



# **Safe Work Method Statement (SWMS)**

# Asbestos Risk Assessment Form

## Risk Assessment Form Guidance Sheet

### **Stage 1. Introduction.**

The Asbestos Risk Assessment Form (RAF) is a tool used when looking at jobs/tasks to identify hazards that may be present and establish control measures (preventative measures) to prevent harm to life, health, property, environment or business practices.

Those who may be involved in the Risk Assessment could include:

- Site Manager;
- Supervisor;
- Relevant workers;
- Contractors;
- Health and Safety Representatives.

Enter information for the persons completing the form. Add the scope, job description and indicate if any activity is being carried out by the workers that could cause workers to contact asbestos.

### **Stage 2. Hazard Identification.**

Sources used to identify hazards are:

- Consultation with workers;
- Shift records, incident and injury records;
- Legislative information, e.g. Regulations, Codes of Practice etc.;
- Relevant AS/NZS;
- Industry guides, educational materials and training courses;
- Industry professionals.

This risk assessment form assists those involved to identify hazards that may be relevant/applicable to the job/task undertaken. List any / all the relevant asbestos-related hazards listed in the hazard column. Each of the listed hazards must be risk-rated using the matrix (found on page 3 of this assessment form and listed in Column 3 (IR- Initial Risk). The purpose of this process is to determine the likelihood of occurrence and the seriousness of possible consequences. This will then assist in selecting suitable risk control measures.

### **Stage 3. Risk Control.**

The selection of suitable risk control measures is the critical step in completing a Risk Assessment. The information contained in the Hierarchy of risk control, relevant codes of practice and industry guidelines and regulations will assist in establishing the most suitable measures.

The selected risk control measures must be listed in Column 5. Once the measures are established, it is important that the risk is re-assessed and listed in column 6 (RR- Residual Risk). The person responsible for ensuring that the relevant step is implemented/monitored should be listed in column 7.

### **Stage 4. Monitor and review.**

Monitor and review this risk assessment as required and keep a record of all reviews.

### **Summary - Key Outcomes:**

1. Consult those involved in work tasks/jobs where hazards may exist;
2. Identify the hazards associated with the work task/job;
3. Establish the risk associated with those hazards;
4. Develop effective risk control strategies;
5. Establish that the risk has been eliminated/reduced; due to the selection of the risk control measures;
6. Train all persons involved in the work;
7. Ensure that any changes in the task/job or work practices are assessed and updated in the Risk Register;
8. Regularly monitor and review the effectiveness and currency of this Risk Assessment as required.



Activity:		<b>RISK ASSESSMENT NO.</b>	<b>RISK ASSESSMENT APPROVED BY:</b>	
Company Name:	Address:	ABN:	Name/Signature:	
Contact Name:	Position:	Phone No:	Job Title:	

**WORKPLACE DETAILS**

Location:	No. of workers at the workplace:	Remote Work: <input type="checkbox"/> Yes <input type="checkbox"/> No
Work is conducted:	Outdoors <input type="checkbox"/> Specify:	Specify:
	Indoors <input type="checkbox"/> Specify:	Isolated Work: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Off-site <input type="checkbox"/> Specify:	Specify:

NOTE: Relevant workers must be consulted in the development, approval and communication of this risk assessment:	Overall Risk Rating after Controls: <input type="checkbox"/> 4 Acute <input type="checkbox"/> 3 High <input type="checkbox"/> 2 Moderate <input type="checkbox"/> 1 Low
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Assessor Name / Signature:	Job Title:	Date:	
Names of workers consulted with during development of this Risk Assessment / Signature/s:	Job Title/s:	Date:	
Person Responsible for ensuring compliance with Risk Assessment / Signature:	Job Title:	Date:	

