

Lead audit checklist

This checklist will help a person conducting a business or undertaking (PCBU) at a workplace where a lead process is carried out to comply with relevant parts of Chapter 3 – General risk and workplace management, Chapter 7, Part 7.1 – Hazardous chemicals and all of Part 7.2 - Lead of the [Work Health and Safety Regulation 2011](#).

Date: _____ **Workplace:** _____

Auditor: _____

A=Audited
 NC=No Compliance
 N/A=Not Applicable
 Yes/No answers go in remarks column

	A	NC	N/A	Comments
Is a lead process being carried out at this workplace? (See definition of a lead process in s.392 of the Work Health and Safety Regulation 2011)				
Safety data sheet (SDS)				
Has the current SDS been obtained? (s.344)				
Is a copy of the SDS close to where the lead is being used? (s.344 (3))				
Register				
Is there a hazardous chemicals register? (s.346 (1))				
Has a copy of the lead SDS been placed in the register? (s.346 (2))				
Is the register readily accessible to workers? (s.346 (3))				
Labelling				
Are containers correctly labelled (s. 341), including where it is transferred to a second container? (s. 342)				

Risk management				
Has the PCBU identified whether a workplace which has a lead process is conducting lead risk work? (s. 402)				
Does it include:				
• past biological monitoring of workers				
• airborne lead levels				
• the form of lead used				
• the tasks and processes required to be undertaken with the lead				
• duration and frequency of exposure to lead				
• possible routes of exposure to lead				
Notification about lead risk work				
• Has the employer notified Workplace Health and Safety Queensland, in the approved Form 23 , within 7 days of the assessment, if a process includes a lead-risk work? (s.403)				
• Does it state the kind of lead process which includes lead risk work?				
• Has the PCBU kept a copy of the notice and ensured that workers and the health and safety representative have access to the notice?				
Changes to information in notification of lead risk work				
• If there has been a change in the process relating to the notification given to the regulator under s.403, has this change been notified to the regulator?				
Controlling risk – Isolation and engineering or other				
Has the PCBU adopted a principal means of controlling airborne lead exposure risk by:				
• isolating the lead from workers (s.36 (3))				

• implementing engineering controls (e.g. downdraft local extraction ventilation (s.36 (3)); or				
• administrative controls or use of personal protective equipment				
Controlling risk - Administrative controls				
Has the PCBU confined any lead contamination to the lead process area (s.396)				
Does the PCBU keep the lead process area clean? (s.397)				
Is there evidence that eating, drinking, chewing gum, smoking or carrying utensils for smoking are all prohibited in the lead process area? (s.398 (1))				
Has the PCBU provided an area for eating and drinking that cannot be contaminated with lead from a lead process area? (s.398 (2))				
In order to minimise secondary lead exposures, does the PCBU				
• Provide changing rooms, washing, showering and toilet facilities in good working order? (s.399 (1))				
• Arrange facilities for removing contaminated clothing and equipment and for washing of hands, forearms and faces before entering an eating or drinking area? (s.399 (2))				
In respect of personal protective equipment (PPE) used in the lead process area, does the PCBU provide (s.400)				
• Sealed containers for contaminated PPE?				
• Disposal arrangements for non-reusable PPE				
• Laundering arrangements suitable for reusable lead contaminated PPE				
• Decontaminating arrangements for sealed containers being removed from a lead process area?				
• Means to prevent contaminated clothing from being removed from the				

workplace unless it is laundered or to be disposed of?				
Controlling risk – use of personal protective equipment (PPE)				
If the lead exposure risk is not fully controlled by other means, is PPE used? (s.36)				
Does the PCBU provide the PPE? (s.44 (2))				
Has the PPE been selected to minimise the risk appropriate for lead? (s. 44 (3))				
Have the workers been properly instructed in the use of PPE? (s.44 (4))				
If respiratory protection is used, has a respirator fit testing program been established?				
Is the PPE cleaned, maintained and properly stored? (s.44 (3) and (4))				
Atmospheric monitoring				
If not certain about airborne lead exposures, has the PCBU conducted monitoring for airborne lead? (s.50 (1))				
Does the airborne concentration determined by air monitoring exceed the exposure standard for lead? (s.49)				
Have air monitoring results been recorded and in a form which can be kept for 30 years? (s.50 (2))				
Reviewing control measures				
A PCBU may need to review and revise control measures (s.401) under certain circumstances				
<ul style="list-style-type: none"> Has a worker been removed from lead-risk work because of an elevated blood lead level above the removal level? 				
<ul style="list-style-type: none"> Has a worker received advice that health monitoring identified they had contracted a (lead-related) disease, injury or illness? 				
<ul style="list-style-type: none"> Has any recommendation been made for remedial measures? 				

