

## Job Safety Analysis/Task Analysis

This form is designed to assist you in setting up safely for the work you are about to undertake and provides a list of hazards that may be present on your worksite.

You should always Eliminate (E) the risk of a hazard causing death, injury, or illness if you can. Where this is not possible, you must Minimise (M) the risk. There may be occasions where multiple controls are appropriate.

Enter your work method in the space provided below then use this checklist to identify any associated hazard/s. Brief everyone involved in the work being undertaken, ensure the appropriate controls are in place to control the risk/s, sign the form and submit as part of your job documentation.

Please contact Stratford District Council on 06 765 6099 if you require any assistance to identify hazards or implement the required controls.

**Company:** \_\_\_\_\_

**JSA/TA Completed By:** \_\_\_\_\_

**Contact Cell Ph:** \_\_\_\_\_

**Site Address/Ref:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Task Description:** \_\_\_\_\_

**Ref Document:** \_\_\_\_\_

### Job Start Checklist – to be completed prior to the commencement of any work

At Base	Yes	No	At Site	Yes	No
			1. Park in a safe place.	<input type="checkbox"/>	<input type="checkbox"/>
1. Vehicle has a current WOF/COF, lights and tyres in working condition.	<input type="checkbox"/>	<input type="checkbox"/>	2. Ensure you wear your PPE and it is in good condition and appropriate for the work to be undertaken i.e. overalls, boots, mask, gloves, eye, hearing and dust protection.	<input type="checkbox"/>	<input type="checkbox"/>
2. Minimum PPE available and in good condition.	<input type="checkbox"/>	<input type="checkbox"/>	3. Hazard Board set up in the vicinity of where work is being undertaken.	<input type="checkbox"/>	<input type="checkbox"/>
3. All emergency equipment and materials required for the work being undertaken loaded and secured.	<input type="checkbox"/>	<input type="checkbox"/>	4. Ensure you are inducted onto site - liaise with any Site Manager/Contractor/Client present to establish exactly what they are doing on site and any hazards associated with their work. Conduct your own induction if alone on site. Ensure the Hazard Board is updated and Emergency Plan is complete.	<input type="checkbox"/>	<input type="checkbox"/>
4. All work documents for job in vehicle.	<input type="checkbox"/>	<input type="checkbox"/>	5. Explain to Site Manager/Contractor/Client any hazards you are bringing to site or that may be present as a result of your work.	<input type="checkbox"/>	<input type="checkbox"/>

## Work Method Statement

Describe how you plan to carry out the work, using the example shown in the left hand column as a guide. Write your own method in the Work Method column on the right.

Work Method Example	Our Work Method
1. On Arrival complete job Start Checklist on Task Analysis	
2. Complete / Review Task Analysis questionnaire and brief all workers on hazards and required risk controls – sign off form.	
3. Warning and safety signage in place	
4. Check for overhead and underground services, adjacent structures, and other site hazards (dial before you dig)	
5. Set up site fencing/barriers around work area	
6. Unload equipment and all required materials	
7. Check all equipment is in good working order and safe for use	
8. Complete pre-start checks on any machinery to be used	
9. Set up an Operational Safety Zone including set down area for any removed material	
10. Install edge protection	
11. Remove existing roof	
12. Replace with new roof iron	
13. Disassemble edge protection	
14. Tidy up / depart site	

