

Fitness for Duty Assessment QA10028

Issue Date: 09/01/2017
REVIEW NO: 5

Fitness for Duty Assessment

Instructions

To be completed by Operator once a day to assess the Operator's fitness for duty at the start of each day.

1. Complete Section 1 of form in blue/black ink.
2. Use the hours of sleep recorded in Section 1 to determine risk assessment classification (Section 2)
3. Use the risk assessment classification to determine suitable controls (Section 3)
4. Complete Section 4 including risk assessment and risk controls
5. Place the completed form in file location

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Section 1A - Operator's Assessment – Pre- Work Checklist

	Yes/No
Have zero blood alcohol content and not impaired by drugs	
Are you feeling unwell or do you have any unmanaged medical issues	
Are you returning from recreational leave/time off Operating activities	
	Hours
Total sleep obtained in last 24 hours – <i>Note: Consider all activities</i>	
Total sleep obtained in last 48 hours – <i>Note: Consider all activities</i>	

Section 1B – Operator's Assessment – Sleepiness

Here are some descriptors about how alert or sleepy you might be feeling right now. Please read them carefully and TICK the number that best corresponds to the statement describing how you feel at the moment.

How alert or sleepy I am feeling right now.	SCORE
Extremely alert	1
Very alert	2
Alert	3
Rather Alert	4
Neither alert nor sleepy	5
Some signs of sleepiness	6
Sleepy, but no difficulty remaining awake	7
Sleepy, some effort to keep alert	8
Extremely sleepy, fighting sleep	9
Total Score	

Section 2 - Risk assessment classification (Tick one)

Low Risk	6 or more hrs sleep in last 24 hrs OR Operator's sleepiness score is 7 or less	<input type="checkbox"/>
Moderate Risk	Between 5.5 & 6 hrs sleep in last 24 hrs OR Operator's sleepiness score is more than 7	<input type="checkbox"/>
High Risk	Between 5.0 and 5.5 hrs sleep in last 24 hrs OR Operator's sleepiness score is more than 7	<input type="checkbox"/>
Extreme Risk	Less than 5.0 hrs sleep in the last 24 hrs and/or less than 12 hrs sleep in last 48 hrs OR Operator's sleepiness score is more than 7	<input type="checkbox"/>

Reviewed By: Claudia Harms

Review date: 25/11/2022

Approved By: Joshua Sansom & Paul Harms

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Section 3 - Risk assessment controls

Low Risk	Operator is fit to commence work
Moderate Risk	Operator needs additional risk management from your company
High Risk	Operator needs significant additional risk management from your company
Extreme Risk	Operator is definitely unfit to commence work & will contact Supervisor / Manager to arrange alternative schedule before commencing working / Operating plant/equipment.

Section 4 - Operators Declaration:

I,	Do solemnly and sincerely declare that the information is correct and truthful.
_____ (Operator's Name)	_____ (Operator's Signature)
Date: _____ Time: _____	
<u>Risk assessment (from Section 2):</u>	
<input type="checkbox"/> Low Risk <input type="checkbox"/> Moderate Risk <input type="checkbox"/> High Risk <input type="checkbox"/> Extreme Risk	
<u>Risk controls where risk assessment is not low risk</u>	
<i>Write a description of agreed risk controls/countermeasures by the Operator in this space based on Section 3.</i>	

Operator Note

You must advise the Manager as soon as practicable if you are not classified as low risk. You must also submit this form as per operational procedures.