SESLHD PROCEDURE COVER SHEET

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KEY TERMS	Risk Management, risk, risk assessment, risk profile, risk register, hazards, risk rating,
SUMMARY	This Procedure has been developed to ensure that the requirements for risk management processes defined by the Work Health and Safety (WHS) legislation are adequately captured and is intended to work in conjunction with existing risk management system documentation such as the *NSW Health Enterprise Wide Risk Management Framework and Risk Matrix.*

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

Feedback about this document can be sent to SESLHD-Policy@health.nsw.gov.au

1. POLICY STATEMENT

The NSW Health Work Health and Safety (WHS): Better Practice Procedures requires that all NSW Health organisations adopt an effective risk management process as outlined in ISO 31000 Risk Management – Principle and Guidelines.

This procedure provides information on the principles and methodology for work health and safety (WHS) and wellbeing risk management and outlines the minimum requirements for the systematic, structured and timely approach to hazard identification, risk assessment, the implementation of control measures in-line with the hierarchy of control methodology and the requirements to monitor and review the effectiveness of corrective actions following the elimination or control of hazards.

The intent of this document is to maintain consistency and be in-line with the NSW Health Policy Directive PD2015_043 Risk Management - Enterprise-Wide Risk Management Policy and Framework - NSW Health and NSW Health Risk Matrix, while meeting the requirements stipulated by the WHS Act and Regulation, ISO 31000: Risk Management – Principles and Guidelines and the SafeWork Australia Code of Practice - How to Manage Work Health and Safety Risks.

The processes defined within this procedure will promote a consistent and systematic approach to risk management, with the view of ensuring compliance obligations requirements are met.

The processes defined in this procedure **must** be adhered to by SESLHD staff to enable and promote the consistent approach to risk management. Contracted service providers who provide services to SESLHD must also demonstrate conformance to the principles and intent defined within this procedure.

2. BACKGROUND

Risk management is a proactive process that helps organisations respond to change and facilitate continuous improvement. Risk management entails a systematic and planned approach to managing all reasonably foreseeable hazards and their associated risks.

The WHS Act and Regulations places obligations on SELSHD staff to identify any foreseeable hazards that may arise in the workplace and to ensure the management of health and safety risks. This is achieved by the elimination of health and safety risks, so far as is reasonably practicable, and if it is not reasonably practicable to do so, to minimise the risks using the Hierarchy of Control measures provided in the Regulation.

Specific concepts related to the WHS Act such as ‘reasonably practicable’ are also explained within this procedure to guide the end user in appropriately applying WHS risk management decision making.

3. DEFINITIONS

Definitions for this procedure are included in Section 6 of this document.

4. RESPONSIBILITIES

4.1 Workers:

Shall demonstrate their commitment to a robust and resilient safety culture by:

- reporting all identified hazards immediately using nominated processes, tools and forms
- taking reasonable care for their own safety
- taking reasonable care for the health and safety of others
- following any reasonable instructions or procedures to ensure that they work safely
- maintaining up-to-date knowledge and understanding of the current Health, Safety and Wellbeing policies and procedures, and complying with these policies and procedures
- identifying any improvement to these policies and procedures, and providing feedback to the Head of Health, Safety and Wellbeing
- completing any training or instruction provided, in association with these policies and procedures
- identifying any health, safety and wellbeing hazards at work, and reporting any related risks, incidents, injuries, concerns in the iMS+ reporting system, to their manager, and/or to a representative in the Health, Safety and Wellbeing team.

4.2 Managers and Supervisors:

Shall ensure that:

- hazards are reported using authorised processes as soon as practicable;
- all risks in their area of control are assessed for all identified hazards and then either eliminated or controlled using the hierarchy of control process;
- escalating all key risks including those of a Medium or High level for which current controls are not effective or are at a level of Medium risk or above and considered As Low as Reasonably Practical (ALARP); and
- completing risk assessments with worker representatives, safety personnel and relevant management.
- Attend any training to develop an appropriate level of competence in risk assessment and risk management
- Consistently identify hazards and assess risks, in consultation with workers, including when planning or undertaking development/refurbishment of the workplace, when procuring goods and services and when staff are delivering services in the workplace and the community
- Implement controls to eliminate or minimise identified risks, and monitor the effectiveness of risk controls
- apply delegations for approving WHS related purchases to ensure that WHS matters are promptly addressed

- build WHS risk assessments into the delivery of treatment plans e.g. violence, manual handling considerations
- seek advice from risk managers and health safety and wellbeing partners, or other relevant staff concerning exposures or requirements for health surveillance.
- providing training to all staff in relevant Safe Work Procedures (SWP's) and risk assessment
- communicating with all workers on work related hazards, associated risks and the control plans
- monitoring, evaluating and reporting on the effectiveness of risk management plans and risk management performance
- where the required risk control is not within their delegation, recording the health, safety or wellbeing risk in the Enterprise Risk Management System (ERMS) and escalating the risk to senior Management for action and resolution
- identifying any health, safety and wellbeing hazards at work, and reporting any related risks, incidents, injuries, concerns in the iMS+ reporting system, to their manager, and/or to a Health, Safety and Wellbeing partner.
- reporting Notifiable Incidents within 24 hours and in accordance with SESLHDPR/727 - Safety Incident Report Management Procedure and SafeWork Australia Incident Notification obligations.

