Risk Management Form

Task undertaken: Container Stack Heights **Date:** 29 June 2021

Location: Tyne CS - MT Movements -Gate B54 Port Botany NSW

JSEA conducted by:

Assessment undertaken: ☒ **-** Risk Assessment **or** ☐ **-** Safe Work Method Statement

POTENTIAL HAZARDS						PERMITS/ CHECKLISTS
Health and Safety				Environmental		
☐ Biological	☐ Hot Work	☐ Remote/isolated work	☐ UV exposure	☐ Air Emissions	☐ Hazardous Chemicals	☐ Confined Space
☐ Confined Space	☐ Ladders	☐ Repetitive actions	☐ Work at heights	☐ Asbestos	☐ Hazardous waste	☐ Hot Work
☐ Electrical hazards	☐ Manual Tasks	☐ Slippery surfaces	☐ Working with/near crane	☐ Breach of Licence	☐ Leachate	☐ Manual Tasks
☐ Ergonomics	☐ Noise	☐ Suspended loads	☐ Working with / near plant	☐ Dust	☐ Odour	☐ Permit to Work
☐ Excavation	☐ Non skilled worker	☐ Temperature extremes	☒ High Wind	☐ Explosion – dust/fines	☐ Radioactive waste	☐
☐ Fatigue	☐ Plant – moving parts	☒ Traffic Management	☒ Falling Containers	☐ Gas	☐ Release to storm water	☐
☐ Flammable materials	☐ Reduced visibility	☐ Trip Hazards	☐	☐ Groundwater Contamination	☐	☐

DUST MASK	HEARING PROTECTION	EYE PROTECTION	FOOT PROTECTION	HAND PROTECTION	Half-Face Respirator	VEST	HEAD PROTECTION	PROTECTIVE BODY CLOTHING	FACE PROTECTION	Other: (please specify)
☐	☐	☐	☒	☒	☐	☒	☐	☐	☐	☐

PLANT & EQUIPMENT USED DURING TASK	Current WI / MAN available	LIST OF CHEMICALS USED DURING TASK	Current SDS available
Empty Container Handler - Forklift	☐	N/A	☐
SOP 1, 4 and 5	☐		☐
	☐		☐
	☐		☐
	☐		☐

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RISK IDENTIFICATION					
Steps Task & Environment Assessed	**Safety / Environmental Risk and Hazards**	**Inherent Risk Level**	**Control Measure's implemented**	**Residual Risk Level**	**Person Responsible**
Empty container stacking heights.	**Hazard:** • Containers falling if they are not stacked correctly. • High Wind Events. **Existing Risk Control:** • Wind monitor has been Installed. • Siren installed for high wind events. • Annual calibration on the wind monitor tower. • Wind monitored in real time. • When stacking containers on hard stand surfaces, ensure they are stacked no higher than as follows: - ○ 40ft Containers – maximum of six - (7) containers high ○ 20ft Containers – maximum of six - (7) containers high ○ 40ft High Cube Containers – maximum of six - (6) containers high ○ 20ft High Cube Containers – maximum of six - (6) containers high	High	• The current container stacking plan shows a maximum of 7 high, with pyramid stacking (from 2 high) on northern and southern boundaries. Stacks on the western boundary to be stacked at maximum of 5 high. • The SOPs 1, 4 and 5 are in place. • Ensure all employees are trained on SOP 1 Container Loading and Unloading, SOP 4 Empty Container Handler Operations and SOP 5 Weather Monitoring and Container Park Securement. • Continue to monitor the weather conditions and lower the containers as required based on the severity of risk. • Any stack "leans" to be restacked immediately. • Lower stacks in high winds as per Wind SOP #5. Single stacks must always be made safe asap. • Complete and record Last shift checks before closing and leaving the site.	Medium	Depot Manager.

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RISK IDENTIFICATION					
Steps Task & Environment Assessed	**Safety / Environmental Risk and Hazards**	**Inherent Risk Level**	**Control Measure's implemented**	**Residual Risk Level**	**Person Responsible**
Environmental Amenity	Container stack height impacts the environmental amenity for nearby commercial sites users and residents.	High	Containers not to be stacked higher than the maximum container stack heights allowable.	Medium	Depot Manager
Environmental Amenity	Traffic issues caused by site operations impact the amenity to nearby commercial site users and motorists.	High	Ensure all loading and unloading activities are undertaken wholly within the site boundary. Ensure that all vehicles entering or exiting the site do so in a forward direction. Actively manage the truck rank by physically directing the traffic on site.	Medium	Depot Manager

Risk Assessment Model

Risk Level	Description of consequence or impact	Consequence	Likelihood/Probability		
			Unlikely (1)	Possible (2)	Almost Certain (3)
Low Level of harm	Incident that has the potential to cause persons to require first aid. Environmental discharge/release immediately contained, minor level clean-up with no short-term environmental harm.	Minor (1)	Low (1)	Low (2)	Medium (3)
Medium Level of harm	Actual/Potential temporary disability, MTI or LTI. Structural failure/damage, >1-day outage. On-site environmental discharge/release contained, minor remediation, short-term environmental harm.	Moderate (2)	Low (2)	Medium (4)	High (6)
High Level of harm	Actual/Potential fatality, disability or irreversible damage. Major structural failure/damage. Off-site environmental discharge/release not contained and significant long-term environmental harm.	Major (3)	Medium (3)	High (6)	High (9)
Level	**Likelihood/Probability**				
Almost Certain	Occurs frequently; >66% chance of occurring				
Possible	Could happen occasionally; >33% but <66% chance of occurring				
Unlikely	May occur only in exceptional circumstances; <33% chance of occurring				
Class/Ranking	**Description/Requirements**				
Low 1, 2	Will require localised control measures.				
Medium 3, 4	Will require operational planning. Actions will be recorded on SWMS.				
High 6, 9	Stop immediately. Implement permanent Preventive controls. Will require detailed pre-planning. Actions will be recorded on a SWMS.				

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TRAINING, QUALIFICATION & LICENCES REQUIRED TO COMPLETE WORK
National Licence to Perform High Risk Work Class: - LF - Forklift

ADDITIONAL COMMENTS & REQUIREMENTS
Induction to SOP#s 1, 4 and 5

IDENTIFICATION OF TASK RISK MANAGEMENT AND REVIEW		
☐	**Non -Routine Task** - this task is a one-off occurrence	
☒	**Routine Task** - this task is undertaken on regular basis	Task / Risk and hazards identified must be included in the Site Risk Register

REVIEW		
Date	**Reviewed by**	**Relevant changes & modifications made to SWMS OR Risk Assessment**

Risk Management Form

SIGN-OFF
Manager or Authorised Representative

Reviewed by Manager or Authorised Company Representative:

On review of the information supplied in this form the work is authorised to proceed

Name: _______Rohen Drury____ Signature:____ Date:________________________

Name: _______Aaron Powell ____ Signature:____ Date:________________________

SIGN-OFF
Worker

By Signing below you agree that you have READ and UNDERSTOOD this SWMS and the hazards and risks relevant to this task and AGREE TO COMPLY with all controls identified.

Full Name (Please PRINT name clearly)	**Signature**	**Date**