



# Hazard Identification and Management

The Health & Safety at Work Act 2015 (HSWA) states the importance of keeping workers safe, in part by managing risks so far as is reasonably practical. For ministry units that means volunteers, contractors and visitors as well as workers.

## IDENTIFYING AND MANAGING HAZARDS AND RISKS

The first step in managing risks is to identify potential and actual sources of harm. When hazards and risks have been identified, a plan can be made for mitigating those risks and controls can be put in place to prevent harm.

The Health & Safety at Work Act 2015 requires PCBU's (Person Conducting a Business or Undertaking) to be systematic in their approach to making workplaces safe and healthy. It is good practice to keep written records of incidents, accidents and near misses and how your ministry unit is managing its risks.

This can be done by keeping a simple register with the relevant information about the hazard and risk and what you have decided to do to mitigate the risk. Following four simple steps can help you to manage your risks.

### WHAT IS A HAZARD AND WHAT IS A RISK?

Often the terms hazard and risk are used interchangeably.

A **hazard** is something that could be dangerous to someone or their health and safety. The **risk** is the thing that could happen when someone is exposed to the hazard.

The risk level has two components: the likelihood of the harm occurring and the seriousness of the harm if it does.

# The 4-Step Process



## 1 Identify

**IDENTIFY** the hazards by walking around your site/s and filling in the hazard register. Include all the possible hazards you can see or think of. When walking around your buildings and site, consider whether there is anything that has the potential to cause harm.

Identifying hazards should be done by more than one person, as each additional pair of eyes brings a new perspective on identifying a hazard.

A separate form should be completed for each building and reviewed at least annually. The aim is to identify all hazards, and determine what risk each hazard poses.

**EXAMPLE:** Consider any electrical equipment or power tools. Is there anything about the equipment that you consider hazardous? Are the cords frayed? Do you have a residual current device with the tools for when they are used? Is appropriate personal protective equipment available for when equipment is being used (for example, earmuffs, gloves, eye protection)? Are power tools kept locked away so children cannot get to them?

## 2 Assess

**ASSESS** each hazard and work out how to manage it. Think about Who might be exposed to the hazard?

What type of injury or illness might occur?

What severity of harm might occur (short or long term)?

How likely are the consequences eg very likely, likely, unlikely?

What practical steps need to be taken to prevent the hazard from causing harm? Can the hazard be eliminated, minimised or isolated?

What practical steps need to be taken to prevent the hazard from causing harm?

**EXAMPLE:** a step is identified as a hazard. You cannot eliminate the step and it might not be practical to isolate it if it is part of a main entrance. The potential harm could be minimised by painting the edge of the step to make it more visible and a handrail could be installed beside the step for people to hold onto.

**ACTION:** take the assessment to your governing body, discuss it, agree and assign actions to manage the risk, and update the hazard register.

### 3 Act

**ACT** to eliminate the hazard so far as is reasonably practical. If a risk cannot be eliminated, it must be minimised or isolated. Once a hazard has been identified something **MUST** be done about it.

Take practical actions to eliminate, minimise or isolate each hazard, noting actions that have or will be taken in the hazard register. Make sure each action is assigned to a particular person with a due date for completion. Once the action is done be sure to update the register.

Where immediate action is needed but there are no associated costs, these should be actioned immediately.

**EXAMPLE:** Boxes have been left in front of a fire exit. The boxes are identified as a hazard that block an emergency exit. There is a risk that people will be unable to exit quickly and safely if an emergency arises.

**ACTION:** Immediately remove the boxes. Update the hazard register. Discuss the hazard and action taken with your governing body as there may be other actions that can be taken to manage the risk of people leaving boxes in front of the exit.

### 4 Review

**REVIEW** the effectiveness of your hazard management by keeping good records and by making sure they are up to date. This register should be reviewed each month by your governing body, and it should be updated regularly but at the very least once a year.

Review your records for effectiveness and for any negative trends. The goal is to work towards continual improvement.

Encourage everyone to report hazards if they see them so they can be recorded and action taken as soon as possible.