4.3 District / Services Managers:

Shall demonstrate due diligence obligations and duty of care by:

- ensuring that the risk management activities undertaken by their managers comply with the requirements and intent of this and relevant risk management system requirements
- overseeing the establishment and maintenance of risk registers within their control
- ensuring that personnel involved in risk management processes are appropriately trained
- maintaining up-to-date knowledge and understanding of the current Health, Safety and Wellbeing policies and procedures, and complying with these policies and procedures
- implementing Health, Safety and Wellbeing policies and procedures, and monitoring compliance with these policies and procedures
- monitoring and evaluating Health, Safety and Wellbeing performance and effectiveness
- actioning and resolving Health, Safety and Wellbeing risks and issues in a timely and informed manner
- identifying any health, safety and wellbeing hazards at work, and reporting any related risks, incidents, injuries, concerns in the iMS+ reporting system, to their manager, and/or to a representative in the Health, Safety and Wellbeing team
- reporting on the Department / Services / Directorate Health, Safety and Wellbeing risk management performance, initiatives and improvement areas, to the Chief Executive, Executive Committee and the Board as required.

4.4 Officers

As an Officer of SESLHD you must ensure that:

- SESLHD has in place, and utilises, an appropriate process for identifying, eliminating or minimising risk and monitoring the effectiveness of these processes
- Monitor compliance with WHS processes and procedures
- Direct and allocate appropriate resources to ensure that risk is identified, eliminated or minimised and monitored
- Managers / Supervisors have the skills to identify hazards and assess, manage and monitor risks
- Assessing WHS implications forms part of, and is documented for, procurement processes
- Managers and Supervisors have gone through an approval process that considers WHS impacts of variations to new buildings and refurbishments
- Appropriate decision making arrangements are in place to allow managers to implement controls or escalate decisions / approvals where necessary controls fall outside the scope of their decision making.

Note 1: An Officer of SESLHD is *a person who makes decisions, or participates in making decisions that affect the whole, or a substantial part, of a business or undertaking and has the capacity to significantly affect the financial standing of the business or undertaking. If a person is responsible only for implementing those decisions, they are not considered an officer.*

Refer to SafeWork NSW WHS PCBUs, Workers and Officers: Fact Sheet for more information on responsible persons and their definitions.

5. PROCEDURE

Managing WHS risks is an ongoing process that is triggered by occurrences or when any changes impact on work activities. Therefore, as a minimum, the risk management approach should be used when:

- designing a new or modified process or activity, plant, equipment, tooling, facility
- procuring and starting a new business, initiative, strategy or project
- new information relating to workplace risks becomes available
- when legislation changes
- responding to an occurrence or event demonstrating that a control is not working as planned
- responding to concerns raised by workers, health and safety representatives or others at the workplace, and amending work practices, procedures or the work environment
- prior to purchasing, or introducing or changing the design, layout or use of:
    - plant, equipment, tools or material
    - the workplace
    - a work activity or the service provided
    - substances, their handling, transport, storage or disposal
- when supervising work activities
- when new or additional information becomes available – industry hazard alerts, manufacturer alerts or recall notices, general hazard notifications, trends in reporting of incidents and injuries, near misses, hazards etc.

5.1 Overview

The following steps provide a methodology for identifying, assessing, and treating risks. The methodology is based on the ISO 31000 Risk Management Standard and consistent with the NSW Health Enterprise-Wide Risk Management Policy and Framework and SafeWork NSW Code of Practice - How to Manage Work Health and Safety Risks.

Step 1 – Communication and consultation

Step 2 – Establish the context and define scope

Step 3 – Conduct risk assessment

3a. Identify risks

3b. Analyse risks

3c. Evaluate risks

Step 4 – Treat risks

Step 5 – Monitor and review risks

Step 6 – Recording and reporting on risks

To ensure SESLHD is compliant with legislative requirements, there are also a number of specific WHS risk management processes associated with identified critical risk and hazardous tasks such as:

- Chemicals and Dangerous Goods
- Construction work
- Electricity
- Environment – periodical and pre-occupancy inspections
- Equipment
- Work at Height and Falls
- Manual Handling
- Noise
- Confined Spaces

Please note that in some cases additional assessments may be required to ensure all risks are mitigated so far as reasonably practicable.

