

## Can Closing Machine | SAFE WORK METHOD STATEMENT (SWMS)

### TASK OR ACTIVITY: Can Closing Machine

Business Name: [Company Name]

ABN: [ABN]

SWMS#

Business Address: [Company Address]

Contact Person:

Phone: [Phone]

Email:

### THIS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PCBU OF THE PROJECT

Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (PCBU) is required to ensure that a safe work method statement (SWMS) is prepared before the proposed work starts.

Full Name:

Signature:

Title:

Date:

Details of the person(s) responsible for ensuring implementation, monitoring and compliance of the SWMS, as well as reviews and modifications of the SWMS.

Full Name:

Title:

Phone:

ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS SWMS MUST HAVE THE FOLLOWING COMMUNICATED

NAME AND DATED SIGNATURE OF ALL RELEVANT PERSONNEL WHO HAVE BEEN CONSULTED AND COMMUNICATED TO IN THE DEVELOPMENT AND APPROVAL OF THIS SWMS

Safety meetings or toolbox talks will be scheduled in accordance with legislative requirements to first identify any site hazards, then to communicate those hazards and then to further take steps to either eliminate or control each hazard.

NAME

SIGNATURE

DATE

If an incident or a near miss occurs, all work must stop immediately. Depending on the severity of the incident, a meeting will be called with all workers to amend the SWMS if required. The meeting may also be an educational opportunity.

Any changes made to the SWMS after an incident or a near miss must be approved by the Person Conducting Business or Undertaking and communicated to all relevant personnel.

The SWMS must be kept and be available for inspection at least until the work is completed. Where a SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to which the SWMS relates, then the SWMS must be kept for at least two years from the occurrence of the notifiable incident.

## CLIENT OR PRINCIPAL CONTRACTOR DETAILS

|  |  |
|--|--|
| Client:                                | SCOPE OF WORKS<br><br>Provide a detailed description of the specific work being carried out (otherwise known as scope of works). |
| Project Name:                          |  |
| Project Address:                       |  |
| Project Manager:                       |  |
| Contact Phone:                         |  |
| Project Manager Signature:             |  |
| Date SWMS supplied to Project Manager: |  |

## ANY HIGH-RISK CONSTRUCTION WORK BEING CARRIED OUT

|   |   |
|---|---|
| <input type="checkbox"/> involves a risk of a person falling more than 2 meters.  | <input type="checkbox"/> is carried out on or near pressurised gas mains or piping.                                     |
| <input type="checkbox"/> is carried out on a telecommunication tower.   | <input type="checkbox"/> is carried out on or near chemical, fuel or refrigerant lines.                                 |
| <input type="checkbox"/> involves demolition of an element of a structure that is load-bearing.                           | <input type="checkbox"/> is carried out on or near energised electrical installations or services.                      |
| <input type="checkbox"/> involves demolition of an element related to the physical integrity of a structure.              | <input type="checkbox"/> is carried out in an area that may have a contaminated or flammable atmosphere.                |
| <input type="checkbox"/> involves, or is likely to involve, disturbing asbestos.  | <input type="checkbox"/> involves tilt-up or precast concrete.  |
| <input type="checkbox"/> involves structural alteration or repair that requires temporary support to prevent collapse.    | <input type="checkbox"/> is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor. |
| <input type="checkbox"/> is carried out in or near a confined space.  | <input type="checkbox"/> is carried out in an area of a workplace where there is any movement of powered mobile plant.  |
| <input type="checkbox"/> is carried out in/near a shaft or trench deeper than 1.5m or tunnel involving use of explosives. | <input type="checkbox"/> is carried out in areas with artificial extremes of temperature.                               |
| <input type="checkbox"/> is carried out in or near water or other liquid that involves a risk of drowning.                | <input type="checkbox"/> involves diving work.  |