STEPS 1-3 SHOULD BE COMPLETED AS NEW HAZARDS ARE IDENTIFIED. ADD NEW HAZARDS WHEN THEY ARE IDENTIFIED. DON'T WAIT FOR A SCHEDULED ANNUAL CHECK TO UPDATE THE HAZARD REGISTER.

# Examples

HAZARD: Matches are used to light candles.

RISK: Children may get hold of the matches and start a fire or burn themselves.

ACTION: Eliminate the risk by keeping the matches locked away.

HAZARD: There are cleaning fluids and dishwashing tablets in the cupboard under the sink.

RISK 1: A child might swallow them, causing life-threatening symptoms of poisoning.

ACTION: Minimise the risk by locking the cupboard.

RISK 2: A cleaner might splash cleaning product onto their skin, causing burns.

ACTION: Minimise the risk by giving the cleaner gloves to wear and asking them to wear a long-sleeved top.

RISK 3: The cleaner might mix products together causing a chemical reaction which gives off dangerous gases.

ACTION: Minimise the risk by making sure the cleaner knows what products shouldn't be mixed together.

## IMPORTANT LINKS AND CONTACTS

### KEEPSAFE

Diocesan website:

[aucklandanglican.org.nz](http://aucklandanglican.org.nz) > Resources > Health and Safety

### WORKSAFE

[worksafe.govt.nz/managing-health-and-safety/managing-risks](http://worksafe.govt.nz/managing-health-and-safety/managing-risks)

HAZARD: An electrician changing lightbulbs leaves a placed stepladder unattended.

RISK 1: Another worker in that area borrows the ladder and leaves it without the spreader bars locked. The electrician returns, climbs the ladder, and it collapses under his weight.

ACTION 1: Eliminate the risk by collapsing the ladder and removing it to a proper storage area.

ACTION 2: Eliminate the risk by checking the ladder is properly erected and the spreader bars locked.

ACTION 3: Isolate the risk by putting cones and tape around the work area.

RISK 2: A child might climb the ladder and fall.

ACTION 1: Eliminate the risk by collapsing the ladder and removing it to a proper storage area.

ACTION 2: Isolate the risk by putting cones and tape around the work area.

HAZARD: Carpet is torn.

RISK: Someone might trip on the carpet and break their wrist while attempting to soften their landing.

ACTION 1: Eliminate the risk by repairing or replacing the carpet.

ACTION 2: Isolate the risk by marking off the area so no one can walk on it.

# Ministry Unit Hazard Identification Register

The Hazard Identification Register should be a standing item on your governing body's agenda so that it is reviewed and discussed at each governing body meeting.

A full review and update should be completed at least annually. Hazards should be added as they are identified.

Once each review has been completed, keep a copy for your records and forward a copy of the completed register to [keepsafe@aucklandanglican.org.nz](mailto:keepsafe@aucklandanglican.org.nz).

A separate register should be completed for each of the ministry unit buildings and spaces. Do not forget to look around the grounds and the local area (for example, car parks and pathways) when considering hazards.

Use the following pages to check for hazards that are specific to your ministry unit, and use the risk matrix at the end to work out the level of risk.

**IT IS THE MINISTRY UNIT'S LEGAL  
RESPONSIBILITY AS A PCBU TO DO THIS.**

Ministry unit name

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Ministry unit building

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Date of review

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Review completed by

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Role/s

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Signatures

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Date register presented to governing body

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Check off each item as it's completed. Use this checklist to ensure that your ministry unit hazards have been identified and are being managed appropriately. A health and safety check is to be done annually.

If the answer for any of these hazards is NO, that hazard must be added to your ministry unit's hazard register.

If there are other hazards identified that are not included your checklist, they also need to be added to the ministry unit's hazard register.

