Field Level Risk Assessment (FLRA)

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| Date & Time | Task Location | Emergency Muster Area |
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| What hazards are present at the actual site at the actual time?  Have you reviewed the appropriate safe work practices or safe job procedures? | Are you properly trained to complete the task?  Is a Job Hazard Analysis required? | What do you need to ensure this task is completed incident free? |
| Identify conditions, job changes, or distractions that would cause you to you to use stop work authority. | Housekeeping is part of the task.  Have there been any incidents doing this before? | Are there any hazards remaining?  When conditions change, reassess & revise the FLRA |

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| Sequence | Tasks | Present & Potential Hazards | Control (to reduce or eliminate risks) | |  |  | | --- | --- | | Examine each task to identify hazards and risks that could lead to injury or damage. | | | **Chemical Hazard** | | | Inhalation | Skin Contact | | Absorption | Injection | | Ingestion Corrosive  Unknown substances | | | **Biological** | | | Bacteria Fungus | | | Mould Viruses | | | **Physical** | | | Electrical | Noise | | Fire or explosion | Cuts | | Tripping  Housekeeping | Struck by | | **Psychological** | | | Length of shift | Threat of violence | | Communication challenges | | |  |  | | **Ergonomic** | | | Repetition | Vibration | | Awkward posture Weight | | |  |  | |
| **1.** |  |  |  |
| **2.** |  |  |  |
| **3.** |  |  |  |
| **4.** |  |  |  |
| **5.** |  |  |  |
| **6.** |  |  |  |
| **7.** |  |  |  |
| **8.** |  |  |  |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **PPE Required** | □ Hearing protection | □ Wet-condition footwear | □ Face shield | □ Chemical goggles | | □ Cut-resistant gloves | □ Respiratory protection | □ Fall protection | □ Ice cleats | | □ Hard hat | □ Safety-toed footwear | □ Safety glasses | □ Leather gloves | | | | |

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| Assessed by: |  |  |
|  | Name and position Date | Name and position Date |
| Reviewed by: |  |  |
|  | Name and position Date | Name and position Date |