## ANY HIGH-RISK MACHINERY OR EQUIPMENT NEARBY

|                                       |                                       |   |                                    |   |  |                                  |                                     |
|---------------------------------------|---------------------------------------|---|------------------------------------|---|--|----------------------------------|-------------------------------------|
| <input type="checkbox"/> Forklift     | <input type="checkbox"/> Crane/s      | <input type="checkbox"/> Hoist/s        | <input type="checkbox"/> Excavator | <input type="checkbox"/> Backhoe/Loader | <input type="checkbox"/> Boom Lift     | <input type="checkbox"/> EWP     | <input type="checkbox"/> Genie Lift |
| <input type="checkbox"/> Trencher     | <input type="checkbox"/> Drilling Rig | <input type="checkbox"/> Trucks         | <input type="checkbox"/> Formwork  | <input type="checkbox"/> Bobcat         | <input type="checkbox"/> Flammable Gas | <input type="checkbox"/> Fuel    | <input type="checkbox"/> Dozer      |
| <input type="checkbox"/> High Voltage | <input type="checkbox"/> Mulcher      | <input type="checkbox"/> Tilt-up Panels | <input type="checkbox"/> Roller    | <input type="checkbox"/> Scissor Lift   | <input type="checkbox"/> Tractor       | <input type="checkbox"/> Other - |                                     |

| RISK MATRIX   |               |            |            |         |              |             |                                   |  |  |
|---|---------------|------------|------------|---------|--------------|-------------|-----------------------------------|--|--|
| LIKELIHOOD  | INSIGNIFICANT | MINOR      | MODERATE   | MAJOR   | CATASTROPHIC | SCORE       | ACTION                            | HEIRARCHY OF CONTROLS                              |  |
| ALMOST CERTAIN  | 3 HIGH        | 3 HIGH     | 4 ACUTE    | 4 ACUTE | 4 ACUTE      |             |                                   | <b>Elimination</b><br>Remove the hazard.           |  |
| LIKELY  | 2 MODERATE    | 3 HIGH     | 3 HIGH     | 4 ACUTE | 4 ACUTE      | 4A ACUTE    | DO NOT PROCEED                    | <b>Substitution</b><br>Replace the hazard.         |  |
| POSSIBLE  | 1 LOW         | 2 MODERATE | 3 HIGH     | 4 ACUTE | 4 ACUTE      | 3H HIGH     | Review before work starts.        | <b>Isolation</b><br>Isolate People from the hazard |  |
| UNLIKELY  | 1 LOW         | 1 LOW      | 2 MODERATE | 3 HIGH  | 4 ACUTE      | 2M MODERATE | Ensure control measures in place. | <b>Engineering</b><br>Isolate the hazard.          |  |
| RARE  | 1 LOW         | 1 LOW      | 2 MODERATE | 3 HIGH  | 3 HIGH       | 1L LOW      | Monitor and keep records          | <b>Administrative</b><br>Change the work.          |  |
| <b>Notes on Hierarchy of Controls:</b> Elimination methods are the most effective and preferred when controlling a hazard. Substitution is the second most effective method of controlling a hazard. Engineering by isolation is the third most effective, while Administrative Controls by changing the work is the fourth most effective method. PPE (Personal Protective Equipment) is the least effective method. |               |            |            |         |              |             |                                   |  |  |

  

| PERSONAL PROTECTIVE EQUIPMENT (PPE)  |  |  |  |  |   |  |  |  |  |  |  |
|--|--|--|--|--|---|--|--|--|--|--|--|
| FOOT PROTECTION  | HAND PROTECTION  | HEAD PROTECTION  | HEARING PROTECTION   | EYE PROTECTION   | RESPIRATORY PROTECTION  | FACE PROTECTION  | HIGH-VIS CLOTHING  | PROTECTIVE CLOTHING  | FALL PROTECTION  | SUN PROTECTION   | HAIR/JEWELLERY SECURED   |
|  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   |

Select the appropriate PPE above suitable for the equipment used or the job task being performed (if applicable).

**Note:** A SWMS must be reviewed regularly to make sure it remains effective. A SWMS must be reviewed (and revised if necessary) if relevant control measures are revised. The review process should be carried out in consultation with workers (including contractors and subcontractors) who may be affected by the operation of the SWMS and their health and safety representatives who represented that work group at the workplace.

