

JOB SAFETY ANALYSIS

Number:		Activity/task name:		Location:	
Developed by:				Date:	
Approved by:				Date:	
Consulted with:				Date for review:	
Description of Activity/Work Task			Statutory & Non-Statutory References		
<i>Describe what this JSEA covers, the purpose of the task etc:</i>			<i>List all relevant legislation, codes of practice, standards and guidance notes that may be relevant.</i>		
Who is at risk? [Tick relevant answers]					
<input type="checkbox"/> Workers		<input type="checkbox"/> Public		<input type="checkbox"/> Other	
Potential Environmental Hazards Considerations			Potential WHS Hazards		
<input type="checkbox"/> Air pollution (dust & fumes)	<input type="checkbox"/> Spills to ground	<input type="checkbox"/> Electrical	<input type="checkbox"/> Dust/fumes	<input type="checkbox"/> Work at heights	<input type="checkbox"/> Manual Handling
<input type="checkbox"/> Noise Pollution	<input type="checkbox"/> Soil Erosion	<input type="checkbox"/> Plant/equipment	<input type="checkbox"/> Confined Space	<input type="checkbox"/> Light/dark	<input type="checkbox"/> Hot/Cold
<input type="checkbox"/> Spills to water	<input type="checkbox"/> Hazard to flora or fauna	<input type="checkbox"/> Asbestos	<input type="checkbox"/> Ignition sources	<input type="checkbox"/> Chemical	<input type="checkbox"/> Pressure/Stored Energy

		<input type="checkbox"/> Gravity – falling objects, falls, slips and trips	<input type="checkbox"/> Extreme temperatures	<input type="checkbox"/> Radiation	<input type="checkbox"/> Biological
<input type="checkbox"/> Other:		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
Hazardous Chemicals [List any hazardous chemicals to be used — Attach MSDS/SDS]			Fire/Emergency Equipment Requirements [eg fire extinguisher, rescue gear etc]		
Supplementary Permits Required	PPE Requirements [(Please list)]		Special Tools or Equipment Required e.g. gas detection, ventilation fans, lighting, asbestos etc		
Confined Space	Gloves	Hearing			
Hot work	Hi Vis Clothing	Other			
Excavation entry	Safety footwear				
Permit to work	Goggles				

Steps	Break the task down into logical steps	What can go wrong? These are the hazards identified [List each hazards and give each a risk rating]	What can be done to reduce risks? These are the controls [Consider each hazard]	Rating 1-6

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Use the risk assessment tool on the following page to assess the risk.

Risk Assessment Tool

What are the CONSEQUENCES if it occurs?	What is the LIKELIHOOD of it occurring?				High	1	2	3	4	5	6	Low
	A Very Likely	B Likely	C Unlikely	D Very Unlikely	Points to be remembered with hazards							
A Potential to cause death of one or more persons.	1	1	2	3	Can the hazard be eliminated? If not the risk must be minimised to the lowest level possible.							
B Serious injury or illness e.g. an injury or illness that requires significant medical attention and / or absence from work and / or a permanent impairment.	1	2	3	4	Can the equipment, materials or process be changed?							
C Moderate injury or illness e.g. an injury or illness that requires medical attention and / or a short absence from work.	2	3	4	5	Can PPE be used? If so it should be used as a last option							
D Minor injury or illness e.g. an injury or illness that requires on-site first aid	3	4	5	6	Indicate the Risk Rating by matching the consequences row and the likelihood column.							