## Hazard Identification & Risk Management (E & M) – General Hazards

Answer the following questions relevant to the task you are doing (Tick “Yes” or “No”)	Yes	No	Hazard Identified	The following Risk Controls will be used for the identified hazards (tick the risk controls you will be using)
1. Will you use any subcontractors?	<input type="checkbox"/>	<input type="checkbox"/>	Visitors/Contractors	<input type="checkbox"/> All Contractors to be inducted to site (M); <input type="checkbox"/> Visitors to be escorted (M).
2. Is the job in a residential area or near a school?	<input type="checkbox"/>	<input type="checkbox"/>	Injury to public	<input type="checkbox"/> Site to be fenced off (M); <input type="checkbox"/> Hazard Boards and warning signage used (M); <input type="checkbox"/> All visitors to be inducted to site (M).
3. Will a toilet be available and is there running water on site?	<input type="checkbox"/>	<input type="checkbox"/>	Illness/Disease	<input type="checkbox"/> Toilets are available (M); <input type="checkbox"/> Running water is available on site (M); <input type="checkbox"/> Good hygiene practices to be maintained (M).
4. Will there be any vehicles coming on to site?	<input type="checkbox"/>	<input type="checkbox"/>	Moving vehicles	<input type="checkbox"/> Keep clear off all designated roadways (M); <input type="checkbox"/> Hi-vis clothing to be worn (M); <input type="checkbox"/> Speed limit to be enforced on site (M); <input type="checkbox"/> Traffic management plan in place (M); <input type="checkbox"/> Designated areas for vehicle parking and deliveries (M).
5. Are any electrical appliances to be used?	<input type="checkbox"/>	<input type="checkbox"/>	Electricity in use	<input type="checkbox"/> RCDs to be used (M); <input type="checkbox"/> Leads and appliances to be in good condition and checked before use (M); <input type="checkbox"/> RCDs, leads and appliances to be tagged and tested (M).
6. Are hand and power tools to be used?	<input type="checkbox"/>	<input type="checkbox"/>	Hand and Power tools	<input type="checkbox"/> All workers using tools to be competent or supervised by a competent person (M); <input type="checkbox"/> Tools to be checked in good condition before use, with guards in place and leads tagged (M); <input type="checkbox"/> Equipment to be serviced regularly (M); <input type="checkbox"/> Workers to keep clear of any moving parts (M); <input type="checkbox"/> Appropriate PPE to be used (M); <input type="checkbox"/> Tools to be used correctly (M).
7. Will there be any overhead work?	<input type="checkbox"/>	<input type="checkbox"/>	Overhead work	<input type="checkbox"/> Tools are to be secured from falling (E); <input type="checkbox"/> Visitors to be kept clear of any overhead work (M); <input type="checkbox"/> The area under the work area to be isolated from workers (M).

## Hazard Identification & Risk Management (E & M) – General Hazards

Answer the following questions relevant to the task you are doing (Tick "Yes" or "No")	Yes	No	Hazard Identified	The following Risk Controls will be used for the identified hazards. (tick the risk controls you will be using)
8. Will there be a risk of fall from height?	<input type="checkbox"/>	<input type="checkbox"/>	Fall from heights	<input type="checkbox"/> Work to be done at ground level (E); <input type="checkbox"/> Appropriate guarded work platform to be provided eg. Scaffold, EWP (M); <input type="checkbox"/> Fall restraint equipment to be used (M); <input type="checkbox"/> Ladders to be used as a last resort and for short periods only (M).
9. Will there be any work of ladders?	<input type="checkbox"/>	<input type="checkbox"/>	Ladders	<input type="checkbox"/> Don't use as a working platform (M); <input type="checkbox"/> Only commercial grade ladders in good condition (M); <input type="checkbox"/> Use correctly e.g. 1 in 4 method (M); <input type="checkbox"/> Use for access to the work area only (M); <input type="checkbox"/> Regular maintenance checks (M); <input type="checkbox"/> Ladders to be used as a last resort and for short periods only (M).
10. Will there be any work of scaffolding?	<input type="checkbox"/>	<input type="checkbox"/>	Scaffolding	<input type="checkbox"/> Scaffolding to be set up by trained and competent persons only (M); <input type="checkbox"/> Any scaffolding over <b>5m</b> to be installed by qualified person only and <b>Worksafe notified</b> (M); <input type="checkbox"/> Escort Visitors (M).
11. Will there be any work out of an EWP?	<input type="checkbox"/>	<input type="checkbox"/>	Fall from height	<input type="checkbox"/> Daily Maintenance checks to be done (M); <input type="checkbox"/> Safety observer to be used (M); <input type="checkbox"/> Competent/Trained staff only to operate EWP (M); <input type="checkbox"/> Exclusion zone set up (M).
12. Will work be affected by high winds?	<input type="checkbox"/>	<input type="checkbox"/>	Fall from height High winds Falling objects	<input type="checkbox"/> Postpone working at heights (E); <input type="checkbox"/> Secure tools, materials and equipment (M); <input type="checkbox"/> Use appropriate fall protection and PPE (M); <input type="checkbox"/> Use the correct footwear for the job (M).
13. Will materials be lifted by crane/forklift or similar?	<input type="checkbox"/>	<input type="checkbox"/>	Overhead loads	<input type="checkbox"/> Exclusion zone set up (M); <input type="checkbox"/> Safety observer to be used (M); <input type="checkbox"/> All non-essential workers and visitors to be kept clear while lifting occurs (M).

