



اوتوريتي كېمسان كسلامتن  
كسييتن دان عالمسكيت  
Safety, Health and Environment  
National Authority

## SELF-ASSESSMENT CHECKLIST: WSH RISK MANAGEMENT

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This self-assessment checklist is a tool to ensure that Employers, Self-employed persons and Principals comply with the requirements under the Workplace Safety and Health Act, Chapter 277 and Workplace Safety and Health (Risk Management) Regulations. The objective of this checklist is to ensure that Employers, Employees, Occupiers, and Principals are aware of the factors that have an impact on health and safety. This checklist only acts as a guide and should not be construed as implying any liability nor should it be taken to encapsulate all the responsibilities and obligations of the Employers, Employees, Occupiers, Self-employed persons and Principals under the law. If you answer 'No', you are advised to address the gaps or hazards that you have identified at your workplace. You may need to do more than one assessment and you are advised to reassess your workplace as and when required to ensure you maintain a safe workplace at all times.

**This Checklist does not require submission to SHENA unless SHENA explicitly instructs you to do so.** However, a copy of the filled-in checklist should be kept by the HSE focal point of your company/organisation at all times.

For further references on WSH Risk Management, you can refer to the Workplace Safety and Health (Risk Management) Regulations, **Code of Practice** and **Guidance on Workplace Safety and Health (Risk Management)** on Guidance to Risk Management at SHENA website. SHENA reminds all Employers, Employees, Occupiers, Self-employed Persons and Principals to comply with their legal obligations under the laws of Brunei Darussalam including, but not limited to, the Employment Act (Chapter 278) and the Workmen's Compensation Act (Chapter 74).

### GENERAL DETAILS

<b>NAME OF COMPANY &amp; OFFICE ADDRESS</b>			
<b>WORKPLACE ACTIVITY</b>	<input type="checkbox"/> Agriculture <input type="checkbox"/> Catering and Hospitality <input type="checkbox"/> Commercial/Retail Shop <input type="checkbox"/> Construction <input type="checkbox"/> Food & Beverage <input type="checkbox"/> Food Processing & Packaging	<input type="checkbox"/> Healthcare <input type="checkbox"/> IT & Media <input type="checkbox"/> Logistics & Transportation <input type="checkbox"/> Manufacturing <input type="checkbox"/> Marine & Port <input type="checkbox"/> Oil & Gas	<input type="checkbox"/> Printing <input type="checkbox"/> Recycling & Waste <input type="checkbox"/> Recreational & Fitness <input type="checkbox"/> Repair & Maintenance <input type="checkbox"/> Warehouse <input type="checkbox"/> Other (Please specify): _____ _____

SECTION A: WORKPLACE SAFETY SYSTEM		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
1	Do you have in place and has implemented a <b>proper system</b> in your workplace to manage health, safety and environment?				
	i. Risk Assessment.				
	ii. Safety Management System				
	iii. ISO 45001:2018				
	iv. Others not limited to: Hazard and Operability Study (HAZOP)/Failure Modes and Effect Analysis (FMEA)/What-if Analysis/Fault Tree Analysis/Event Tree Analysis/JHA/HIRAC/HACCP/HSE Plan/ Safety Policy/ HSE Policy (please indicate in the remark column)				

**Note: In every workplace, the employer, self-employed person and principal shall conduct a risk assessment in relation to the safety and health risks posed to any person who may be affected by his undertaking in the workplace.**

