**AFEI Member Template: Risk Assessment Template**

**THIS DOCUMENT IS ONLY A GUIDE**

AFEI recommends members consider their specific requirements when adopting a template document or policy to ensure the document meets the particular needs of your organisation.

For assistance, please call the AFEI Hotline on 02 9264 2000.

**How to use this document:**

1: Check with the AFEI Hotline as to its suitability for your needs.

2: Edit to meet your requirements by:

* **Add** relevant information in the [yellow highlighted] sections.
* **Delete** comments in the *[blue highlighted]* areas.

***[Place on Organisation Letterhead]***

Risk Assessment Template

|  |  |
| --- | --- |
| **Hazard / Critical Task Being Assessed:** | [insert relevant details] |

# Risk Assessment

Indicate risks associated with each hazard, rated by High, Medium, Low risk (where high is death or serious injury, medium is serious injury or illness, and low is minor first aid injury risk).

|  |  |  |
| --- | --- | --- |
| **Hazard / Critical Task** | **Risks** | **Rating** |
| [insert relevant details] | [insert relevant details] |  |

# Risk Controls (Hierarchy of Control): For each, note a response:

|  |
| --- |
| *Eliminate / Substitute*: Can we remove the hazard? |
| [insert relevant details] |
| *Isolate* the Hazard from the person at risk: |
| [insert relevant details] |
| Minimise (remove / reduce) the risk through *Engineering* means: |
| [insert relevant details] |
| Implement change *Administrative* means: |
| [insert relevant details] |
| *Personal Protective Equipment*: |
| [insert relevant details] |

# Overview of Suggested Response/Risk Management:

|  |
| --- |
| **Responsibility for Action:** [insert title] |
| [insert details of response/action required] |

# Administration:

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessed By:** | [insert title] | **Date:**  | [insert date] |
| **Print Name:**  | [insert name] |

|  |  |  |  |
| --- | --- | --- | --- |
| **Manager Review:**  | [insert title] | **Date:**  | [insert date] |
| **Print Name:**  | [insert name] |

|  |  |
| --- | --- |
| **Comments/Actions:**  | [insert details] |
| **Action Due Date:**  | [insert date] |
| **Completed:** | [sign off with signature here when actions completed] |