5.2 Step 1. Communication and Consultation

Under Section 49 WHS Act 2011 - a person conducting a business or undertaking (PCBU) must consult with workers when:

- Identifying hazards and assessing risks arising from the work carried out or to be carried out
- Making decisions about ways to eliminate or minimise those risks
- Making decisions about the adequacy of facilities for the welfare of workers
- Proposing changes that may affect the health or safety of workers
- Making decisions about procedures for consulting with workers; resolving health and safety issues; monitoring health of workers; monitoring the conditions at the workplace and providing information and training for workers

Consultation with workers, end users and/or their health and safety representatives is required at each step of the risk management process, so far as is reasonably practicable. This is particularly important as consultation draws on the worker's experience, knowledge and ideas, which promotes the identification of hazards and choosing effective control measures.
Workers must be consulted about matters affecting their health and safety when:

- *risks to health and safety arising from work are assessed or when the assessment of those risks are reviewed;*
- *decisions are made about the measures to be taken to eliminate or control those risks;*
- *decisions are made about the adequacy of facilities for the welfare of workers; or*
- *changes that may affect health, safety or welfare are proposed to the premises where persons work, to the systems or methods of work or to the plant or substances used for work.*

For more information on consultation refer to the following documents:

- SESLHDPR/731 – Health and Safety Consultation
- SafeWork NSW Code of Practice - Work health and safety consultation, cooperation and coordination

5.3 Step 2 – Establish Context and Define Scope

The aim of this step is to understand the basic parameters in which risk is to be managed, and set the scope of the risk assessment. Steps to take:

- Describe what the organisation is trying to achieve (the objectives) and set the scope.
- Describe what is going on around the organisation – the internal and external environment
- Understand what the objectives of the directorate, department, facility, activity, project, initiative etc. involved are, in order to provide focus for the risk assessment.

Define the objectives and scope of the risk assessment process by considering the following questions:

- What outcome or objective is being sought?
- What is the subject being assessed?
- Are there any related processes that need to be considered? (e.g., projects, activities)
- How can scope be quantified? (e.g., financials, number of people, number of beds, number of records)

- To what extent does the activity/initiative/project etc., involve human interaction?

Break down the scope into a set of logical elements (for safety, those elements may include a list of hazards, concerns or threats)
Breaking down the scope into manageable elements will help support the risk identification process so that it is structured, rigorous and comprehensive. Examples of elements include project streams, phases, work processes, hazards, physical location etc.
For risk assessment focused on health and safety, the structure could be built around a series of hazards including behaviours, work groups and capacity of people (Human Factors). To support a structured approach to the identification of Human Factors risks please contact the Human Factors Consultant within Health Safety and Wellbeing, People and Culture Directorate.

5.4 Step 3 – Conduct Risk Assessment

3a. Identify Hazards and the Risk

What is a Hazard?
A hazard is anything in the workplace that has the potential to harm people.

Hazards can include objects in the workplace, such as machinery or dangerous chemicals. Other hazards relate to the way work is done. For instance, hazards on a production line could include manual handling, excessive noise and fatigue cause by the pace of work.

How are Hazards related to risks?
A risk arises when it's possible that a hazard will actually cause harm. The level of risk will depend on factors such as how often the job is done, the number of workers involved, (exposure) the controls that are in place and how effective they are, and how serious any injuries that result could be.

It is important to describe risks as *"Something occurring leading to ……. (consequence)".*

Examples of hazards and risks

Hazard	Risk (something occurring leading to a consequence)
Hot surface	A person touches the hot surface in the kitchen resulting in a burn to their hand
Manual handling	Repetitive movement during lifting and moving of patients resulting in body stressing injury to worker
Difference of height	A person falls from the loading dock during loading of catering resulting in serious head and back injuries
Flammable liquid	Release of dangerous chemical during engineering work resulting in a fire, injury to the engineering worker and the machinery
Alcohol	Alcohol consumption prior to work reducing reaction time resulting in a motor vehicle accident on route to a workplace and injures the vehicle occupants and the vehicle
Employee manner and behaviour	Unprofessional behaviour in the workplace between colleagues resulting in stress, discomfort and absenteeism

Different cultures	Failure to understand differences in culture resulting in misunderstanding and offence to the stakeholders

Examples of common hazards:

- keyboard work for long periods without a break
- activities that involve lifting, holding or carrying and moving of people, materials or equipment
- trip hazards like wet floors, frayed carpet, electrical cords or boxes in walkways
- using a hazardous substance in a laboratory process or for cleaning
- solar heat and UV radiation or sources of ionising radiation
- working with infectious patients or micro-organisms that may cause infection
- dealing with potentially violent patients or other people
- working with sharp instruments, e.g. needles and blades
- working with or close to machinery with moving parts
- noise generated during loud events or by machinery
- driving long distances as part of the work task.