## Hazard Identification & Risk Management (E & M) – General Hazards

Answer the following questions relevant to the task you are doing (Tick “Yes” or “No”)	Yes	No	Hazard Identified	The following Risk Controls will be used for the identified hazards. (tick the risk controls you will be using)
14. Is any equipment used likely to create a noise hazard during operations?	<input type="checkbox"/>	<input type="checkbox"/>	Noise	<input type="checkbox"/> Noisy equipment to be substituted for less noisy equipment (E); <input type="checkbox"/> Non essential persons or visitors kept clear (E); <input type="checkbox"/> Hearing protection to be used at all times and noise levels monitored (M); <input type="checkbox"/> Equipment set up in enclosed spaces to be avoided (M).
15. Could works create dust?	<input type="checkbox"/>	<input type="checkbox"/>	Dust	<input type="checkbox"/> Frequent watering, oiling or chemical spraying of haul roads and working areas. (M); <input type="checkbox"/> Dust masks or breathing apparatus provided to workers (M).
16. Will there be any use of equipment near overhead power lines?	<input type="checkbox"/>	<input type="checkbox"/>	High Voltage	<input type="checkbox"/> Lines company to de-energise high voltage lines prior to commencing work (E); <input type="checkbox"/> Lines company to Isolate high voltage lines (M); <input type="checkbox"/> All equipment to be kept clear of high voltage lines unless authorised by lines company (M); <input type="checkbox"/> Spotter to be used while moving equipment (M); <input type="checkbox"/> Moved by competent operator only (M).
17. Will you require a delivery area?	<input type="checkbox"/>	<input type="checkbox"/>	Moving vehicles and machinery	<input type="checkbox"/> Access to areas around the delivery area to be restricted using barricades, safety mesh or danger tape (M); <input type="checkbox"/> Safety zone to be set up around delivery area (M); <input type="checkbox"/> Adequate lighting to be provided for work in low light or at night (M); <input type="checkbox"/> Appropriate warning signage to be put in place (M); <input type="checkbox"/> A clear area for delivery trucks is to be established (M);
18. Will you be working at night or in poor lighting?	<input type="checkbox"/>	<input type="checkbox"/>	Poor Lighting/Visibility	<input type="checkbox"/> Artificial lighting to be provided where there is insufficient natural light (M); <input type="checkbox"/> No lone work at night (M); <input type="checkbox"/> Clear communication procedures in place (M).
19. Could you come into contact with underground services/utilities?	<input type="checkbox"/>	<input type="checkbox"/>	Underground services	<input type="checkbox"/> Dial before you dig (M); <input type="checkbox"/> Contact local authority/suppliers for any drawings or information concerning underground services (M); <input type="checkbox"/> Isolate all services (M).

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Answer the following questions relevant to the task you are doing (Tick “Yes” or “No”)	Yes	No	Hazard Identified	The following Risk Controls will be used for the identified hazards. (tick the risk controls you will be using)
20. Will the Client/Children be present on site?	<input type="checkbox"/>	<input type="checkbox"/>	Injury to occupants	<input type="checkbox"/> Keep Children out of the area of work (E); <input type="checkbox"/> Induct Clients to site (M); <input type="checkbox"/> Escort Visitors (M).
21. Will work be carried out in areas of restricted access or cramped conditions eg. work under floor?	<input type="checkbox"/>	<input type="checkbox"/>	Manual handling	<input type="checkbox"/> Proper and secure access provided (M); <input type="checkbox"/> Appropriate PPE such as eye protection to be worn (M); <input type="checkbox"/> Work is to be conducted in the open where possible (M).
22. Will the work being undertaken involve repetitive lifting, bending, twisting or other types of manual handling?	<input type="checkbox"/>	<input type="checkbox"/>	Manual handling	<input type="checkbox"/> Use mechanical aids (E); <input type="checkbox"/> Manual handling training (M); <input type="checkbox"/> Use correct lifting techniques (M).
23. Will there be any other Contractors on site?	<input type="checkbox"/>	<input type="checkbox"/>	Visitors/Contractors	<input type="checkbox"/> Induct all Visitors/Contractors to site (M); <input type="checkbox"/> Non essential workers to be kept clear of work area (E); <input type="checkbox"/> Escort all Visitors (M).
24. Will any workers not be fully qualified?	<input type="checkbox"/>	<input type="checkbox"/>	Un-competent personnel	<input type="checkbox"/> No work to be carried out by untrained personnel (E); <input type="checkbox"/> All workers on site to be competent or supervised by a competent person (M).
25. Will there be any loud noises on site e.g. power tools, nail guns?	<input type="checkbox"/>	<input type="checkbox"/>	Noise	<input type="checkbox"/> Noisy equipment to be substituted for less noisy equipment (E); <input type="checkbox"/> Non essential persons or visitors kept clear (E); <input type="checkbox"/> Hearing protection to be used at all times and noise levels monitored (M); <input type="checkbox"/> Equipment set up in enclosed spaces to be avoided (M).
26. Will there be any hazardous substances on site? e.g. paint, fuel, gas etc.	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous substances	<input type="checkbox"/> Correct storage, handling and disposal techniques (M); <input type="checkbox"/> Certified handlers used (M); <input type="checkbox"/> Required PPE to be used (M); <input type="checkbox"/> Hazardous Substance Register and Safety Data Sheets (SDS) to be available on site (M).

