Safe Design Project Review Form

This form can be used as a guide to undertaking safe design reviews of projects. The aim of the review is to better understand how project teams integrate and manage Safety in Design (SiD), obtain feedback on design issues and opportunities across teams and projects, and make process improvements.

PROJECT DETAILS

Client name	
Project address	
Project name	
Name of Designer	
Project Review Date	
Intended use of structure	
Project involves (select all that apply)	☐ New structure ☐ Demolition of existing structure(s) ☐ Renovating a structure ☐ Other
	Details:
Was the project design to include unusual and unique design elements?	☐ Yes ☐ No ☐ N/A
	Details:
Was the design outsourced?	☐ Yes ☐ No ☐ N/A

CONCEPT PHASE: PROJECT INITIATION

Was a design brief developed for the project?	☐ Yes	☐ No	☐ N/A		

Rate the quality of the design brief SiD information. e.g. Did it include end-user input, design principles/specifications, hazard or incident data?	☐ 5 Excellent	☐ 4 Good	☐ 3 Average	☐ 2 Poor	☐ 1 Very Poor
	Details:				

Did the project initiation process include specifying and costing SiD activities and deliverables? e.g. Timeframes for workshops/budget allocations?	☐ Yes	☐ No	☐ N/A		
	Details:				

How would you rate the project team, or if outsourced, the Lead Designer's knowledge, capability, and experience in Safe Design for the project they were engaged to undertake?	☐ 5 Excellent	☐ 4 Good	☐ 3 Average	☐ 2 Poor	☐ 1 Very Poor
	Details:				

Was a WHS file established for the project?	☐ Yes	☐ No	☐ N/A		
	Details:				

Was a formal high level risk assessment carried out by the Project Team?	☐ Yes	☐ No	☐ N/A		
	Details:				

CONCEPT PHASE: PROJECT INITIATION

If existing, was the formal high level risk assessment carried out in collaboration with key stakeholders' HSE, facilities, operations representatives?	☐ Yes ☐ No ☐ N/A
	Details:
Was a Safe Design Workshop conducted at the Concept stage? **Note, this could have been conducted as part of a project meeting.**	☐ Yes ☑ No ☑ N/A
	Details:

How would you rate your process for SiD consultation with the Client and other stakeholders?	☐ 5 Excellent	☐ 4 Good	☐ 3 Average	☐ 2 Poor	☐ 1 Very Poor
	Details:				