Hazard	Example	Potential harm
Manual tasks	Tasks involving sustained or awkward postures, high or sudden force, repetitive movements or vibration	Musculoskeletal disorders such as damage to joints, ligaments and muscles
Gravity	Falling objects, falls, slips and trips of people	Fractures, bruises, lacerations, dislocations, concussion, permanent injuries or death
Psychosocial	Excessive time pressure, bullying, violence and work-related fatigue	Psychological or physical injury or illness
Electricity	Exposure to live electrical wires	Shock, burns, damage to organs and nerves leading to permanent injuries or death
Machinery and equipment	Being hit by moving vehicles, or being caught in moving parts of machinery	Fractures, bruises, lacerations, dislocations, permanent injuries or death
Hazardous chemicals	Acids, hydrocarbons, heavy metals, asbestos and silica	Respiratory illnesses, cancers or dermatitis
Extreme temperatures	Heat and cold	Heat can cause burns and heat stroke or injuries due to fatigue Cold can cause hypothermia or frost bite
Noise	Exposure to loud noise	Permanent hearing damage
Radiation	Ultra violet, welding arc flashes, micro waves and lasers	Burns, cancer or blindness
Biological	Micro-organisms	Hepatitis, legionnaires' disease, Q fever, HIV/AIDS or allergies

The identification of hazards and the risk should involve the stakeholders identified in preparation stages Step 1 – Communication and Consultation.

Consideration should include:

- Does the work environment enable workers to carry out work without risks to health and safety (for example, space for unobstructed movement, adequate ventilation, and lighting)?
- How is work performed, including the physical, mental and emotional demands of the tasks and activities?

- How suitable are the tools and equipment for the task and how well are they maintained?
- How do workers, managers, supervisors and others interact and how are inappropriate behaviours or conflicts dealt with?
- Have any changes occurred in the workplace which may affect health and safety?
- What would happen if? Is it possible that? Could somebody ever?
- What would it lead to?
- What could cause it to happen?

Consider Human Factors such as:

- Who are the people who interact in the system and processes and what are the tasks they perform?
- What are the opportunities for human failure for each task identified? Consider reasonably foreseeable errors or non-conformance with standard operating procedures.
- What are the risks associated with human failure in abnormal and infrequent modes?
- Consider any specific risks due to the potential for fatigue?
- What are the possible consequences of human failure?

Where there is a potential for multiple Human Factors risks, or significant potential consequences it may be necessary to involve a Human Factors Specialist to assist in appropriately identifying, tracking and managing the Human Factors risks. Please contact the Human Factors and Assurance Consultant within Health Safety and Wellbeing – People and Culture Directorate.

Document the risks, potential causes and consequences in the Safety Risk Assessment Template.
Describe each risk as “Something occurring (an event) leading to …….. (a consequence)

3b. Analyse the Risk

Once a risk has been identified, along with its potential causes and consequences, it is important to understand the risk before deciding on actions. The Safety Risk Assessment Template will guide a work group through the risk assessment process.

Selecting one risk at a time, complete the following for each risk:

1. What is occurring now (current controls) and how effective are they?
2. What is the Level of Risk?
3. What will be the consequences if the current controls fail?

Consider each potential cause or hazard that could result in the risk eventuating and consider what procedures, processes, devices or practices are in place to prevent the cause. Also consider controls that may reduce the severity of the consequences.

Where no control can be linked to an identified cause or consequence, this might indicate a potential control gap needing further investigation.

Once the controls are identified involve and communicate with workers / stakeholders to understand the effectiveness of the controls in place by reviewing the design and operation of the controls, using the following questions to help challenge the controls, to test if they are reducing the risk to As Low as Reasonably Practicable (ALARP).

Testing control design	Are controls meeting applicable laws, regulations and mandatory standards?
	Are controls comparable with accepted industry practice?
	Has the environment changed and if so are controls still fit for purpose?
Testing control operation	Do monitoring activities indicate controls are working?
	Are there any outstanding action items from audits, investigations, reviews or risk assessment?
	In recent incidents did controls work as intended?

Negative responses to the above questions indicate weaknesses / gaps in the controls which will assist to identify options to treat risk.

Critical controls can be defined as controls that, if removed or deteriorated, would result in a significant change to the risk.

Based on the results, rate the effectiveness of the controls using the following, and included in the Safety Risk Assessment Template

Effective	Satisfactory	Needs Attention	Ineffective
Controls are well designed and are operating effectively and Management monitoring and review of controls is established	Controls are reasonably well designed and most aspects are operating effectively with some areas for improvement	Certain controls are not well designed and/or are systematically not operating effectively	Significant gaps in the design and operation of controls. No confidence that any degree of control is being achieved

3c. Evaluate the Risk

There are two aspects to be considered when prioritising and rating risks:

- consequence – outcome of an event affecting objectives
- likelihood – the chance of something happening

To determine the level of risk utilise the PD2015_043 Risk Management – Enterprise-Wide Risk Management Policy and Framework – NSW Health and NSW Health Risk Matrix to assess the risk and assign a risk rating for each risk.

Considerations when using the NSW Risk Matrix:

1. Where there are multiple consequence types and each with a varying severity level, select the consequence type that has the highest severity level. This will provide the most conservative evaluation of the risk level.

