**attachment 92 (part B)**

Hazard Identification, Risk Assessment and Corrective Action Form

**Hazard Identification, Risk Assessment and Corrective Action Form**

Item: ……………………………………………………………………………………………………………………………………………………….. Date: ………………………….

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Hazards If possible identify source(s) of each hazard (note there usually there is also more than one hazard for each source) | Risk level | Corrective action (risk control measures) required or needing improvement – provide detailsPlease also include how the effectiveness of these measures will be determined in consultation with relevant employees | Persons responsible | Status of actions and timeframe |
| High | Medium | Low |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| Hazards to consider | • Biological• Burns/Heat• Chemical affects• Crushing | • Cutting• Electrical• Entanglement• Ergonomic affects  | • Falling• Fatigue• Fire/Explosion• Fumes  | • Friction• Gasses• Light• Noise  | • Overcome by something • Overexertion• Psychological stress • Radiation  | • Shearing• Slipping and tripping• Stabbing• Struck by something | • Striking against something• Suffocation• Thermal stress • Vibration |