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| Date: | | | | **A close-up of a logo**  **HAZARD ASSESSMENT**  Job: | | | | |
| Rev Date: | | | | Completed by (Name/Position): | | | | |
| **Task/Activity** | **Hazard**  What is the source of harm? (i.e., sharp blade of a knife) |  | | **Assess Risk** |  | **Controls**  Consider the Hierarchy of Controls Current and Recommended (formal and informal) | **Evaluate** Next steps? | |
| Likelihood | | Consequence | Rating |
|  |  |  | |  |  | Current Controls:  Recommended Controls: |  | |
|  |  |  | |  |  | Current Controls:  Recommended Controls: |  | |

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| **Assess Risk** | **Rating** | **Hierarchy Of Controls** |
| Likelihood: Is the hazard likely to cause injury Y/N  Consequence: Can the hazard cause serious injury or illness Y/N | High Risk = 2 Yes’s  Medium Risk = 1 Yes, 1 No Low Risk = 2 No’s | Elimination  Substitution  Engineering  Awareness  Administration  PPE |
| Hazard Categories: 1. Safety 2. Musculoskeletal Diseases 3. Biological 4. Chemical 5. Physical 6. Psychosocial | | |

**HAZARD ASSESSMENT**

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| **Task/Activity** | **Hazard**  What is the source of harm? (i.e., sharp blade of a knife) |  | **Assess Risk** |  | **Controls**  Consider the Hierarchy of Controls Current and Recommended (formal and informal) | **Evaluate** Next steps? |
| Likelihood | Consequence | Rating |
|  |  |  |  |  | Current Controls:  Recommended Controls: |  |
|  |  |  |  |  | Current Controls:  Recommended Controls: |  |
|  |  |  |  |  | Current Controls:  Recommended Controls: |  |

For any recommended controls identified, consider creating an action plan with listed actions to be taken, who will be responsible and target date.

Ensure hazard assessment is reviewed and updated as necessary (i.e., new processes, new hazards, risk changes, new controls implemented).