<b>1. H&amp;S PROCESSES</b>	
<p>A. The emergency plan is regularly reviewed (annually). <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Date of last review:</p> <p>Confirmed by:</p>	<p>B. The emergency plan has been published and is known and understood. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<b>2. FIRE</b>	
<p>A. Fire evacuation scheme/trial evacuation drills are held regularly ie every six months. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Date of last drill:</p> <p>Confirmed by:</p>	<p>B. Fire wardens have been appointed and trained. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. Fire equipment is checked regularly ie annually. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p><i>Fire alarm/warning system, smoke/heat alarm, fire extinguishers and hose reels, emergency lighting, lifts.</i></p> <p>Date of last check:</p> <p>Confirmed by:</p>	<p>D. Candles and other means of lighting are locked away when not in use. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

### 3. FIRST AID - CONTENTS

A. First aid box contents are checked regularly.  Yes  
 No  
 N/A

B. First aid box location is identified with signs.  Yes  
 No  
 N/A

Date of last check:

Confirmed by:

Confirmed by:

C. If a defibrillator is present:  Yes  
 No  
 N/A  
 - signage is visible  
 - the battery is regularly checked.

Date of last check:

Confirmed by:

Confirmed by:

### 4. INCIDENT MANAGEMENT

A. There is an accident register/book.  Yes  
 No  
 N/A

B. The accident register/book is available to all site users.  Yes  
 No  
 N/A

Confirmed by:

Confirmed by:

### 5. BUILDINGS GENERAL

A. The Building Warrant of Fitness is current.  Yes  
 No  
 N/A

B. The Building Warrant of Fitness is displayed in each building.  Yes  
 No  
 N/A

Confirmed by:

Confirmed by:

C. The earthquake risk poster is displayed at all prominent entrances (if applicable).  Yes  
 No  
 N/A

Confirmed by:

### 6. CHURCH - FLOORS AND ACCESS

A. Carpet joins are secure and carpets are not unravelling.  Yes  
 No  
 N/A

B. Mats are secured and do not have curls, ridges, or puckering.  Yes  
 No  
 N/A

Confirmed by:

Confirmed by:

<p>C. Aisles are adequately lit, are wide enough, and there are no obstacles in the aisle. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Floors are even and there are no holes. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. There are signs to warn of wet floor areas, particularly in toilets and kitchens. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>F. Disabled persons access ramp and toilet accesses are not obstructed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

**7. CHURCH – STEPS AND STAIRS**

<p>A. Stairs and/or landings are clear of obstacles. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Stairs and landings do not have worn or broken treads or edging. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. External stairs have non-slip paint or tape. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Handrails are securely in place and are in good repair. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

**8. CHURCH – ELECTRICAL AND GAS APPLIANCES**

<p>A. Electrical wiring is in good condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. There are child safety plugs so young children do not have access to electrical sockets. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. Leads and cords are not exposed, frayed or defective. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Electric and computer cords are not loose on the floor or hanging over furniture. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. When not in use electrical cords are properly stored. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>F. There are no broken plugs, sockets or switches. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>



<p>G. Electrical circuit switching boards are fully enclosed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>H. Electrical circuit switching boards are inspected annually by a registered electrician. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last check:</p> <p>Confirmed by:</p>
<p>I. Extension cords and power boards are not daisy-chained* <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><i>*where one extension cord is connected to another to lengthen it/one power board is plugged into another to increase the number of power outlets available.</i></p> <p>Confirmed by:</p>	<p>J. Electrical appliances are regularly tested-and-tagged (annually). <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last test-and-tag:</p> <p>Confirmed by:</p>
<b>9. CHURCH - LIGHTING</b>	
<p>A. Lighting is adequate. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	
<b>10. CHURCH - HEATING</b>	
<p>A. Heating is adequate ie within government guidelines. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Reticulation and heaters are checked annually by a certified gas fitter. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last inspection:</p> <p>Confirmed by:</p>
<p>C. Heater cords are not loosely arranged on the floor presenting a tripping hazard. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Heaters do not have loose grills where children could push fingers or objects. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

E. Heaters cannot be knocked over easily.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Confirmed by:		

### 11. CHURCH - STORAGE

A. Storage is adequate and/or convenient.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	B. Items in high storage are secured.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Confirmed by:		Confirmed by:	

C. Hazardous substances are held in secure storage.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	D. Safe handling procedures for hazardous substances are displayed.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Confirmed by:		Confirmed by:	

E. There is personal protective equipment available and its use is recommended (eg gloves, goggles).	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Confirmed by:		

### 12. KITCHEN – FOOD HYGIENE

A. Food hygiene posters are displayed.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	B. Fridges and food storage areas are regularly cleaned.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Confirmed by:		Confirmed by:	