When a SWMS has been revised, the person conducting a business or undertaking must ensure all:

- persons involved in the work are advised that a revision has been made and how they can access the revised SWMS;
- persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS; and,
- workers that will be involved in the work are provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.

| JOB STEP            | POTENTIAL HAZARDS                          | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|---------------------|--|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                     | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS   | RESIDUAL RISK | NAME OF PERSON     |
| 1. Preparation      | Manual handling injuries, Electrical shock | 2M           | <ul style="list-style-type: none"> <li>- Conduct a pre-start inspection of the can closing machine and surrounding work area to ensure all tools, equipment, and materials are properly placed, and electrical connections are safely secured.</li> <li>- Provide manual handling training for all workers involved in operating the can closing machine, educating them about correct lifting techniques, body posture, and the importance of using provided lifting aids when necessary.</li> <li>- Implement a buddy system or mechanical assistance, such as dollies, adjustable tables, or hoists, to assist with heavy lifting and handling tasks associated with the can closing machine operations.</li> <li>- Encourage frequent breaks and rotation through tasks to help prevent repetitive stress injuries and muscle strains related to manual handling during the preparation stage.</li> <li>- Regularly inspect and maintain any manual handling equipment, including hoists and trolleys, ensuring they are fit for use and free from defects that might lead to potential injuries during daily operations.</li> <li>- Keep aisles around the can closing machine clear of obstructions and debris, allowing easy access for operators, avoiding slip, trip, and fall hazards while performing manual handling tasks.</li> <li>- Ensure employees working with or near the can closing machine wear appropriate personal protective equipment (PPE) such as gloves, steel-toed boots, and high-visibility clothing, and reinforce proper usage guidelines.</li> <li>- Use a lockout-tagout (LOTO) system when disconnecting power sources from the can closing machine before initiating maintenance or cleaning procedures, reducing the risk of accidental electrical shocks.</li> <li>- Regularly inspect electrical components, cords, and systems connected to the can closing machine for any signs of wear, fray, or damage, and report any concerns to the workplace supervisor promptly for repair or replacement.</li> <li>- Provide regular training for all employees regarding emergency response protocols, specifically outlining steps for addressing accidents involving manual handling injuries or electrical shock, empowering staff to act swiftly and confidently in such events.</li> </ul> | 1L            |                    |
| 2. Machine setup    | Pinch points, Noise exposure               | 3H           | <ul style="list-style-type: none"> <li>- Ensure that only appropriately trained and qualified personnel are allowed to setup and operate the Can Closing Machine, reducing the likelihood of accidents occurring as a result of inexperience.</li> <li>- Require all workers in the vicinity of the Can Closing Machine to wear appropriate personal protective equipment (PPE), such as gloves, safety goggles, and earplugs. This helps to mitigate risks associated with pinch points, flying debris, and noise exposure.</li> </ul>  | 1L            |                    |

