

## BSAFE Pre-Start Risk Assessment (PRA)

Account/Project	Location of Work	Company
Scope of Work	Work Order Number	Permit Number (if applicable)
Questions	Answer	Comments
All workers are competent to perform their assigned tasks, are fit for work and have been consulted in the safe work method, the hazards and controls and agree to the approach for works?	<input type="checkbox"/> YES <input type="checkbox"/> NO – <i>Do not proceed. All Workers Must be Competent and Consulted in the planning of works Prior to Commencement.</i>	
A site specific SWMS / JSA has been completed and available on site?	<input type="checkbox"/> YES - <i>A copy of the SWMS must be been made available to BGIS.</i> <input type="checkbox"/> NO - <i>You have indicated no SWMS are required for your work. Works may only proceed for low risk minor works. Please describe the works you are performing in the comments tab.</i>	
Confirm the following are in place for the SWMS / JSA  *The job steps have been detailed *Hazards and controls have been identified for each job step * All workers have been consulted, reviewed and signed off the SWMS *The SWMS are task and site specific (not generic) *The work practices detailed conform to all relevant standards, codes and legislation *Any environmental hazards have been identified and controlled (wind, rain, heat, etc.) *Controls for impacts to flora/fauna, heritage, air, water etc. are in place *Traffic Management controls are in place to protect those near work zone *All high risk works are detailed with controls in place *Permits to work will be completed for all relevant activities *Controls for all hazards will be monitored and reviewed during the works	<input type="checkbox"/> YES <input type="checkbox"/> NO – <i>SWMS must be amended prior to starting work.</i> <input type="checkbox"/> N/A – <i>If answered No to the above Question.</i>	
Are all hazardous manual tasks (lifting, pushing, pulling, repetitive movement, etc.) identified with controls in place?	<input type="checkbox"/> YES <input type="checkbox"/> NO - <i>All hazardous manual tasks must be reviewed and controlled prior to works commencing.</i> <input type="checkbox"/> N/A	
All tools, plant, PPE and equipment is maintained, tested and tagged and fit for purpose as required?	<input type="checkbox"/> YES <input type="checkbox"/> NO - <i>All tools, plant, PPE and equipment must be verified fit for use.</i> <input type="checkbox"/> N/A	

Are any hazardous chemicals intended to be used for the task?	<input type="checkbox"/> YES - <i>Correct storage, handling and waste disposal in place. Safety Data Sheet (SDS) is in place and less than 5yrs old and controls are included in SWMS. Correct PPE available.</i> <input type="checkbox"/> NO <input type="checkbox"/> N/A	
Are you performing work that is isolated from the assistance of other persons? (remove or isolated work)	<input type="checkbox"/> YES - <i>Confirm your attendance and location is known to the site representative, your employer and colleagues. Ensure Communication tools are available. Emergency Procedures in place and understood.</i> <input type="checkbox"/> NO <input type="checkbox"/> N/A	
Fatigue, noise or vibration from the works are controlled with regular breaks, PPE etc.?	<input type="checkbox"/> YES <input type="checkbox"/> N/A	
Are you performing any of the below high risk activities? If so a Permit or MCC is required. State which of the following in the comments section * Confined Space Entry * Work at Height (incl. EWP, scaffold, roof and ceiling access) * Hot Works * Access High Voltage (HV) Electrical System * Excavation or Trenching * Asbestos Disturbance or Removal * Work in Sub-Station * HV Room Access * Isolation of Services/Energy Sources (e.g. gas, electrical, water, fire system, EWIS etc.) * Demolition Work * Electrical Work (Low Voltage) * Core Holing or Penetrations * Lifting/Rigging Operations * Mobile Crane * Operating Powered Mobile Plant (e.g. forklift) * Tilt Panel or Pre-Cast Concrete Work * Diving Work or Work with Drowning Risk * Radiation Hazard (RADHAZ) Works *Artificial Extremes of Temperature	<input type="checkbox"/> YES - Notify BGIS. <input type="checkbox"/> NO - Proceed with works. <input type="checkbox"/> N/A	

Name	Signature	Date
<i>Each workgroup member must sign below to confirm participation and understanding</i>		