

| Job | Description: | Department: | Departm

RISK SCORING

		LIKELIHOOD						
		Highly Unlikely	Unlikely	Possible	Likely	Almost Certain		
L	Major	H 18	H 19	E 23	E 24	E 25		
CONSEQUENCE SEVERITY	Significant	M 13	H 16	H 17	E 21	E 22		
	Moderate	L 6	M 11	M 12	H 15	E 20		
	Minor	L 4	L 5	М 9	M 10	H 14		
	Insignificant	L1	L 2	L 3	M 7	M 8		

Likelihood	d Table
Level	Description
Highly Unlikely	May occur only in exceptional circumstances, chances less than 0.1% per year
Unlikely	May occur in the industry, local chances more than 0.1% but less than 1% per year
Possible	Has occurred in the industry, local chances more than 1% but less than 10% per year
Likely	Has occurred locally, chances more than 10% but less than 50% per year
Almost Certain	Known issue, is expected to occur more than 50% of the time

Consequence Table						
Level	Description					
Major	Fatality or multiple fatalities					
Significant	Debilitating, loss of quality of life					
Moderate	Restricted work or lost time					
Minor	Medical treatment					
Insignificant	Discomfort or first aid treatment					

JSA SIGN OFF

Where residual risk score cannot be reduced to low the escalations listed below must be enacted

Escalated by (Name):

Signature:

L (LOW RISK)	M (MEDIUM RISK)	H (HIGH RISK)	E (EXTREME RISK)		
Proceed with agreed controls in place	Escalation to Site Supervisor	Escalation to Area/Department Manager	Escalation to EMT Representative / STOP WORK (As per your company policies)		
	Site Supervisor:	Department Manager:	EMT Member Consulted:		
	Date:	Date:	Date:		



	JOB STEP	POTENTIAL RISK	INI	TIAL RI	SK	REQUIRED RISK CONTROLS	RES	DUAL I	RISK
Step No.	List job steps in the sequence they are carried out.	List the potential risks for the job step.	Likelihood	Severity	Risk Score	List the controls required to eliminate or minimise the risk.	Likelihood	Severity	Risk Score



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Step No.	List job steps in the sequence they are carried out.	List the potential risks for the job step.	Likelihood	Severity	Risk Score	List the controls required to eliminate or minimise the risk.	Likelihood	Severity	Risk Score



JSA SIGN OFF AND ACCEPTANCE

We confirm that we understand this JSA and recognise that its purpose is to control the risks that are present for this task.

Full Name	Role (if applicable)	Signature	Date