| JOB STEP            | POTENTIAL HAZARDS                   | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|---------------------|-------------------------------------|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE              | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS   | RESIDUAL RISK | NAME OF PERSON     |
|                     |                                     |              | <ul style="list-style-type: none"> <li>- Complete a thorough inspection of the machine before each use to identify any potential hazards, such as loose parts or debris. Addressing these issues prior to operation minimises the risk of injury.</li> <li>- Develop and implement clear standard operating procedures (SOPs) for machine setup and operation, ensuring that all employees follow the same process to minimise risk.</li> <li>- Install guards and barriers around pinch points and moving parts of the machine to prevent inadvertent contact with these hazardous areas during operation.</li> <li>- Securely anchor or bolt the Can Closing Machine to the floor, minimising the possibility of tipping or overturning-related accidents.</li> <li>- Clearly mark and label all machine controls and emergency stops, making it easier for operators to quickly and safely shut down the machine if necessary.</li> <li>- Regularly maintain and service the Can Closing Machine, focusing on components such as belts, chains and gears. Proper maintenance helps ensure the machine operates safely and as intended, reducing the potential for unexpected hazards.</li> <li>- Implement a safe working space around the Can Closing Machine free from obstructions and clutter, providing ample room for operators to move about and perform their duties.</li> <li>- Encourage open communication between machine operators and supervisors to promptly report any equipment malfunctions or concerns that may pose a hazard to employee health and safety.</li> <li>- Continuously review and assess the effectiveness of implemented control measures, updating SOPs and training materials as needed to drive continuous improvement in workplace safety.</li> </ul> |               |                    |
| 3. Can loading      | Crushing injury, Slip and fall risk | 2M           | <ul style="list-style-type: none"> <li>- Provide proper training and ensure all operators are competent in using the can closing machine, as well as understanding potential hazards and safe work procedures.</li> <li>- Install safety guards and barriers around the can closing machine to protect workers from accidentally getting caught or crushed within the mechanisms.</li> <li>- Ensure that the floor area surrounding the machine is clean and free of any spillages, debris, or other obstacles that may cause slip and fall risks.</li> <li>- Inspect the working area regularly and maintain good housekeeping practices to minimise hazards and keep the environment safe for everyone.</li> <li>- Place non-slip mats or flooring around the machine to increase traction and reduce the risk of slips and falls due to wet or slippery surfaces.</li> <li>- Implement a lockout/tagout procedure for when maintenance or repairs are needed on the can closing machine, ensuring that the equipment is properly shut down and secured to prevent accidental start-up and potential injury.</li> </ul>  | 1L            |                    |

likelihood of malfunctions that could cause accidents.

- Enforce a strict policy requiring workers to wear appropriate Personal Protective Equipment (PPE) such as safety footwear, gloves, and eye protection necessary during operation, maintenance, and cleaning tasks.
- Establish a clear communication system between workers to alert about any potential hazards or if assistance is needed in operating the machine safely.
- Provide easily accessible and visible emergency stop buttons on the machine, allowing for immediate shut down in case of an emergency.
- Limit access to the can closing machine area to authorized and trained personnel only, ensuring proper supervision and control over who is operating the machine.
- Implement a buddy system, where workers check in with each other before operating the can closing machine and promptly address any issues that arise.

Conduct regular safety audits and risk assessments for the can closing machine, reviewing control measures and continually updating them as needed to maintain a high level of protection for workers operating the can closing machine.

| JOB STEP            | POTENTIAL HAZARDS              | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|---------------------|--------------------------------|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE         | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL RISK | NAME OF PERSON     |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
|                     |                                |              | [Redacted]   |               |                    |
| 5. Quality control  | Repetitive motions, Eye strain | 2M           | [Redacted]<br>[Redacted]<br>[Redacted]<br>[Redacted]<br>[Redacted]     | 1L            |                    |

| JOB STEP            | POTENTIAL HAZARDS               | IR           | CONTROL MEASURES  | RR            | RESPONSIBLE PERSON |
|---------------------|---------------------------------|--------------|---|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE          | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL RISK | NAME OF PERSON     |
|                     |                                 |              | <div></div> <div></div> <div></div> <div></div> <div></div>             |               |                    |
| 6. Can offloading   | Spill hazard, Crushing injuries | 3H           | <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> | 1L            |                    |



| JOB STEP               | POTENTIAL HAZARDS               | IR           | CONTROL MEASURES  | RR            | RESPONSIBLE PERSON |
|------------------------|---------------------------------|--------------|---|---------------|--------------------|
| SPECIFIC WORK STEPS    | HAZARDS THAT MAY ARISE          | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS                          | RESIDUAL RISK | NAME OF PERSON     |
|                        |                                 |              | <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> |               |                    |
| 7. Machine maintenance | Entanglement, Chemical exposure | 3H           | <div></div> <div></div> <div></div>   | 2M            |                    |

| JOB STEP            | POTENTIAL HAZARDS                   | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|---------------------|-------------------------------------|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE              | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL RISK | NAME OF PERSON     |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
|                     |                                     |              | [REDACTED]   |               |                    |
| 8. Lubrication      | Slip and fall risk, Skin irritation | 2M           |  | 1L            |                    |

