

# RISK CATEGORISATION AND HEALTH ASSESSMENT REQUIREMENTS TEMPLATE

Rail safety worker job title:

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## STEP 1 – DEFINE THE CONTEXT (refer Section 2.4.1 of Standard)

Define the context in which the rail safety work is performed – legislative requirements, policies, procedures, business and operational environment.

<b>STEP 2 – IDENTIFY RAIL SAFETY TASKS</b> (refer Section 2.4.2)	<b>STEP 3 – ANALYSE TASKS</b> (refer Section 2.4.3)	<b>STEP 4 - ANALYSE SAFETY CONTROLS</b> (refer Section 2.4.4)	<b>STEP 5 – CATEGORISE TASKS*</b> (refer Section 2.4.5)
Identify the tasks that make up the job.	Identify all activities that make up each task and the environment in which they occur.	Identify and describe the existing local safety controls for the tasks and activities described.	Based on the nature of the activities and the existing controls, determine the potential impact of ill-health and categorise accordingly. The highest risk task determines the category.

### \*CATEGORY DEFINITIONS

**Safety Critical Work:**

Action or inaction due to ill-health of the worker could lead to a serious incident affecting the public or the rail network.

**Non-Safety Critical Work (Around the Track Personnel):**

Action or inaction due to ill-health of the worker will not lead to a serious incident affecting the public or the rail network, however it may affect the safety of the individual worker.



**Category 1** – the work is such that sudden incapacity of the worker due to ill-health could lead to a serious incident affecting the public or the rail network.

**Category 2** – the work is such that sudden incapacity of the worker due to ill-health will not lead to a serious incident affecting the public or the rail network.

**Category 3** – the work is not performed in a controlled environment and therefore the worker may be at risk from moving trains.

**Category 4** – the work is performed in a controlled environment and therefore the worker is not at risk from moving trains.

### CONCLUSION – OVERALL CATEGORISATION OF RAIL SAFETY WORKER JOB

The highest risk task determines the overall category.

Safety Critical Work	Non-Safety Critical Work / Around the Track Personnel
Category 1 (Category 1 health assessment required)	Category 3 (Category 3 health assessment required)
Category 2 (Category 2 health assessment required)	Category 4 (No health assessment required)

### STEP 6 – IDENTIFY TASK SPECIFIC HEALTH REQUIREMENTS (refer to Section 2.4.6)

Determine health requirements for specific tasks for Category 1 and Category 2 workers. There are no task-specific requirements related to the Standard for Category 3 workers but they may have OHS requirements which can be noted below.

<b>Hearing</b>	Speech in noise	Speech in quiet	
<b>Musculoskeletal</b>	Standing	Walking / uneven ground	Sitting
	Lifting / carrying	Aerobic requirements	Other (describe)
<b>Colour vision</b>	No colour vision requirements	Colour Vision Normal	Colour Vision Defective Safe A
			Colour Vision Defective Safe B

Other requirements/comments (including OHS)

### STEP 7 – CONSIDER ADDITIONAL RISK CONTROLS (refer to Section 2.4.7)

Consider other control options that might be introduced to mitigate the risk, such as additional administrative or engineering controls.

**STEP 8 – CONFIRM AND DOCUMENT HEALTH ASSESSMENT REQUIREMENTS** (refer to Section 2.4.8)

Determine the final category and task-specific requirements with consideration of additional controls:

**Category**

Category confirmed as above

Category amended in light of additional controls – specify:

**Task specific requirements**

Task specific requirements confirmed as above

Task specific requirements amended in light of additional controls – specify:

**Other requirements**

Other requirements confirmed as above

Other requirements amended in light of additional controls – specify:

**STEP 9 – IMPLEMENT, MONITOR & REVIEW** (refer to Section 2.4.9)

Consider requirements for implementation, monitoring and review. Record date of review below.

**Assessment completed by (list all contributors) (refer to section 2.4 principles)**

Name:	Position:
Worksite inspection completed	Date:
Job description confirmed	Date:

Other supporting documentation - Describe and attach:

Date of completion:	Date of review:
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