2. Where a risk sits on the border of two severity levels, select the higher severity level to allow for a more conservative evaluation of the risk.
3. When selecting the estimated likelihood of the expected consequence of the risk, apply the likelihood definition (Probability) that best fits the information available and/or risk context.
4. When evaluating likelihood consider the total population / number of times to which the organisation is exposed to the threat or cause, and chance / probability / frequency that the same failure will occur that could result in the expected consequence.
5. Discuss the risk and assume the current controls fail, agree on the plausible highest level of loss or gain arising from the risk.
6. In the context of a risk to health and safety, using the consequence type of Work Health and Safety, where the risk has the potential to result in a fatality, the plausible highest level of gain, injury or loss associated with the risk should be recorded as Major (where a single fatality is plausible) or Catastrophic (where multiple fatalities are plausible)

5.5 Step 4 - Treat the Risks

In the WHS Act the term *"reasonably practicable"* is used in relation to the duty to ensure the health and safety of workers and others. *Reasonably practicable* means that which can reasonably be done, taking into account and weighing up all risk factors.

Risk controls are ranked from the highest level of protection and reliability to the lowest as shown in the table below. This ranking is known as the Hierarchy of Control. The most effective control is elimination of the hazard. If this is not reasonably practicable to do so then action is required to ensure the risk is minimised by controlling the hazard.

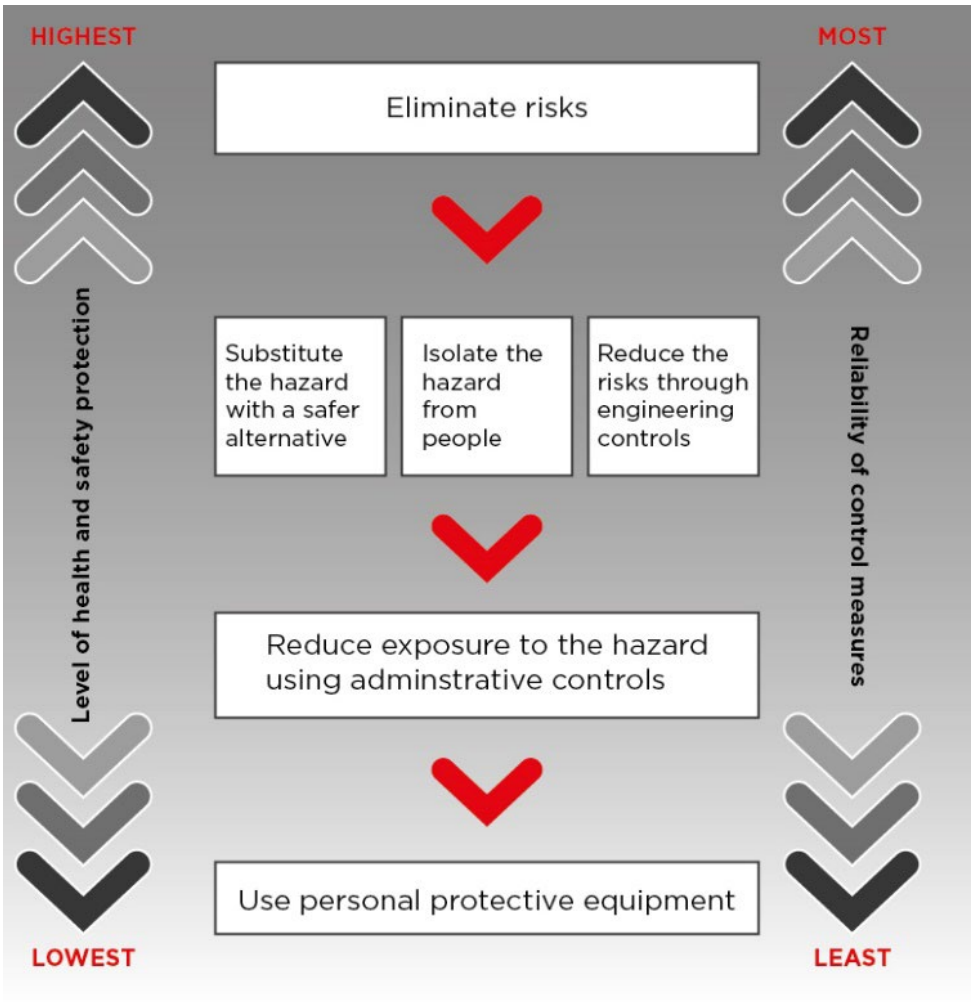

Table reference: SafeWork NSW "How to Manage Work Health and Safety Risks Code of Practice"

If elimination cannot be achieved, then use the Hierarchy of Control to work through other alternatives to manage WHS risks.

Based on the information gathered in the risk assessment, the following risk control decisions need to be made:

- what can be done to eliminate the hazard or minimise the risk of harm
- what level of residual risk will remain after controls have been implemented
- could the new controls create additional risk/s
- should an injury/illness result from incidents caused by the residual risk, then a plan needs to be in place, including first aid treatment and emergency actions, for example: chemical spills

If there are any legislative prescribed measures that need to be applied, they must be incorporated in the risk management process. Likewise, the SafeWork NSW Codes of

Practice controls must be applied in all cases where they apply. Most SESLHD WHS procedures on specific hazards list and reference the relevant Code of Practice controls.

