

## DETAILED RISK ASSESSMENT

Ship name \_\_\_\_\_

Record Number \_\_\_\_\_

Current assessment date:

Last assessment date:

Work activity being assessed:

### Section 1

#### Hazard Analysis of the Intended Work Activity

| Hazard no. | Description of Identified Hazards | Existing Control Measures to Protect Personnel from Harm |
|------------|-----------------------------------|--|
| 1          |                                   | (a)<br>(b)<br>(c)  |
| 2          |                                   | (a)<br>(b)<br>(c)  |
| 3          |                                   | (a)<br>(b)<br>(c)  |
| 4          |                                   | (a)<br>(b)<br>(c)  |
| 5          |                                   | (a)<br>(b)<br>(c)  |
| 6          |                                   | (a)<br>(b)<br>(c)  |
| 7          |                                   | (a)<br>(b)<br>(c)  |
| 8          |                                   | (a)<br>(b)<br>(c)  |
| 9          |                                   | (a)<br>(b)<br>(c)  |
| 10         |                                   | (a)<br>(b)<br>(c)  |

### Section 2

#### Assessment of Risk Factor

| Likelihood of Harm | Severity of Harm |                |                | Hazard no. | Likelihood of Harm | Severity of Harm | Risk Factor |
|--------------------|------------------|----------------|----------------|------------|--------------------|------------------|-------------|
|                    | Slight Harm      | Moderate Harm  | Extreme Harm   |            |                    |                  |             |
| Very Unlikely      | VERY LOW RISK    | VERY LOW RISK  | HIGH RISK      | 1          |                    |                  |             |
|                    |                  |                |                | 2          |                    |                  |             |
| Unlikely           | VERY LOW RISK    | MEDIUM RISK    | VERY HIGH RISK | 3          |                    |                  |             |
|                    |                  |                |                | 4          |                    |                  |             |
| Likely             | LOW RISK         | HIGH RISK      | VERY HIGH RISK | 5          |                    |                  |             |
|                    |                  |                |                | 6          |                    |                  |             |
| Very Likely        | LOW RISK         | VERY HIGH RISK | VERY HIGH RISK | 7          |                    |                  |             |
|                    |                  |                |                | 8          |                    |                  |             |
|                    |                  |                |                | 9          |                    |                  |             |
|                    |                  |                |                | 10         |                    |                  |             |

To assess the risk factor arising from the hazard:

1. Select the expression for likelihood which most applies to the hazard;
2. Select the expression for severity of harm which most applies to the hazard;
3. Cross reference using the Risk Estimator table (above left) to determine the level of risk;
4. If the Risk Factor is MEDIUM or above (Yellow, Orange or Red) additional control measures should be implemented and recorded in Section 3.

### Section 3

#### Additional Control Measures to Reduce the Risk of Harm

| Hazard no. | Further Risk Control Measures | Remedial Action Date | Review Date |
|------------|-------------------------------|----------------------|-------------|
| 1          |                               |                      |             |
| 2          |                               |                      |             |
| 3          |                               |                      |             |
| 4          |                               |                      |             |
| 5          |                               |                      |             |
| 6          |                               |                      |             |
| 7          |                               |                      |             |
| 8          |                               |                      |             |
| 9          |                               |                      |             |
| 10         |                               |                      |             |

Additional comments:

Assessment review date \_\_\_\_\_