SECTION B: RISK ASSESSMENT		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
2	Have you assigned a <b>person or group of Risk Assessment Team</b> to look after health, safety and environmental matters in your workplace? E.g. WSH Officer or WSH Co-ordinator or HSE focal person or HSE competent person.				
3	Does your workplace have a <b>Risk Register</b> in place and maintained?				
4	Does your workplace or work tasks conduct <b>hazard identification</b> or hazard analysis for each task or work process?				
5	Does your workplace remove any foreseeable risk through the process of “ <b>elimination</b> ” to any person who may be affected by his undertaking in the workplace?				
6	When the risk identified cannot be eliminated as reasonably practicable, does your workplace take the following measures to control the risk?  (a) minimising the risk as reasonably practical; (b) safe work procedures to control the risk.				
7	Does your workplace practice <b>any one</b> of the following measures as listed below in order to minimise a potential risk as reasonably practicable, if the risk identified cannot be eliminated?  <ul style="list-style-type: none"> <li>• <b>Substitution</b> e.g. replacement of any hazardous material, process, operation, equipment or device to less hazardous ones;</li> <li>• <b>Engineering Control</b> e.g. installation of barrier, enclosure, guarding, interlock or ventilation system;</li> <li>• <b>Administrative Control</b> e.g. permit-to-work (PTW); and</li> <li>• <b>Provision and use of Personal Protective Equipment (PPE)</b></li> </ul>				
8	Do you estimate the risks in terms of severity and the probability of causing harm? Set the priorities and tackle the most significant hazards first.				
9	Do you determine the appropriate prevention measures, budget and timing for implementing the prevention measures?				
10	Do you have an action plan or implement a proposed <b>preventative measure of control</b> ?				
11	Do you conduct Risk Assessment prior to starting work/work activity?				
12	Have you <b>specified the roles and responsibilities of persons</b> involved in the implementation of any measure or safe work procedure? E.g. roles and responsibilities of Top Management, Manager, Risk Management Leader/ Risk Assessment Leader and Employees.				
13	Do you receive regular updates on the Risk Assessment and Risk Control Measures identified by your team members?				

SECTION C: RECORDS		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
14	Does your workplace have a record of any Risk Assessment?				
15	Does your workplace have a record of any safe work procedure?				
16	Does your workplace practice record retention of Risk Assessment for a period of not less than 3 years?				
17	Does your workplace practice record retention of safe work procedures for a period of not less than 3 years?				
SECTION D: COMMUNICATION		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
18	Is the nature or potential risk of the job activity identified communicated to the employee or any person in the workplace? E.g. work safety notice				
19	Are there instructions or procedures (e.g. safe work procedure) for all work with risks?				
20	Do you ensure that people who enter your workplace are not exposed to risk (e.g., the general public, customers, visitors, clients and patients, delivery man or service personnel)?				
21	Are employees protected from abusive or dangerous behaviour (e.g. customer service desk, security desk)				
22	Means of communicating the implemented risk control measures include WSH Committee meetings, feedback sessions, small group meetings, one-on-one discussions, email/telephone calls, notice board, bulletins, portal etc.				
SECTION E: REVIEW OF RISK ASSESSMENT		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
23	Is the Risk Assessment reviewed annually?				
24	Is the Risk Assessment reviewed and revised (if necessary) at least once every 3 years from the approval date?				
25	Is the Risk Assessment reviewed and has identified solutions when there is an occurrence of any bodily injury to any person as a result of exposure to a hazard in the workplace?				
26	Is the Risk Assessment reviewed and has identified solutions when there is a significant change in work practices or procedures?				
27	Is the Risk Assessment reviewed and has identified solutions when new information on Workplace Safety and Health emerging risks, threat of terrorism, emerging disease outbreaks, or mental well-being is made known?				
28	Is the Risk Assessment reviewed and has identified solutions when there is a significant change in the workers' personal health (including mental well-being) in relation to safety critical work process or activity?				

SECTION F: OTHERS		YES	NO	N/A	REMARKS/ JUSTIFICATION/ EXPLANATION
29	Do you conduct workplace health and safety audits on a regular basis?				
30	Do you have Workplace safety and health auditors?				
31	Has training and information been given to employees on how to identify risk?				

*If you answer “NO” to any of the checklists from parts B- E, it may indicate the need to implement Risk Management in your workplace. Kindly refer to the **Code of Practice** and **Guidance on Workplace Safety and Health (Risk Management)** on Guidance to Risk Management at the SHENA website for the implementation of Risk Management at your workplace.*

*Any employer, self-employed person or principal who contravenes the Workplace Safety and Health (Risk Management) Regulations is guilty of an offence and liable on conviction — (a) for a first offence, to a fine not exceeding \$10,000; and (b) for a second or subsequent offence, to a fine not exceeding \$20,000, imprisonment for a term not exceeding 6 months or both.*

**SHENA SEEKS THE SUPPORT OF ALL RELEVANT STAKEHOLDERS  
TO ENSURE BRUNEI A SAFE PLACE TO WORK AND LIVE**

For further inquiries and clarification, please contact us  
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