

Job Safety and Environmental Analysis



Important: Please download and open this form using Adobe Acrobat or PDF Reader to ensure this form can be submitted properly. Alternatively, please send completed form to the details below.

A Job Safety and Environment Assessment (JSEA) is a site-specific documented approach to tasks, which are required to be risk rated and managed. It should be prepared before any high-risk work commences at Te Pae Christchurch Convention Centre.

All individuals that are involved in the work need to sign on the last page of this JSEA to acknowledge they understand the hazards and the risks identified, and will adhere to the control measures implemented.

Please complete and submit this form along with the appropriate application or permit forms (if applicable) no later than 14 days prior the proposed work or hiring period of the event by using the "Submit" button at the end of this form. For assistance, please contact:

Health, Safety and Security Manager, Te Pae Christchurch

Phone: +64 3 266 1400

Email: healthandsafety@tepae.co.nz

Contractor Details

Name		Company Name	
Phone Number		Company Address	
Email Address		Postcode	
Name of Event*		Stand Name*	
Event Dates*		Stand Number*	
Form this assessment is associated with*			

* if applicable

Work Method Statement

Describe the work activity or task that will be conducted:

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Task Details

Task:		
Identified energy:		
PPE required: Tick the box, identifying the PPE used. <i>Specific PPE will be highlighted on the relevant permit</i>	☐ Ear protection ☐ Hand protection ☐ High-vis clothing/vest ☐ Safety glasses	☐ Foot protection ☐ Head protection ☐ Protective clothing

This JSEA has been prepared based on anticipated methods, hazards, risks, and controls. The information will be reviewed by the Te Pae Christchurch health and safety department. The approved JSEA will be made available on the day of work to enable any site-specific conditions or requirements to be reviewed, and signed off to indicate understanding and agreement by all workers.

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Please use the Risk Assessment Matrix below (page 4 and 5) to complete this document:

Steps	Work Activity Steps <i>Describe each step of the process</i>	Potential Risks <i>Describe the Key Risks for each step</i>	Severity	Likelihood	Risk Rating <i>Prior to Controls</i>	Risk Control Measures <i>Describe what will be done to control the risk, including Permits</i>	Risk Rating <i>After Controls are in Place</i>
1							
2							
3							
4							
5							

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6							
7							
8							

Permits required:	☐ Confined Space	☐ Electrical Work	☐ Hazardous Substances	☐ Hot Work
	☐ Lasers Application	☐ Penetration Application	☐ Pyrotechnics Application	☐ Working at Heights
Isolations required:	☐ Electrical	☐ Fire suppression	☐ Mechanical (<i>lockout/tagout</i>)	☐ Sprinklers

The potential outcome of an incident will be determined by combining the Severity Descriptors (table one) with the Likelihood Descriptors (table two) to reach the risk rating below. (ex. You determine the Severity descriptor to be “major” and the likelihood descriptor to be “Unlikely” which results in a “High” rating)

The risk ratings of ‘Low’, ‘Moderate’, ‘High’, or ‘Critical’ all need to have control measures displayed in “Risk Control” column.

A risk rating result should be displayed in the ‘Risk Rating’ column before and after control measures have been implemented.

Risk Rating
Low
Moderate
High
Critical

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Table 1: Severity Descriptions

Level	Severity Descriptor	Safety (injury or illness)	Asset Damage	Environment
5	Catastrophic	- One or more fatalities - WorkSafe notifiable incident	More than \$500,000 damage	- Severe permanent environmental loss requiring extensive rehabilitation - Severe damage to items of ecological or cultural significance
4	Major	- Lost time injury (> 1 week) - Hospitalisation/serious permanent disability	\$100,000 - \$500,000 damage	- Significant environmental damage requiring rehabilitation - Major damage to items of ecological or cultural significance
3	Moderate	- Medical treatment injury - Lost time injury (< 1 week)	\$50,000 - \$100,000 damage	- On/off site release cleaned up with specialist assistance - Limited environmental damage recoverable within one year
2	Minor	First aid injury	\$5,000 - \$50,000 damage	Limited environmental damage to low significance area without permanent damage
1	Insignificant	No treatment	Less than \$5,000 damage	Minor environmental damage controlled within the site

Table 2: Risk Matrix

					Severity				
Likelihood			Chance of Event	Indicative Frequency	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Catastrophic
	5	Almost Certain	The event is likely to occur in most circumstances	>95% chance of occurrence	Moderate	High	Critical	Critical	Critical
	4	Likely	The event will occur in most situations	65-94% chance of occurrence	Low	Moderate	High	Critical	Critical
	3	Possible	The event should occur at some time	35-64% chance of occurrence	Low	Moderate	High	Critical	Critical
	2	Unlikely	The event could occur at some time	20-34% chance of occurrence	Low	Low	Moderate	High	Critical
	1	Rare	The event may occur only in exceptional circumstances	< 10% chance of occurrence	Low	Low	Low	High	High

This Job Safety and Environmental Analysis has been developed to manage the risks associated with work/activity undertaken at Te Pae Christchurch Convention Centre. Working personnel will sign the document on the day of work to verify they have read and understand the hazards and risk controls within this JSEA.

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Te Pae Christchurch Convention Centre use only

This form will be reviewed by the Te Pae Christchurch Health and Safety department prior to final approval.

Te Pae Christchurch Health and Safety Verification:

Once this document has been reviewed and approved, Te Pae Christchurch's Health and Safety department are to sign off the document for uploading.

Name:		Signature:	
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Signing in Register:

All personnel are to sign the initial confirmation box on first day of works to verify they have read and understood the hazards and risk controls within this JSEA.

Any additional dates are to be signed prior to work on the next days to verify a new assessment has been completed and any changes added to update the document.

Initial confirmation		Date:		Date:		Date:	
Name	Signature		Signature		Signature		Signature