| JOB STEP               | POTENTIAL HAZARDS                             | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|------------------------|---|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS    | HAZARDS THAT MAY ARISE                        | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL RISK | NAME OF PERSON     |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
|                        |   |              | [REDACTED]   |               |                    |
| 9. Operator changeover | Communication errors, Caught in/ejected parts | 2M           | [REDACTED]   | 1L            |                    |



| JOB STEP            | POTENTIAL HAZARDS                     | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
|---------------------|---------------------------------------|--------------|--|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL RISK | NAME OF PERSON     |
|                     |                                       |              |  |               |                    |
| 10. Troubleshooting | Electrical shock, Inadequate guarding | 3H           |  | 2M            |                    |

[illegible]

| JOB STEP            | POTENTIAL HAZARDS                       | IR           | CONTROL MEASURES  | RR            | RESPONSIBLE PERSON |
|---------------------|---|--------------|---|---------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                  | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL RISK | NAME OF PERSON     |
|                     |   |              | <div></div> <div></div> <div></div> <div></div>   |               |                    |
| 12. Shutdown        | Unplanned restarts, Unauthorised access | 3H           | <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> | 1L            |                    |

| JOB STEP            | POTENTIAL HAZARDS      | IR           | CONTROL MEASURES   | RR            | RESPONSIBLE PERSON |
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| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE | INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL RISK | NAME OF PERSON     |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |

SAMPLE



## EMERGENCY RESPONSE – CALL 000 FOR EMERGENCIES

Ensure to have an Emergency Management Plan in place as well as adequate numbers of trained first aid staff with easy access to fully stocked first aid kits, rescue equipment, material safety data sheets, adequate access to emergency communication equipment and fire-fighting equipment suitable for all classes of fire and ignition sources.

## LEGISLATIVE REFERENCES

RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES IF ANY STATE THAT ARE NOT APPLICABLE

### Queensland & Australian Capital Territory

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011

Legislation QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws>

Codes of Practice QLD: <https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice>

Legislation ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations>

Codes of Practice ACT: <https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice>

### Victoria

Occupational Health and Safety Act 2004

Occupational Health and Safety Regulations 2017

Legislation VIC: <https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations>

Codes of Practice VIC: <https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice>

### New South Wales

Work Health and Safety Act 2011

Work Health and Safety Regulations 2017

Legislation NSW: <https://www.safework.nsw.gov.au/legal-obligations/legislation>

Codes of Practice NSW: <https://www.safework.nsw.gov.au/resource-library/list-codes-of-practice>

### Western Australia

Work Health and Safety Act 2020

Work Health and Safety Regulations 2022

Legislation Western Australia: <https://www.commerce.wa.gov.au/worksafe/legislation>

Codes of Practice WA: <https://www.commerce.wa.gov.au/worksafe/codes-practice>

### Northern Territory

Work Health and Safety (National Uniform Legislation) Act 2011

Work Health and Safety (National Uniform Legislation) Regulations 2011

Legislation NT: <https://worksafe.nt.gov.au/laws-and-compliance/workplace-safety-laws>

Codes of Practice NT: <https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice>

### Safe Work Australia Links

Law and Regulation (All States): <https://www.safeworkaustralia.gov.au/law-and-regulation>

Model Codes of Practice: <https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice>

### Model Codes of Practice

- Managing noise and preventing hearing loss at work
- Confined spaces
- Labelling of workplace hazardous chemicals
- Managing risks of hazardous chemicals in the workplace
- Welding processes
- First aid in the workplace
- Managing the risk of falls at workplaces
- Hazardous manual tasks
- Managing the risk of falls in housing construction
- Managing electrical risks in the workplace
- Demolition work
- Excavation work
- Work health and safety consultation, cooperation and coordination
- Managing the work environment and facilities
- How to manage work health and safety risks
- Managing risks of plant in the workplace
- Construction work

Details of permits, licenses or access required by regulatory bodies (add or delete as required):

- Permits from local council
- Authorisation to commence work
- Any required documents.