TASK	HAZARD/S	RISK	IR	CONTROL MEASURES TO REDUCE RISK	RR	RESPONSIBLE PERSON
<i>INHERENT RISK-RATING (IR) RESIDUAL RISK-RATING (RR)</i>						
Working with asbestos	Intake of asbestos into the body	<ol style="list-style-type: none"> <li>1. Almost certain likelihood of major harm if ingested or inhaled</li> <li>2. Serious injuries, medium business interruption, medium environmental impact</li> </ol>	3H	<ul style="list-style-type: none"> <li>• Competent person to identify if asbestos present</li> <li>• Obtain as much information as possible on the location, type and condition of asbestos</li> <li>• Obtain a copy of the Asbestos Register for the site</li> <li>• Take notes and photographs for future reference and / or inclusion in Asbestos Register.</li> </ul>	2M	Workers  Site Supervisor  PCBU
Unauthorised access	Asbestos exposure	<p>Almost certain likelihood of major harm if ingested or inhaled</p> <p>Serious injuries, medium business interruption, medium environmental impact</p>	4A	<ul style="list-style-type: none"> <li>• Cordon off the area with appropriate barriers and place warning signage.</li> <li>• Signs should state, "Do not enter – Asbestos" or similar</li> <li>• No-go zones for pedestrians or other unauthorised personnel</li> <li>• Type and quantity of signage and barricades to prevent entry at main points, e.g. tape or solid barriers</li> <li>• Distance from asbestos location based on asbestos type and risk from the method of removal or potential escape. This should remain until a clearance certificate is issued</li> </ul>	2M	Workers  Traffic Control  PCBU  Sites Supervisor
Transport ACM	Spills from transport, storage bringing about impacts on groundwater quality.	<p>Could occur at some time</p> <p>medium business interruption, medium environmental impact</p>	3H	<ul style="list-style-type: none"> <li>• All materials loaded onto vehicle must be positively identified.</li> <li>• Examine all prepackaged asbestos being loaded</li> <li>• ACM is double wrapped in thick plastic (&gt;200 microns thick) using duct tape to form sealed packages</li> <li>• Labelled with a warning statement to indicate the presence of asbestos and that dust creation and inhalation is avoided</li> </ul> <p>Alternatively:</p> <ul style="list-style-type: none"> <li>• ACM placed in plastic-lined bins supplied by a licensed waste transporter or, bins otherwise approved for the task</li> <li>• Ensure all plastic liners taped down over the contents of the bin</li> <li>• All packages appropriately labelled with a warning statement to indicate the presence of asbestos and that dust creation and inhalation needs to be avoided</li> </ul>	2M	Workers  Traffic Control  PCBU  Sites Supervisor

De-contamination	asbestos inhalation from the process	<p>Almost certain likelihood of major harm if inhaled</p> <p>Serious injuries, medium business interruption, medium environmental impact</p>	4A	<ul style="list-style-type: none"> <li>• Cleaning facilities adequate (running water, soap)</li> <li>• Restrict access to the area for the duration</li> <li>• Clean daily</li> <li>• Separate units by airlocks (double plastic or spring-loaded doors)</li> <li>• Provide filters for water run-off (5-micron capture capability)</li> <li>• Ensure sufficient units (6 workers per unit)</li> <li>• Develop procedures to separate males/females facility if required.</li>   <li>• Removal work area:</li> <li>• Remove all unnecessary items from area</li> <li>• If in the internal area, close doors, windows and other openings as required</li> <li>• Use plastic sheeting to cover surfaces that may become contaminated</li> <li>• Thick plastic sheeting (e.g. 200µm construction Visqueen)</li> <li>• Turn off fans, or control where possible excess air movement from air-conditioning or natural sources.</li> </ul>	2M	<p>Workers</p> <p>Principal Contractor</p> <p>Site Supervisor</p> <p>PCBU</p>
Wearing PPE during the task	Asbestos inhalation from the process	<p>Almost certain likelihood of major harm if inhaled</p> <p>Serious injuries, medium business interruption, medium environmental impact</p>	4A	<p>Based on conditions at the site and/or directions from Principal Asbestos removal contractor, wear appropriate PPE at loading site:</p> <ul style="list-style-type: none"> <li>• Hard Hat (if work is conducted overhead)</li> <li>• Hearing protection (If adjacent to noisy machinery /equipment)</li> <li>• Safety Glasses</li> <li>• One-piece Protective Suit</li> <li>• Protective gloves</li> <li>• Protective Footwear</li> <li>• Respirator - P1 or P2 half face (can be either disposable or cartridge)</li> </ul>	2M	<p>Workers</p> <p>Principal Contractor</p> <p>Site Supervisor</p> <p>Principal Asbestos Removal Contractor</p>

<b>MONITOR &amp; REVIEW</b>	Person/s Responsible:	Signature/s & Date:
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<p>To ensure control measures are implemented and monitored effectively          Relevant persons will be consulted on the contents of this Risk Assessment. Control measures will be monitored throughout work activities: Spot checks, Consultation or Scheduled audits.</p> <p>Corrective actions will be recorded and rectified promptly.</p> <p>This Risk Assessment will be reviewed and updated accordingly          (in consultation with relevant persons).</p>	<p>This Risk Assessment will be reviewed:</p> <ul style="list-style-type: none"> <li>If controls fail to reduce risk adequately</li> <li>When changes to the workplace or work activity occur that create new/different risks, or risk levels, where controls may no longer be effective</li> <li>New hazards or risks are identified</li> <li>After an incident involving violence relevant to this Risk Assessment</li> <li>During a consultation with relevant persons indicate if a review is needed</li> <li>A Health and Safety Representative (HSR) requests a review in line with the requirements of the legislation.</li> </ul>
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Review Record			
Review Date	Review conducted by	Signature/s	Next review due

This Risk Assessment has been developed in consultation and cooperation with workers and the Organisation. I have read the above Risk Assessment, and I understand its contents. I confirm that I have the skills and training, including relevant certification, to conduct the task as described. I agree to comply with safety requirements within this Risk Assessment, including risk control measures, safe work instructions and management direction.

NAME	JOB ROLE / POSITION	SIGNATURE	DATE	TIME	ORGANISATION / SUPERVISOR