

Fatigue Hazard Identification Checklist

1. Complete this checklist to help you identify fatigue related issues that may lead to injuries or other adverse outcomes.
2. The manager should complete the checklist in consultation with the individual worker.
3. If the answer is yes to any shaded questions, or yes to three or more of the questions in the non-shaded areas, the manager should assess fatigue as a hazard and consider relevant risk control measures.

Mental and physical work demands

Is physically demanding work undertaken for long periods?
(For example, tasks that are especially tiring and/or repetitive)

Yes No

Is mentally demanding work undertaken for long periods?
(For example, work that requires vigilance, work that requires continuous concentration and minimal stimulation, work performed under pressure, work to tight deadlines, interacting/dealing with the public)

Yes No

Work scheduling and planning

Does the worker perform work or travel between midnight and 6am?

Yes No

Does the worker perform work at low body clock times (between 2 am and 6 am)?

Yes No

Does the work scheduled prevent the worker having at least one day off per week?

Yes No

Does the schedule make it difficult for the worker to consistently have at least two consecutive nights sleep per week?

Yes No

Do work practices include on-call work, call-backs and/or sleepovers?

Yes No

Does the schedule differ from the actual hours worked?

Yes No

Does the work schedule include rotating shifts?

Yes No

Is work performed regularly in excess of 12 hours? This would include any overtime worked.

Yes No

Does the worker work on average more than 56 hours per week?

Yes No

Does the worker have less than 10 hours between each shift either regularly or occasionally? (for example, split shifts, quick shift changeovers, cover for colleagues, absences, peak operational periods)

Yes No

Does the work involve high risk* work during part or all of a night shift?

Work environmental conditions

Is work carried out in harsh or uncomfortable conditions? (for example, hot, humid, cold temperatures)

Yes No

Does the worker perform work with plant or machinery that vibrates?

Yes No

Is the worker exposed to hazardous chemicals?

Yes No

Is the worker consistently exposed to loud noise?

Yes No

Other conditions

Does the worker have to travel more than one hour to get to their job?

Yes No

Are there currently any contributing external factors that may impact on the workers ability to perform their tasks? (for example, family commitments, pre-existing health conditions)

Yes No

Original source: NSW Health, South East Sydney Local Health District

Definition: High Risk work is classified as any task that is carried out that exposes a worker(s) to danger; that has the potential to cause a severe injury or illness or fatality.

This advice is general in nature and is not intended to replace a formalised Risk Management process for the hazard; Fatigue, rather it is intended to compliment and provide additional considerations. If you are unsure refer to your WHS Team for further instruction and advice.