**Tool 6: Risk and Hazard Management Checklists and Templates**

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# Risk Management Checklist

This tool can be used to review your risk management processes.

|  |  |  |
| --- | --- | --- |
| **Do we have:** | **Yes** | **No** |
| 1. A hazard identification process? |  |  |
| 2. A risk assessment process for significant hazards? |  |  |
| 3. A process to develop and implement the appropriate controls for each risk? |  |  |
| 4. A process to regularly monitor and review risk control plans? |  |  |
| 5. Risk registers that record how risks are managed? |  |  |
| 6. Evidence of worker consultation or participation in risk management? |  |  |
| 7. A process for issuing, renewing and maintaining all safety equipment including personal protective equipment? |  |  |
| 8. A process for managing risks associated with new equipment or new work processes? |  |  |
| 9. A system for undertaking baseline monitoring of health and safety in identified areas (for example a music room) and notifying the results to workers and others? |  |  |
| 10. A process to report significant risks to our board of trustees/ PCBU? |  |  |
| 11. A process for inducting visitors and students (as significant Others) to our school which covers risks and emergency procedures? |  |  |
| 12. Provision of appropriate personal protection equipment for visitors to our school, if required? |  |  |
| 13. A budget put aside to put controls in place, such as for personal protective equipment? |  |  |

Approved by: Date:

Next review date:

Actions arising from Checklist:

1.

2.

3.

# Risk register template

The content below will not necessarily reflect your own risk setting. **It is an example only.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| RISK REGISTER: [name of organisation] | COMPLETED BY: [name] | DATE: […] |  |  |  |
| Risk/Hazard identification | **Risk Assessment**  | **Risk Control** | **Review** |
| Risk description | **Potential Harm** | **Consequence** | **Likelihood** | **Risk rating** | **Eliminate, isolate or minimise** | **Risk controls** | **Who is responsible + timeframe** | **Training or information required** | **Date reviewed** |
| Interaction with hostile whānau | Could lead tostress and/orphysical harm  | Icon  Description automatically generatedModerate | Rare | Low | Minimise  | Administrative controls could include: * Response procedure
* Staff training
 | All staff, ongoing | Training | xx/xx/22 |
| Use of poorly ventilated spaces | Exposure to airborne illnesses  | Minor to moderate – for majorityMajor to critical – for those at very high risk of severe illness | Likely Rare | Medium Medium - High | Minimise Minimise | Your ventilation risk controls could include:* regularly review the site ventilation plan
* ventilation is included as a specific item in health and safety briefings
* staff know the signs that indicate a space may not be well-ventilated
* each room identified as harder to ventilate has a specific plan to manage risk including:
* open doors and windows as much and for as long as practicable
* for rooms where windows don’t open - refresh the air in the room during hourly breaks
* where practicable minimise use of room for higher-risk activities (eg, physical activities, singing, kapa haka)
* use portable air cleaner (if assessment indicates it is appropriate to do so)
* where practicable, limit the number of people using the space (no over-crowding)
 |  |  |  |
| Use ofcleaningproducts | Skin burnsPoisoning | Major | Rare | Medium | Minimise | Control by isolation and/or PPEProcedure for use and storage eg. lock away when not in use; wear gloves, eye protection, masks; don’t use when children in vicinity; label products clearly | All staff, ongoing | Daily hazard check |  |

# Hazard Checklist

This checklist template for hazard checking can be modified to suit your site. The person completing the checks should initial the boxes.

|  |  |
| --- | --- |
| **DAILY HAZARD CHECKLIST** | Week Beginning: |
| **Items to Check** | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** | **Hazard noted – add to risk register****Action needed** | **Notes** |
| **Gates/Fences** | eg,JD |  |  |  |  |  |  |
| **Rubbish/bins** | JD |  |  |  |  |  |  |
| **Play areas (swings, bark, etc)** | JD |  |  |  |  |  |  |
| **Mobile equipment (toys, sports gear)** |  |  |  |  |  |  |  |
| **Poisonous plants, weeds** |  |  |  |  |  |  |  |
| **Sheds/Storage areas** |  |  |  |  |  |  |  |
| **Water hazards** |  |  |  |  |  |  |  |
| **Hazardous substances** |  |  |  |  |  |  |  |
| **Kitchen/Toilets** |  |  |  |  |  |  |  |
| **Inside play areas** |  |  |  |  |  |  |  |
| **Electrical hazards** |  |  |  |  |  |  |  |
| **Access to exits and fire****equipment** |  |  |  |  |  |  |  |
| **Broken equipment** |  |  |  |  |  |  |  |
| **Hazards from any****building or repair work** |  |  |  |  |  |  |  |
| **Windows/areas of****glass** |  |  |  |  |  |  |  |
| **Others... [insert rows]** |  |  |  |  |  |  |  |
| **Checked and signed by:** |  |
| **Date:** |  |