



Proudly supported by the Department of Environment, Port Phillip Bay Fund (Round 1)

Use this form when planning a community litter pick up – remember sites change during high flood events so complete this form as close as possible to your event.

Site Selection Safety Planning

Group:

Date:

Site Description:

Potential Hazards and Site Specific Hazards	Site Specific Description	Risk Rating (Low, Medium, High, Extreme)	Risk Control Measures
Check whether these hazards exist at this site or add further hazards below (select any other potential hazards HAZARD LISTING):	Does the hazard exist here (Yes/No)? If yes, provide details for this site.	Rate the risk based on the likelihood and consequences of the potential hazard	List the control measures required to eliminate or minimise the risk of injury arising from the identified hazard.
Parking and unloading at site, is there a potential traffic hazard?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Public or private land, are there likely to be hazards with access, stock, dogs or people?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Are path surfaces uneven, slippery or pose a trip hazard? Especially when wet?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is there long grass or thick scrub to	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	

walk through?			
Is there overhead or overhanging vegetation that poses a falling or whiplash hazard?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Does equipment need to be carried far from the car?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is there protection from the elements at the site?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Are there stormwater drains flowing upstream of the sampling site?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Are the banks eroded, overhanging or unstable?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Are the banks steep?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is there limited space at this site for a large group to pick up litter?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is the site isolated?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is the site in a high bushfire danger area?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Is there a high danger of drowning due to depth/speed of the creek?	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	

Additional risk identified:	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	
Additional risk identified:	<input type="checkbox"/> yes <input type="checkbox"/> no Details:	<input type="checkbox"/> low <input type="checkbox"/> medium <input type="checkbox"/> high <input type="checkbox"/> extreme	

