## **Example Safety Action Plan**

Identified hazard	*Risk rating	What control measures are to be established and implemented?	Person responsible to action	Date to be actioned by	Completion date and signed
Tables Collapsing	Moderate	Ensure legs are properly tables with heavy items	Myself	Event Day	
Items falling out of vehicle during bump in bump out	Moderate	or underneath heavy items. Use tie downs to secure bulky items.	Driver of the vehicle	Event Day	
Spreading sickness	Low	available. Be aware of what you touch.	All staff/volunteers	Week of Event	
Glass smashing	Moderate`	Have dustpan and brush on hand. Move glass away from edges of tables.	Myself	Event Day	
Marquee blowing over	High	Ensure marquee legs are secured down with weights. When putting marquee up, check to make sure all legs are clicked in properly.	Bump in staff/volunteer s	Event Day	
Appliance catching on fire	Low	Have a fire extinguisher and make sure all cords are tag and tested.	Myself	Event Day	

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Risk asse	ssn	nent matrix					
**Use the r	isk ra	ating table to assess	the level of risk for each	n job step.			
					Likelihood		
			1	2	3	4	5
			1 Rare	2 Unlikely	3 Moderate	4 Likely	5 Almost Certain
		Consequence	Rare The event may occur in exceptional circumstances	_	_		-
	1	Consequence Insignificant No injuries or health issues	The event may occur in	Unlikely The event could occur	Moderate The event should occur	Likely The event will probably occur	Almost Certain The event is expected to

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