

# CLIENT SITE SAFETY ASSESSMENT (CSSA)



## On-Hire Employees INDUSTRIAL BLUE COLLAR WHITE COLLAR

DATE OF ASSESSMENT:      -- / -- / ----

**FULL site assessment (parts a, b & c if required) Must be completed at the start of supply to any client, and at intervals as directed by the SCO WHS Manager**  
**INTERIM site assessment document (part b & c if required only). Must be completed at intervals as directed by the SCO WHS Manager**

Client Business Name:	
Worksite Location:	Date:
Work Station Location(s):	
Client Contact	
Client Contact Title:	
SCO Supervisor:(person completing this assessment)	
The next assessment after this is due:	The next assessment is: Parts <b>A &amp; B</b> / Part <b>B</b> only Please circle one

**Part A – All sections of part A to be completed jointly by SCO representative & client contact, prior to completing part B.**

WH&S Policies, systems, & risk management	Acceptable / sighted	Comments: i.e. Not acceptable/no applicable / other
Do you have a health & safety (WH&S) policy & manual, and / or, knowledge or access to current WHS legislation? Are details of any policy displayed?		<i>Request a copy for SCO if available.</i>
Do you have safe working statements or similar and are they available to SCO?		<i>Obtain copies if available</i>
Do you undertake risk assessments & are they available?		<i>Obtain copies if available</i>
Do you have a WHS committee? Are minutes of any meeting posted?		
Do you have an accident report book & do you record near misses, & hazards.		
How are Hazards identified & controlled on site? <i>JSA's? SOP's Inspections by safety team? Please detail</i>		<i>Describe</i>
Are preventative actions undertaken? Can SCO have copies of reports where it may concern SCO employees?		
Are Health and Safety Representatives appointed? <i>Obtain names</i>		
Do you have emergency documented procedures in place?		<i>Describe</i>

(Ensure client receives a signed copy of WPA)




**Part B – Office/ Site walk around & inspection**

Item	Acceptable / sighted	Comment:
Washrooms & toilets provided, clean well stocked?		
Meal rooms provided? Clean & tidy? Drinking water provided?		
Adequate signage displayed showing: no smoking / flammable / emergency exit / areas where ppe must be worn?		
Are WHS & fire wardens officer's details displayed on noticeboard?		
Emergency evacuation detail displayed on noticeboard?		
Are walkways clearly marked & clear of any obstructions?		
Is the area around the workstation / machinery clear & free of any obstructions		
Are work areas well lit, well ventilated, and free from obstructions?		
Emergency exits clearly marked with no obstructions		
Fire extinguishers clearly seen and clear access		
Site emergency kits & eye wash station, (if applicable)		
Is there a first aid room and is it well stocked?		
Is drinking water available?		
Are any stairs / stairwells clear of any obstruction & well lit?		
Are electrical leads tagged and tested?		
Are there any trip/slip/ fall hazards? (Are carpet/ stairs etc in good repair?)		
Are workstations equipped with ergonomic features? (Eg. Adjustable chairs, angled foot stools etc)		
Other -		

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<b>Part B cont'd– Site walk around &amp; inspection - potential hazards</b>		
<b>Examples of other items that may be visible on walk around. This list should be added to if any other potential hazards are spotted.</b>	<b>Acceptable / sighted</b>	<b>Comment:</b>
Naked Flames		
Gas cylinders? / chained? / kept away from any heat?		
Glass hazards?		
Other hazardous substances?		
Waste disposal?		
Confined Space?		
Working alone?		
Floor cavities & pits		
Machinery guards, trip switches, & emergency stop buttons		
Lock out / Tag out process		
Electrical equipment & tools tagged & tested?		
PPE suited to the situation being worn?		
Warning alarms & lights on forklifts when reversing?		
Truck load unload areas clearly defined		
If workers are required to stand for long periods, are fatigue mats provided?		
In areas of high noise is ppe worn and is noise suppression in place?		
Are trolleys, rollers and other aids available, where items need to be moved		
Are any materials safely stacked in bins, in racks, or on pallets		
Any Flammable liquids sighted?		
SDS sheets, if applicable, sighted		
Could the worker be struck by moving equipment/vehicle?		
Be struck by falling objects? (Are pallets wrapped, stock stacked neatly?)		
Other -		

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**PART C: Risk Assessment & Control**

IF any hazards or safety issues have been listed when completing parts A and or part B of this CSSA, then the risk level must be assessed, and the attached 'HAZARD CONTROL RECORD' must be completed. The SCO WHS manager must be advised & consulted to determine risk level.

**Risk assessment matrix: (instructions)**

1. How likely is the hazard to occur in the circumstances that occur at present
2. What will be the consequences of that hazard occurring
3. Apply those results to the Risk Analysis Matrix to determine risk rating & level
4. Refer to the rating result to determine the risk rating

**Likelihood of occurrence**

- A. Almost certain - The event is expected to occur in the present circumstances
- B. Likely to occur - The event could happen frequently
- C. Possible - The event could happen occasionally
- D. Unlikely - The event could happen at some time
- E. Rare - The event could occur but probably never will

**Measure of consequence:**

1. Catastrophic - E.G. Fatality, loss of limb, loss of eyesight
2. Major - E.G. LTI,, hospitalisation, fracture
3. Moderate - E.G. MTI, strain or sprain, unable to return to work on day of injury
4. Minor - E.G. First aid treatment on site, return to work
5. Insignificant - E.G. No injury, minor disruption to work

**Risk Matrix:**

Likelihood	5 – Insignificant	4 – Minor	3 – Moderate	2 – Major	3 - Catastrophic
A – Almost certain	S	S	H	H	H
B - Likely	M	S	S	H	H
C - Moderate	L	M	S	H	H
D – Unlikely	L	L	M	S	H
E – Rare	L	L	M	S	S

**Rating:**

- H. High Risk - Urgent action required, Senior management involvement needed
- S. Significant Risk - Senior management involvement needed
- M. Moderate Risk - Management action to be specified
- L. Low Risk - Manage by routine procedures and monitor

**Result:**

Overall Rating (High, Medium, Low)		Next CSSA Due	
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Are initial Job Analysis (IJA's) & Key site requirements (KSR's) for client site relevant and current?

YES     NO (require updating)     Other (comment)

Updated by \_\_\_\_\_ on \_\_\_\_\_  
Name Date

Name of Employee Conducting CSSA: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Ensure client receives a signed copy of WPA)