C. Food storage areas are kept free of pests and vermin.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	D. Handwashing and hand drying facilities are available.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Confirmed by:		Confirmed by:	

### 13. KITCHEN – ELECTRICAL AND GAS APPLIANCES

A. Electrical wiring is in good condition.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	B. Leads and cords are not exposed, frayed or defective.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Confirmed by:		Confirmed by:	

<p>C. Electrical cords are properly stored when not in use. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. There are no broken plugs, sockets or switches. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. There are child safety plugs so young children do not have access to electrical sockets. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>F. Extension cords and power boards are not daisy-chained* <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><i>* where one extension cord is connected to another to lengthen it/one power board is plugged into another to increase the number of power outlets available</i></p> <p>Confirmed by:</p>
<p>G. Electric and computer cords are not loose on the floor or hanging over furniture. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>H. Electrical circuit switching boards are fully enclosed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>I. Electrical circuit switching boards are inspected annually by a registered electrician. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last inspection:</p> <p>Confirmed by:</p>	<p>J. Electrical appliances are regularly tested-and-tagged (annually). <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last test-and-tag:</p> <p>Confirmed by:</p>
<b>14. KITCHEN - HEATING</b>	
<p>A. Heating is adequate ie within government guidelines. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Reticulation and heaters are checked annually by certified gas fitter. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last inspection:</p> <p>Confirmed by:</p>
<p>C. Heater cords are not loosely arranged on the floor presenting a tripping hazard. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Heaters do not have loose grills where children could push fingers or objects. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

<p>E. Heaters cannot be knocked over easily. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>Confirmed by:</p>
<b>15. BATHROOMS</b>	
<p>A. Nappy changing stations and suitable disposal bins are provided. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Suitable handwashing facilities (soap and running water) are provided. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. Hygienic hand drying facilities are provided. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Hygienic feminine sanitary bins are provided. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<b>16. GROUNDS</b>	
<p>A. Doors, trap doors to areas under churches and halls are kept locked. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Graves and headstones are in good repair. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. Areas under buildings are not cluttered with rubbish and other flammable material including lawnmowers and associated petrol cans. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. There are no low hanging tree branches or branches/foliage across pedestrian areas. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. There are no broken steps or uneven or slippery paths. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>F. Signage is easily readable. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>G. The belltower is safe to be accessed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>H. There are traffic speed restriction signs or other suitable warning signs in carparks. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

## 17. WELLBEING

<p>A. Anti-bullying and harassment and Ministry Standards posters are on display. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. There are safety measures for working alone. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>C. Safety measures have been agreed and are known and followed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. New site users or visitors* receive an induction. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><i>* Including clergy, employees, contractors, parishioners, visitors, volunteers.</i></p> <p>Confirmed by: _____</p>
<p>E. New site users are told about known hazards during induction. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	

## 18. OFFICE - WELLBEING

<p>A. Workstations are set up ergonomically eg</p> <ul style="list-style-type: none"> <li>- adjustable chairs <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</li> <li>- keyboard height</li> <li>- screen height</li> <li>- viewing distance</li> <li>- footrests.</li> </ul> <p>Confirmed by: _____</p>	<p>B. Workplace environment is acceptable eg for <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <ul style="list-style-type: none"> <li>- lighting</li> <li>- ventilation (including around photocopiers)</li> <li>- heating</li> <li>- air dryness/humidity</li> <li>- noise eg photocopiers, music.</li> </ul> <p>Confirmed by: _____</p>
<p>C. Guillotines are stored in a secure area. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. Guillotines are not left with handles in the open position. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>

## 19. OFFICE – PRIVACY AND SECURITY

<p>A. The process of disposal of confidential and sensitive documents is known eg shredding, secure bin.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>B. Confidential documents are not left in public areas.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>
<p>C. Privacy is maintained eg of parishioner contact details.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>D. A Privacy Officer has been appointed.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>
<p>E. Computers are backed up regularly and are password protected.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>F. Operating systems and software are up to date.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>
<p>G. Virus protection software is used.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>H. Computer best practices are being followed eg strong passwords, screens locked when not in use.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>