• Do all control measures control the risks they were intended to control?				
• Have any new risks resulted from a change to the lead risk work?				
• Has any request been made by a health and safety representative for a review of controls?				
Health monitoring				
Is the PCBU providing health monitoring? (s.405)				
Have the workers been consulted on the selection of a registered medical practitioner? (s.408 (2))				
Is health monitoring supervised by a registered medical practitioner with experience in health monitoring? (s.408)				
Has the PCBU provide all the relevant information to the registered medical practitioner? (s.410)(use of Form 86 meets this need)				
Does the PCBU pay for the health monitoring of workers? (s.409)				
Is early employment health monitoring conducted for workers:				
• before they commence lead-risk work? (s.405)				
• one month after the worker starts work?				
Has the PCBU taken all reasonable steps to obtain a health monitoring report on workers involved in lead risk work? (s.411)				
Has the PCBU given the worker the health monitoring report as soon as possible after it is done? (s.412)				
Does the PCBU have a duty to provide a health monitoring results to any other relevant PCBUs? (s.414)				
Does the PCBU need to provide a health monitoring report to the regulator (s.413)				

Frequency of monitoring				
<ul style="list-style-type: none"> Is the frequency of biological monitoring for blood lead appropriate for females not of reproductive capacity and males (s.407) <ul style="list-style-type: none"> – 6 months – 3 months – 6 weeks 				
<ul style="list-style-type: none"> Is the frequency of biological monitoring for blood lead appropriate for females of reproductive capacity <ul style="list-style-type: none"> – 3 months – 6 weeks 				
Removal from a lead-risk job				
If a worker has been recommended for removal from a lead-risk work, was it because:				
<ul style="list-style-type: none"> the worker's blood lead exceeded the removal level for that class of worker? (s.415 (1)) 				
<ul style="list-style-type: none"> the registered medical practitioner recommended the removal of the worker? (s. 415 (1)) 				
<ul style="list-style-type: none"> there is an indication that the risk control measure failed? (s.415 (1)) 				
Has the PCBU notified Workplace Health and Safety Queensland, using the approved Form 23 of the removal of any worker from lead risk work? (s.415 (2))				
<ul style="list-style-type: none"> Has the PCBU duly removed the worker from lead risk work? (s.416 (1)) 				
<ul style="list-style-type: none"> Has a removed worker been examined within 7 days after removal? (s.416 (2)) 				
Return to a lead-risk job				
If a worker has been removed from lead risk work, has:				
<ul style="list-style-type: none"> The PCBU arranged for the medical practitioner to undertake further 				

monitoring to ensure the worker's blood level is low enough to return to lead risk work? (s.417 (2))				
<ul style="list-style-type: none"> The registered medical practitioner been satisfied that the worker is fit to return to lead risk work? (s.417 (3)) 				
Confidentiality of worker's health monitoring report				
Does the PCBU disclose the contents of a worker's health monitoring report to anyone other than the worker, without the worker's written consent? (s.418)				
Information about lead risks and induction and training about lead				
Does the PCBU provide information to workers engaged in or likely to be engaged in lead risk work? (s.395)				
Does the training include information on the health risks and toxic effects of lead? (s.395 (3) (a))				
Does the training include information on the health monitoring for lead? (s.395 (3) (b))				
Is the training provided readily understandable? (s.39 (3))				
Records				
Are records kept of:				
<ul style="list-style-type: none"> health monitoring on workers in lead-risk work – 30 years? (s.418) 				
<ul style="list-style-type: none"> monitoring results – 30 years? (s.50) 				
<ul style="list-style-type: none"> induction and training 				