- If the Code of Practice recommended controls are not in place, then implementation of at least the mandatory controls is required
- If the required controls in the Code of Practice are in place and a risk is still present, then continue with a risk assessment

The results of the risk assessment and the control measures must be communicated to all relevant workers affected by the risk.

The cost of controlling a risk may be taken into account in determining what is reasonably practical, but cannot be used as a reason for not controlling a risk.
Refer: SafeWork NSW Code of Practice - How to Manage Work Health and Safety Risks.

If two control measures provide the same level of protection and are equally reliable, adopting the least expensive option is acceptable.

Controls should not rely exclusively on changing workers' behaviour or actions when more effective controls are available through substitution, engineering or isolation.

5.5.1 Implementation of the risk control measures

Management, in consultation with workers, must ensure that risk control measures and treatments are implemented in a timely manner.

The ideal risk control plan would have the following elements:

- Risk treatments including resources, persons responsible and implementation schedule
- Trial of controls such as documented Safe Work Procedure (SWP), competency based training, instruction and information, supervision
- measurable outcomes (such as all staff are trained in the process, or adhere to the SWP)

In some instances a trial is not possible such as a new building or installing a large specialised piece of equipment. In all other cases a trial is recommended to help identify and correct any additional risk prior to full implementation of controls.

Where the preferred controls cannot be implemented within a suitable timeframe (considering the level of risk) interim measures must be put in place to control the risk until such time as the preferred risk controls can be implemented.

Management in consultation with workers must ensure that action plans are developed and documented and coordinate the implementation of the risk control measures. For further information see Section 4 of Safety Risk Assessment Template.

If the hazard cannot be eliminated or controlled effectively at a local level it must be escalated in a timely manner to the appropriate senior manager for actioning and entering into ERMS as required.
The person who has the delegation for the risk control is the 'owner' of that risk and has the full duty of care to ensure the risk is effectively controlled.

Where a decision is made to treat a risk, a risk treatment plan must be developed and documented in the Safety Risk Assessment Template. The plan should:

- Allocate actions to people noting who is responsible for implementation and the due date
- Have agreed deadlines for completion based on the guidance in the NSW Health Risk Matrix
- Allocate the necessary resources
- Document what has been agreed.

5.6 Step 5 – Monitor and Review Risks

The action plan should be monitored throughout the risk management process, combined with communication and consultation, to ensure action is taken within the specified time frames.

A review of Safe Work Procedures (SWP) and Risk Assessment (RA) is required on a regular basis. In SESLHD the minimum review time frame is every three years.

The risk assessment should clearly define the requirements of the control plan in the Safety Risk Assessment Template to confirm that the controls are achieving the desired health and safety outcome.

The evaluation needs to be documented and consider the effectiveness rating and residual risk. The outcome must be communicated to the workers and will also assist the workers in identifying if the agreed controls are achieving the desired result or if anything else needs to be changed.

The control measures that are put in place should be reviewed regularly to make sure they work as planned, rather than waiting until something goes wrong.

There are certain situations under the WHS Regulations when a review of control measures is required:

- when the control measure is not effective in controlling the risk
- before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control
- if a new hazard or risk is identified
- if the results of consultation indicate that a review is necessary
- if a health and safety representative requests a review.

Use the same methods as in the initial hazard identification step to check controls. Consult with workers and their health and safety representatives and consider the following questions:

Reviewing risk and control - generally	Updating the risks
• Are controls effective in both design and operation? • Are any risk treatment plans overdue or at-risk? • Have there been any changes in the external and internal environment, including changes to the risk itself which can require revision of risk treatment plans and priorities? • Are there any new or emerging risks? • Have there been any changes in human performance? • Can any lessons learned by drawn from events? (including near-misses, changes, trends, successes, failures) • Changes in legislation / standards / Code of Practice etc. •	• What key changes have affected the activity / processes / project / department / workplace? • Have risks changed or ceased to exist? • Are there any new or emerging risks? • Have human factors risks been introduced? • Have changes in the environment or risk treatment plans changed the consequences or likelihood assessments? • Have risks reached an acceptable level? • Are the risks discrete? (I.e. one off occurrence) or on-going? • Are the risks controllable or uncontrollable?
Reviewing risk treatment plans	**Analysing risk trends**
• Are existing controls in place and operating effectively? • Are risk treatments being implemented in a timely manner? Are they completed and effective? • Are there any outstanding actions, why? • Are the risk treatments still suitable/ relevant given the changes in the environment? • Are the risk treatments actually reducing the consequence or likelihood of the risk and moving the risk rating towards the residual risk position? • Are the risks over controlled?	• Is the risk rating improving or declining? Why? • Are similar risks being identified frequently? Review the key causes • Are they related? • Is there a trend that is not being mitigated? • Should the risks be consolidated and mitigated under the one plan? • Are similar low risks being identified frequently? Consider if there is a more significant underlying and/or systemic risk.