## 20. OFFICE – FLOORS AND ACCESS

<p>A. Carpet joins are secure and carpets are not unravelling.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>B. Mats are secured and do not have curls, ridges, or puckering.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>
<p>C. Aisles are adequately lit, are wide enough, and there are no obstacles in the aisle.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>D. Floors are even and there are no holes.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>
<p>E. There are signs to warn of wet floor areas, particularly in toilets and kitchens.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>	<p>F. Disabled persons access ramp and toilet accesses are unobstructed.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A         </p> <p>Confirmed by:</p>

## 21. OFFICE – STEPS AND STAIRS

<p>A. Stairs and/or landings are clear of obstacles. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. Stairs and landings do not have worn or broken treads or edging. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>C. External stairs have non-slip paint or tape. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. Handrails are securely in place and are in good repair. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>

## 22. OFFICE – ELECTRICAL AND GAS APPLIANCES

<p>A. Electrical wiring is in good condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. There are child safety plugs so young children do not have access to electrical sockets. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>C. Leads and cords are not exposed, frayed or defective. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. Electric and computer cords are not loose on the floor or hanging over furniture. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>E. When not in use electrical cords are properly stored. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>F. There are no broken plugs, sockets or switches. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>G. Electrical circuit switching boards are fully enclosed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>H. Electrical circuit switching boards are inspected annually by a registered electrician. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last inspection: _____</p> <p>Confirmed by: _____</p>

<p>I. Extension cords and power boards are not daisy-chained* <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p><i>*where one extension cord is connected to another to lengthen it/one power board is plugged into another to increase the number of power outlets available).</i></p> <p>Confirmed by:</p>	<p>J. Electrical appliances are regularly (annually) tested-and-tagged. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Date of last test-and-tag:</p> <p>Confirmed by:</p>
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**23. OFFICE - LIGHTING**

<p>A. Lighting is adequate. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	
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**24. OFFICE - HEATING**

<p>A. Heating is adequate ie within government guidelines. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Reticulation and heaters are checked annually by a certified gas fitter. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Date of last inspection:</p> <p>Confirmed by:</p>
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<p>C. Heater cords are not loosely arranged on the floor presenting a tripping hazard. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Heaters do not have loose grills where children could push fingers or objects. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
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<p>E. Heaters cannot be knocked over easily. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	
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**25. OFFICE - STORAGE**

<p>A. Storage is adequate and/or convenient. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Items in high storage are secured. <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
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<p>C. Hazardous substances are held <input type="checkbox"/> Yes in secure storage. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Safe handling procedures for <input type="checkbox"/> Yes hazardous substances are <input type="checkbox"/> No displayed. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. There is personal protective <input type="checkbox"/> Yes equipment available and its <input type="checkbox"/> No use is recommended (e.g. <input type="checkbox"/> N/A gloves, goggles).</p> <p>Confirmed by:</p>	

### 26. HALL – FLOORS AND ACCESS

<p>A. Carpet joins are secure and <input type="checkbox"/> Yes carpets are not unravelling. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Mats are secured and do <input type="checkbox"/> Yes not have curls, ridges, or <input type="checkbox"/> No puckering. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. Aisles are adequately lit, are <input type="checkbox"/> Yes wide enough, and there are no <input type="checkbox"/> No obstacles in the aisle. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Floors are even and there are <input type="checkbox"/> Yes no holes. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>E. There are signs to warn of <input type="checkbox"/> Yes wet floor areas, particularly in <input type="checkbox"/> No toilets and kitchens. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>F. Disabled persons access <input type="checkbox"/> Yes ramp and toilet accesses are <input type="checkbox"/> No unobstructed. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

### 27. HALL – STEPS AND STAIRS

<p>A. Stairs and/or landings are clear <input type="checkbox"/> Yes of obstacles. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>B. Stairs and landings do not <input type="checkbox"/> Yes have worn or broken treads or <input type="checkbox"/> No edging. <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>
<p>C. External stairs have non-slip <input type="checkbox"/> Yes paint or tape. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>	<p>D. Handrails are securely in place <input type="checkbox"/> Yes and are in good repair. <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by:</p>