PHOTOGRAPHS OF SITE TO ILLUSTRATE SAFETY HAZARDS

HAZARD LISTING

Animals/Insects/Vegetation	<input type="checkbox"/>	Powered equipment, tools and appliances	<input type="checkbox"/>	Awkward objects	<input type="checkbox"/>	Radiation	<input type="checkbox"/>
Animals/Insects (live or non-living)	<input type="checkbox"/>	Non powered equipment, tools and appliances	<input type="checkbox"/>	Ergonomic design	<input type="checkbox"/>	Ionising radiation source	<input type="checkbox"/>
Vegetation	<input type="checkbox"/>	Hot work equipment	<input type="checkbox"/>	Task design and methodology	<input type="checkbox"/>	Non-ionising radiation source	<input type="checkbox"/>
Assault/Violence	<input type="checkbox"/>	Noise	<input type="checkbox"/>	Mental/Physical/Social	<input type="checkbox"/>	Work Environment	<input type="checkbox"/>
Aggressive member of public, staff, stakeholder, customer, contractor etc.	<input type="checkbox"/>	Vibration	<input type="checkbox"/>	Fatigue	<input type="checkbox"/>	Lighting	<input type="checkbox"/>
Biological	<input type="checkbox"/>	Heat	<input type="checkbox"/>	Drugs/Alcohol	<input type="checkbox"/>	Workplace cleanliness	<input type="checkbox"/>
Algae/bacterial/viral agents	<input type="checkbox"/>	Ergonomic design/weight	<input type="checkbox"/>	Inappropriate member of staff	<input type="checkbox"/>	Slippery/uneven surface/terrain	<input type="checkbox"/>
Sharps/needle-sticks	<input type="checkbox"/>	Heights	<input type="checkbox"/>	Organisational factors (other)	<input type="checkbox"/>	Restricted access/egress	<input type="checkbox"/>
Sewage	<input type="checkbox"/>	Slippery or uneven surfaces	<input type="checkbox"/>	Mobile Plant	<input type="checkbox"/>	Bushfire/Fire	<input type="checkbox"/>
Chemicals/Substances	<input type="checkbox"/>	Elevated Work Platform	<input type="checkbox"/>	Moving vehicles/mobile plant	<input type="checkbox"/>	Flood	<input type="checkbox"/>
Incompatible storage	<input type="checkbox"/>	Ladders	<input type="checkbox"/>	Suspended loads	<input type="checkbox"/>	Extreme weather (hot, cold etc.)	<input type="checkbox"/>
Liquids	<input type="checkbox"/>	Platforms/Scaffolding	<input type="checkbox"/>	Person/plant interaction	<input type="checkbox"/>	Remote/isolated working	<input type="checkbox"/>
Solids	<input type="checkbox"/>	Open Pits	<input type="checkbox"/>	Noise	<input type="checkbox"/>	On/around/near/above water	<input type="checkbox"/>
Dusts	<input type="checkbox"/>	Dropped objects	<input type="checkbox"/>	Vibration	<input type="checkbox"/>	UV exposure	<input type="checkbox"/>
Gases/vapours/fumes/mists	<input type="checkbox"/>	Machinery/Fixed plant	<input type="checkbox"/>		<input type="checkbox"/>	Dangerous trees	<input type="checkbox"/>
Stored chemicals/substances under pressure	<input type="checkbox"/>	Moving plant/parts (pinch points)	<input type="checkbox"/>	Motor Vehicles/Bike	<input type="checkbox"/>	Concealed obstacles	<input type="checkbox"/>
Other	<input type="checkbox"/>	Sharp object/edges	<input type="checkbox"/>	Road traffic	<input type="checkbox"/>	Explosive/ignitable atmosphere	<input type="checkbox"/>
Electrical	<input type="checkbox"/>	Projectiles/ejected items	<input type="checkbox"/>	Pedestrians/cyclists	<input type="checkbox"/>	Other	<input type="checkbox"/>
High voltage electrical parts	<input type="checkbox"/>	Noise	<input type="checkbox"/>	Moving vehicle	<input type="checkbox"/>		<input type="checkbox"/>
Low voltage electrical parts	<input type="checkbox"/>	Vibration	<input type="checkbox"/>	Noise	<input type="checkbox"/>	ADDITIONAL CONSIDERATIONS	<input type="checkbox"/>
Water ingress	<input type="checkbox"/>	Hot or cold parts	<input type="checkbox"/>	Vibration	<input type="checkbox"/>	Emergency situations considered	<input type="checkbox"/>
Equipment, Tools and Appliances	<input type="checkbox"/>	Unsecured grates	<input type="checkbox"/>	Road surface	<input type="checkbox"/>	Considered available info, e.g. manufacturer's operating manual	<input type="checkbox"/>
Sharp objects/edges	<input type="checkbox"/>	Manual handling/ergonomics	<input type="checkbox"/>	Unsecured load	<input type="checkbox"/>	Any past injuries/incidents with task?	<input type="checkbox"/>
Powered equipment, tools and appliances	<input type="checkbox"/>	Heavy objects	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

Potential Consequence & Likelihood of the risks associated with the hazard

H&S Consequences			H&S Likelihood		
Rating	Description		Rating	Description	
A	Extreme	Single or multiple fatalities, or permanent disability	5	Almost Certain	Risk will occur in most circumstances; at least once every year.
B	Major	Extensive injury or physical illness requiring hospitalisation; mental illness requiring ongoing treatment ; lost time injury > 1 week	4	Likely	Risk is likely to occur in most circumstances; once every 1 - 5 years.
C	Moderate	Significant injury or physical illness requiring hospitalisation; mental illness requiring treatment; lost time injury < 1 week	3	Possible	Risk might occur at some time; once every 5 – 20 years.
D	Minor	Injury or physical illness requiring medical treatment; mental illness requiring treatment; not a lost time injury	2	Unlikely	Risk is unlikely to occur; once every 20 – 50 years.
E	Insignificant	Injury or physical illness resulting in local first aid treatment (i.e. minor bruises, cuts, abrasions); mental illness not requiring treatment	1	Rare	Risk may occur only in exceptional circumstances; Once in 50 years or greater.

Task Risk Assessment Matrix

Likelihood	Consequence				
	E	D	C	B	A
5	Medium	Medium	High	Extreme	Extreme
4	Medium	Medium	Medium	High	Extreme
3	Low	Medium	Medium	Medium	High
2	Low	Low	Medium	Medium	Medium
1	Low	Low	Low	Medium	Medium