If issue are identified, go back through the risk assessment steps, review your information and make further decisions about risk control. The frequency of review should be based on the level of the risk. Control measures for high risks should be reviewed more frequently.

If products are designed, manufactured or supplied by SESLHD and used for work, quality assurance processes that check that the product effectively minimises health and safety risks must be undertaken. Obtain feedback from users to determine whether any improvements can be made to make it safer.

5.7 Step 6 – Recording and Reporting on Risks

The status of risks and the progress of risk treatment will need to be recorded and updated as required, in the risk register, (e.g. ERMS for enterprise wide risk, local risk

registers, incident reporting / audit systems, action tracking registers), and reviewed for the effectiveness of actions and treatment, in mitigating or controlling the risks.

Reporting on risks and risk management effectiveness, will need to be tabled at the relevant safety and risk governance committees for each facility / services, and escalated as required, to the executive management and board governance committees across SESLHD.

6. DEFINITIONS

Term	Definition
As Low as Reasonably Practicable (ALARP)	This term refers to reducing risk to a level that is ALARP. In practice, this means that the organisation has to show through reasoned and supported arguments that there are no other practicable options that could be reasonably adopted to reduce the risk further. Note 1: Where risk is concerned, there is no such thing as absolute safety. Risk Management is often based on the concept of ALARP. Note 2: There is wide acceptance that not all risk can be eliminated. There are practical limits to how far the organisations and community will go in paying to reduce adverse risks. Note 3: All efforts should be made to reduce risks to the lowest level possible until a point is reached at which the cost of introducing further safety measures significantly outweighs the safety benefit.
Cause	Means something that gives risk to or creates a risk
Consequence	Means outcome of an event affecting objectives. An event can lead to a range of consequences
Control	Means measure that is modifying risk. Examples include any process, policy, device, practice or other action
Control Effectiveness	Means a relative measure of the ability and reliability of a control to modify risk. Note: Control effectiveness is a function of control design and control performance.
Critical Control	Means a control that, if removed or deteriorated, would result in a significant change in the risk
Event	Means change of a particular set of circumstances. Note 1 An event can be one or more occurrences, and can have several causes Note 2 An event can consist of something not happening Note 3 An event can sometimes be referred to as an incident or accident Note 4 An event without consequence can also be referred to as a near miss, incident, near hit or close call.
Expected Consequence	Means the common consequence based on our knowledge and the effectiveness of the control. Note 1 Where an event has occurred a number of times, the expected level of consequence would be the most common outcome across the range of past occurrences Note 2 When assessing an occurrence, the consequence should consider what would be commonly expected to happen based on our knowledge of the controls, and not what actually eventuated
Exposure	Means extent to which an organisation and / or stakeholder is subject to an event
Frequency	Means number of events or outcomes per defined unit of time
Hazard	Means Source of potential harm Note 1 Hazard can be a risk source
Human Factors	Means the minimisation of human error and its consequences by optimising the relationships within systems between people, activities and equipment, through the systematic application of human sciences, integrated within the framework of engineering.
Level of Risk	Means magnitude of a risk or combination of risks, expressed in terms of the combination of consequences and their likelihood
Likelihood	Means chance of something happening Note 1 In risk management terminology, the word likelihood is used to refer to the change of something happening, whether defined, measured

Term	Definition
	or determined objectively or subjectively, qualitatively or quantitatively, and described using general terms or mathematically (such as a probability or a frequency over a given time period)
Officer	An officer is a person who makes decisions, or participates in making decisions that affect the whole, or a substantial part, of a business or undertaking and has the capacity to significantly affect the financial standing of the business or undertaking. If a person is responsible only for implementing those decisions, they are not considered an officer. Refer to this link for additional responsibilities and definitions: SafeWork NSW WHS PCBUs, Workers and Officers: Fact Sheet
Occurrence	An unplanned event that occurs in the workplace which causes, or has the potential to cause harm to people, property, the operations, or environment.
PCBU	Employers or businesses, or anyone who falls under the definition of a 'person conducting a business or undertaking' (a PCBU), has legal obligations under work health and safety laws. A 'person conducting a business or undertaking' is a broad term used throughout work health and safety legislation to describe all forms of modern working arrangements, which we commonly refer to as businesses.
Plausible	Credible, foreseeable
Potential Exposure	The plausible highest level of gain, injury or loss associated with the risk in the event all of the current controls fail
Probability	Measure of the change of something happening expressed as a number or a percentage
Risk	Effect of uncertainty on objectives. Note 1 An effect is a deviation from the expected – positive and/or negative Note 2 Objectives can have different aspects (such as financial, health and safety, environmental, security goals) and can apply at different levels (such as strategic, organisational wide, project, product or services, and process) Note 3 Risk is often characterised by reference to potential events and consequences or a combination of both.
Risk Analysis	Process to comprehend the nature of risk and to determine the level of risk
Risk Assessment	The process for identifying (risk identification), analysing (risk analysis) and treating (risk treatment) risk
Risk Attitude	The organisation's approach to assess and eventually pursue, retain, take or turn away from risk
Risk Description	Elements: sources, events, causes and consequences
Risk Identification	Process of finding, recognising and describing risks Note 1 Risk identification involves the identification of risk sources, events, their causes and their potential consequences
Risk Management	Coordinated activities to direct and control an organisation with regard to risk.
Risk Management Framework	Set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organisation. Note 1 The foundations include the policy, objectives, mandate and commitment to manage risk.