## 28. HALL – ELECTRICAL AND GAS APPLIANCES

<p>A. Electrical wiring is in good condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. There are child safety plugs so young children do not have access to electrical sockets. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>C. Leads and cords are not exposed, frayed or defective. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. Electric and computer cords are not loose on the floor or hanging over furniture. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>E. When not in use electrical cords are properly stored. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>F. There are no broken plugs, sockets or switches. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>G. Electrical circuit switching boards are fully enclosed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>H. Electrical circuit switching boards are inspected annually by a registered electrician. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last inspection: _____</p> <p>Confirmed by: _____</p>
<p>I. Extension cords and power boards are not daisy-chained* <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><i>*where one extension cord is connected to another to lengthen it/one power board is plugged into another to increase the number of power outlets available).</i></p> <p>Confirmed by: _____</p>	<p>J. Electrical appliances are regularly (annually) tested-and-tagged. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Date of last test-and-tag: _____</p> <p>Confirmed by: _____</p>

## 29. HALL - LIGHTING

<p>A. Lighting is adequate. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	
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### 30. HALL - HEATING

<p>A. Heating is adequate ie within government guidelines.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. Reticulation and heaters are checked annually by a certified gas fitter.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Date of last inspection: _____</p> <p>Confirmed by: _____</p>
<p>C. Heater cords are not loosely arranged on the floor presenting a tripping hazard.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>D. Heaters do not have loose grills where children could push fingers or objects.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>E. Heaters cannot be knocked over easily.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>Confirmed by: _____</p>

### 31. HALL - STORAGE

<p>A. Storage is adequate and/or convenient.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>	<p>B. Items in high storage are secured.    <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> N/A</p> <p>Confirmed by: _____</p>
<p>C. Hazardous substances are held in secure storage.    Yes  No  N/A</p> <p>Confirmed by: _____</p>	<p>D. Safe handling procedures for hazardous substances are displayed.    Yes  No  N/A</p> <p>Confirmed by: _____</p>
<p>E. There is personal protective equipment available and its use is recommended (eg gloves, goggles).    Yes  No  N/A</p> <p>Confirmed by: _____</p>	<p>Confirmed by: _____</p>

## MINISTRY UNIT HAZARD IDENTIFICATION REGISTER

Fill in the fields below for your ministry unit specific hazards. You may need to complete one register per building. If you have any questions, contact [keepsafe@aucklandanglican.org.nz](mailto:keepsafe@aucklandanglican.org.nz). Use the risk matrix at the end to help assess the risk level.

MINISTRY UNIT NAME: \_\_\_\_\_

SITE LOCATION: \_\_\_\_\_

Location of Hazard	Hazard	Risk level <sup>1</sup>	How will we manage the hazard? ie will we eliminate, isolate, or minimise the hazard?	Action(s) to manage the hazard	Action(s) assigned to	Date action to be completed	Date completed	Date signed off by governing body
eg Main entry church	Steps	Tripping hazard	Minimise	1. Mark step edges 2. Install handrail	1. A Warden 2. A Warden	20/05/2023	19/05/2023	28/05/2023

<sup>1</sup> Use the risk matrix at the end of this document to work out the risk level

MINISTRY UNIT NAME: \_\_\_\_\_

SITE LOCATION: \_\_\_\_\_

Location of Hazard	Hazard	Risk level <sup>1</sup>	How will we manage the hazard? ie will we eliminate, isolate, or minimise the hazard?	Action(s) to manage the hazard	Action(s) assigned to	Date action to be completed	Date completed	Date signed off by governing body



# Risk Matrix

Use this risk matrix to determine the risk level of each hazard, by working out the probability that the risk will happen and what the consequence might be if it did happen.

CONSEQUENCE What is the potential severity of the injury if the risk occurred?		LIKELIHOOD (PROBABILITY) What is the probability the hazard would result in injury or disease?				
		Rare	Unlikely	Moderate	Possible	Likely
Extreme		HIGH	SEVERE	SEVERE	SEVERE	SEVERE
Significant		MEDIUM	HIGH	HIGH	SEVERE	SEVERE
Moderate		MEDIUM	MEDIUM	MEDIUM	HIGH	HIGH
Minor		LOW	MEDIUM	MEDIUM	MEDIUM	MEDIUM
Insignificant		LOW	LOW	LOW	MEDIUM	MEDIUM