Bounce Fitness Risk Assessment Form

This form is to be used with reference to the *Bounce Fitness Workplace Health and Safety Policy and Procedures,* in particular the Hierarchy of Control Measures. All other requirements to complete this assessment are included in this form.

For support in conducting a risk assessment, contact a representative of the Bounce Fitness WHS Committee.

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| **1. Background Information** |
| **Date:** | Click or tap here to enter text. |
| **Name of Partner Gym**  | Click or tap here to enter text. |
| **Location:** | Click or tap here to enter text. |
| **Name of person conducting assessment:** | Click or tap here to enter text. |
| **Contact details of person conducting assessment:** | Click or tap here to enter text. |

| **2. Risk Assessment** |
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| **Identify Hazards** | **Description of the risk** | **Current risk controls** | **Consequence rating** | **Likelihood rating** | **Risk rating** | **Adequacy of existing control****(Yes or No)** | **List Additional Controls***(If current controls are not managing the ris*k, refer to the Hierarchy of Control Measures) | **To be actioned by whom and when** | **Date completed** |
| ***EXAMPLE*** | *Loose cabling behind treadmills* | *Trips, falls, electrocution, sprain, strain could occur because of lose cabling* | *Appears to be an attempt at covering of some loose cabling* | *2 - Minor* | *2 – Unlikely*  | *Low*  | *No, current controls are not adequate* | * *Remove treadmills if not in use (elimination)*
* *Secure cable to wall or floor edge (isolation)*
* *Use hazard tape (isolation)*
 | *Manager – prior to next WHS meeting*  | *DD/MM/YY* |
| **1** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **2** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **3** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **4** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **5** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| Consequence - Evaluate the consequences of a risk occurring according to the ratings in the top row

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| --- | --- | --- |
| **Descriptor** | **Level** | **Definition** |
| **Insignificant** | **1** | No injury |
| **Minor** | **2** | Injury/ ill health requiring first aid |
| **Moderate** | **3** | Injury/ill health requiring medical attention |
| **Major** | **4** | Injury/ill health requiring hospital admission |
| **Severe** | **5** | Fatality |

3. Risk Matrix – Using the matrix calculate the level/rating of risk by finding the intersection between the likelihood and the consequences

|  |  |
| --- | --- |
| **Likelihood** | **Consequence** |
| **Insignificant** | **Minor** | **Moderate** | **Major** | **Severe** |
| **Almost Certain** | Medium | High | Extreme | Extreme | Extreme |
| **Likely** | Medium | Medium | High | Extreme | Extreme |
| **Possible** | Low | Medium | Medium | High | Extreme |
| **Unlikely** | Low | Low | Medium | Medium | High |
| **Rare** | Low | Low | Low | Medium | Medium |

 | Likelihood - Evaluate the likelihood of an incident occurring according to the ratings in the left-hand column

|  |  |  |
| --- | --- | --- |
| **Descriptor** | **Level** | **Definition** |
| **Rare** | **1** | May occur somewhere, sometime (“once in a life time / once in a hundred years”) |
| **Unlikely** | **2** | May occur somewhere within the Department over an extended period of time |
| **Possible** | **3** | May occur several times across the Department or a region over a period of time |
| **Likely** | **4** | May be anticipated multiple times over a period of timeMay occur once every few repetitions of the activity or event |
| **Almost Certain** | **5** | Prone to occur regularlyIt is anticipated for each repetition of the activity of event |

4. Risk Level/Rating and Actions - Based on the level/rating of risk you identified in the Risk Matrix determine the appropriate action.

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| --- | --- |
| **Descriptor** | **Definition** |
| **Extreme:** | Notify **Workplace Manager and/or Management WHS/OHS Nominee** immediately. Corrective actions should be taken immediately. Cease associated activity. |
| **High:** | Notify **Workplace Manager and/or Management WHS/OHS Nominee** immediately. Corrective actions should be taken within 48 hours of notification. |
| **Medium:** | Notify **Nominated employee, HSR / HSC**. Nominated employee,WHS/OHS Representative / HSC is to follow up that corrective action is taken within 7 days. |
| **Low** | Notify **Nominated employee, HSR / HSC**. Nominated employee, HSR / HSC is to follow up that corrective action is taken within a reasonable time. |

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