Term	Definition
	Note 2 The organisational arrangements include plans, relationships, accountabilities, resources, processes and activities.
Risk Matrix	Tool for ranking and displaying risks by defining ranges for consequence and likelihood
Risk Owner	Person with the accountability and authority to manage a risk
Risk Profile	Description of any set of risks
Risk Register	Record of information about identified risks Note 1 Risk Registers can be maintained in various forms, including databases, spreadsheets or other information management systems.
Risk Response	Means any mitigating action or controls taken to manage a risk, also referred to as risk treatment
Risk Source	Element which alone or in combination has the intrinsic potential to give risk to risk
Risk Treatment	Process for modifying risk
Stakeholder	A person or organisation that can affect, or be affected by, or perceive themselves to be affected by a decision or activity.

7. DOCUMENTATION

- NSW Health NSW Health Risk Matrix
- Safety Risk Assessment Template
- F118 WHS Hazard Register

8. AUDIT

This procedure will be audited through the NSW Health WHS Audit Program conducted by Health Safety and Wellbeing every two years

9. REFERENCES

- Work Health and Safety Act 2011
- Work Health and Safety Regulation 2017
- SafeWork NSW Code of Practice - How to Manage Work Health and Safety Risks
- SafeWork NSW WHS PCBUs, Workers and Officers: Fact Sheet
- NSW Health Policy Directive PD2015_043 - Risk Management - Enterprise-Wide Risk Management Policy and Framework - NSW Health
- NSW Health Policy Directive PD2018_013 - Work Health and Safety: Better Practice Procedures

10. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
January 2005	0	Former SESAHS Hazard Identification, Assessment and Control Procedures: SESAHS OHSMS-09 Hazard reporting OHSMS-10.
February – August 2006	Draft 1-2	Merging of Former SESAHS OHS & IAHS OHS policy documents by Manager Systems Integration-Area Policy in consultation with Manager Workforce Services

Date	Revision No.	Author and Approval
March 2007	1	Manager, Systems Integration in consultation with Southern Hospital Network OHS Practitioners. Approved by Executive Sponsor, Matthew Daly, DCO acting for DWD. Final approval by Area Executive Committee 13 March 2007 as an interim area policy until March 2008.
June 2009	2	Karen Sutton (Area WSIMS OHS Officer) Change from PD to Procedure in accordance with the SESIH policy framework. Amended by T Williams. Approved by Chief Executive in Area Executive Team meeting 9.6.2009
April 2010	3	Inclusion of new form - F240 - Detailed Plant and Equipment Risk Assessment Form - prepared by Dieter Schultejohann
April 2011	4	Peter Kuszelyk, OHS Officer, Health Safety and Wellbeing. Amended to reflect change to Local Health Network and Cluster
October 2012	5	Dieter Schultejohann, WHS Officer, Health Safety and Wellbeing. Amended to reflect change in legislation.
November 2012	5	Approved by Sharon Litchfield Director Workforce Services
November 2014	6	Ron Taylor WHS Consultant - Health Safety and Wellbeing. Minor changes: re-formatting, grammatical and clarifying statements to improve flow and understanding throughout the procedure, Generic Risk Assessment Form - F038
July 2015	7	Ron Taylor WHS Consultant - Health Safety and Wellbeing. Amended to align with the Ministry of Health WHS Audit Tool
August 2017	8	Desktop Revision and Links Update - John Parkinson, WHS Consultant
November 2017	8	Updates endorsed by Executive Sponsor
April 2018	9	Document title updated - Catherine Johnson, WHS Consultant
May 2019	10	Link updates, minor corrections - John Parkinson, WHS Consultant
July 2020	11	Minor changes to align with updated risk assessment template - John Parkinson, WHS Consultant
February 2022	12	Major review to align with ISO Risk Management Standard and ISO 45001 WHS Management System Standard, and NSW Health Enterprise Wide Risk Management Policy and Framework. Rosanna Martinelli, Head of Health, Safety and Wellbeing.
March 2022	12	Draft for Comment period. Approved by Executive Sponsor.
May 2022	12	Endorsed by Executive Council pending removal of section 4.5, as medical staff are covered under section 4.1 Workers.
June 2022	12.1	Processed and published by SESLHD Policy.