 - Eliminate – risks must be eliminated in all cases unless it is not reasonably practicable to do so.
 - Substitute or modify the hazard.
 - Use engineering or design controls to control the hazard at its source
 - Introduce administrative controls.
 - Use Personal Protective Equipment (PPE).
5. Provide a copy of this completed template to the [WHS and Occupational Services Provider](#) so that it can be stored on the central register and retain a copy at the site.
6. Monitor and review effectiveness of control measures implemented.

Risk Matrix

Likelihood		Very Likely	Likely	Unlikely	Highly Unlikely
Consequences	Fatality	High	High	High	Medium
	Major Injuries	High	High	Medium	Medium
	Minor Injuries	High	Medium	Medium	Low
	Negligible Injuries	Medium	Medium	Low	Low

Likelihood

- **Very likely** (exposed to hazard continuously)
- **Likely** (exposed to hazard occasionally)
- **Unlikely** (could happen but only rarely)
- **Highly unlikely** (could happen, but probably never will)

Consequences

- **Fatality**
- **Major or serious injury** (serious damage to health which may be irreversible, requiring medical attention and ongoing treatment).
- **Minor injury** (reversible health damage which may require medical attention but limited ongoing treatment). This is less likely to involve significant time off work.
- **Negligible injuries** (first aid only with little or no lost time).



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Name of Assessor:		Location:	
Date:		Review Date:	

Hazards Involved	Risk Rating (high, medium, low)	Control Measure (include resources required)	Person Responsible	Date Completed