**27. Will there be a need to have a traffic Management plan in place?**

Public safety

- Temporary or Full road closure required and approved by local authority (E)
- Consider the impact the restriction has on the businesses and residents, and make sure they are notified (M)
- Advertising a permanent or temporary road closure is also necessary (M)
- A detailed traffic management plan is required (M)
- Proposed speed restrictions ( M)

**28. Before you dig?**

Public safety

- Contact your local council to locate utilities such as water, storm water, and sewage (M)
- Get service reference maps or have your services located before you start working. (M)

## Hazard Identification & Risk Management (E & M) – General Hazards

Answer the following questions relevant to the task you are doing (Tick “Yes” or “No”)	Yes	No	Hazard Identified	The following Risk Controls will be used for the identified hazards. (tick the risk controls you will be using)
29. Will you be conducting work in a public area?	<input type="checkbox"/>	<input type="checkbox"/>	Public safety	<input type="checkbox"/> Get permission from the local authority (M); <input type="checkbox"/> Work area to be securely fenced and monitored (M).
30. Will the job last more than a day?	<input type="checkbox"/>	<input type="checkbox"/>	Public/Personnel injury	<input type="checkbox"/> Site to be adequately fenced and warning signs erected (M); <input type="checkbox"/> Site to be inspected daily before work commences or after adverse weather conditions (rain, high winds etc..) daily record of inspections to be kept (M).
31. Could a confined space occur during work?	<input type="checkbox"/>	<input type="checkbox"/>	Confined spaces	<input type="checkbox"/> Permit to enter system to be implemented (M); <input type="checkbox"/> Test excavation for safe oxygen levels before and during work (M); <input type="checkbox"/> Breathing apparatus available on site (M); <input type="checkbox"/> Stand by person available at all times (M); <input type="checkbox"/> Trained and competent workers only (M); <input type="checkbox"/> Appropriate PPE to be worn at all times (M).
32. Will you be using an on site traffic controller?	<input type="checkbox"/>	<input type="checkbox"/>	Moving vehicles and machinery	<input type="checkbox"/> Traffic controller and other workers to use high vis vests at all times (M); <input type="checkbox"/> All concrete trucks to have operational reversing beepers (M); <input type="checkbox"/> Traffic controller is to stay clear of hopper and reversing truck and remain visible to the driver at all times (M); <input type="checkbox"/> Delivery drivers are to remain clear of discharge area until signalled to reverse into position by Traffic Controller (M).
33. Could there be surface water present?	<input type="checkbox"/>	<input type="checkbox"/>	Surface water	<input type="checkbox"/> Surface water to be channelled away from excavation (M); <input type="checkbox"/> Local water sources isolated (M); <input type="checkbox"/> Sump pump available to remove ground water (M).
34. Could there be harmful gases present?	<input type="checkbox"/>	<input type="checkbox"/>	Harmful gasses	<input type="checkbox"/> Test in advance of work commencing (E); <input type="checkbox"/> Isolate services (Gas, Sewerage, etc.)(M); <input type="checkbox"/> Staff to be trained and competent around gasses and the risks and controls involved (M); <input type="checkbox"/> Forced ventilation to be used (M); <input type="checkbox"/> Appropriate PPE to be used (M).



## Notifiable works identification

If you answer yes to any of the following questions then your work must be notified in writing to Worksafe 24 hours prior to commencement of this work. If unsure please consult the Worksafe website. <http://www.worksafe.govt.nz/worksafe>

Answer the following questions relevant to the task you are doing	
○ Will have any excavation which is more than 1.5 m deep and which is deeper than it is wide at the top or with a face greater than 5m?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you have work where Work where workers could fall 5m or more?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Scaffolding greater than 5m?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you be working with asbestos?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you be working in a pit, shaft trench or other excavation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you be logging or tree felling?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you be working with explosives?	<input type="checkbox"/> Yes <input type="checkbox"/> No
○ Will you be lifting half a tonne (500 kg) or more (a vertical distance of five metres or more) carried out by mechanical means other than by a mobile crane, excavator or forklift?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered yes to any of the above notifiable works, it is also expected that you will provide a detailed Site Specific Safety Plan and or detailed plan to work to council and discuss with council representative prior to commencement of work.

Any additional hazards you identify for the work to be undertaken that are not listed, should be written in the "Additional Site Information" box.  
Please contact Stratford District Council on 06 765 6099 if you have an accident on the worksite.

**Additional Site Information / Hazards**

Please provide any additional information that is relevant to the safe completion of this job including control measures

**PPE Required**

**Signage  
Required**

**Safety Briefing Completed By:**

**Date:**

**Signed:**