## SIGNATORIES OF THE SAFE WORK METHOD STATEMENT

The signed and dated personnel listed below have cooperated in the consultation and development of this Safe Work Method Statement which has been approved by the Person/s Conducting a Business or Undertaking (PCBU). In signing this Safe Work Method Statement each individual acknowledges and confirms that they have read this SWMS in full, having raised any questions for items on this Safe Work Method Statement that require clarification, and confirms that they are competent, skilled and knowledgeable for the task assigned to them. Every person acknowledges that they have received the relevant training and qualifications where required, before carrying out any work contained in this Safe Work Method Statement. By signing this Safe Work Method Statement each individual agrees to work safely, to follow any safe work instructions which are provided, and agrees to use all Personal Protective Equipment where appropriate.

| Worker Name | Position | Signature | Date  | Time | Supervisor |
|-------------|----------|-----------|-------|------|------------|
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |
|             |          |           | Date: |      |            |

## SAFE WORK METHOD STATEMENT MONITORING AND REVIEW

**The SWMS must be reviewed regularly** to make sure it remains effective and must be reviewed (and revised if necessary) if relevant control measures are needed. The review process should be carried out in consultation with workers (including contractors and subcontractors) who may be affected by the operation of the SWMS and their health and safety representatives who represented that work group at the workplace.

When the SWMS has been revised the PCBU must ensure that all persons involved with the work are advised that a revision has been made and how they can access the revised SWMS, including all persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS. All workers that will be involved in the work must be provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.

**The SWMS must be monitored regularly** for the effectiveness of ensuring hazard controls are effective in reducing the risk of incidents, keeping the workplace safe for all personnel. The person responsible for monitoring the effectiveness of the Safe Work Method Statement should employ a multi-faceted approach which includes but is not limited to:

1. Spot Checks.
2. Consultation with workers, contractors and sub-contractors.
3. Internal audits on a continual basis.

An approach of continuous improvement, promptly recording inconsistencies or deficiencies, followed up by immediate corrective action and consultation with all relevant personnel ensures that the PCBU is consistently developing ever-improving systems of safe work principles.

| REVIEW NUMBER | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 | <input type="checkbox"/> 7 |
|---------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| NAME          |                            |                            |                            |                            |                            |                            |                            |
| INITIALS      |                            |                            |                            |                            |                            |                            |                            |
| DATE          |                            |                            |                            |                            |                            |                            |                            |

## SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

This Safe Work Method Statement Review Checklist is to be followed and used upon initial development of the SWMS to help ensure that all steps have been adequately taken before work commences. Think of this document as an internal audit review checklist before commencing work, and may form part of a Toolbox Talk (safety meeting) and may be used as an opportunity for education and training.

| ITEMS WHICH MUST BE INCLUDED IN THE SWMS   | COMPLETED                | TO BE DONE               | COMMENTS |
|--|--------------------------|--------------------------|----------|
| The company details have been entered, including the project name and address.                     | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Names and signatures of all relevant personnel consulted during the development of the SWMS.       | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Name, signature, position and date signed of the person approving the SWMS.                        | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Specific personnel and qualifications, experience is noted in the SWMS.                            | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Provides a step-by-step process of tasks required to carry out the activity or task.               | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Adequate risk assessment of any identified hazards has been completed.                             | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Foreseeable hazards are identified and documented for each step.                                   | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Any hazards listed in any site risk assessments have been added to the SWMS.                       | <input type="checkbox"/> | <input type="checkbox"/> |          |
| SWMS initial risk (IR) column as well as residual risk (RR) columns completed.                     | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Check control measures added to the SWMS are the most effective solutions.                         | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Responsible person is assigned and listed on the SWMS for the implementation of control measures.  | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Permit requirements specified, such as Hot Work, Electrical Work, Work at Heights etc.             | <input type="checkbox"/> | <input type="checkbox"/> |          |
| SWMS identifies plant and equipment to be used.  | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Details of inspection checks required for any equipment listed are noted on the SWMS.              | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Describes any mandatory qualifications, experience, training, skills required to perform the work. | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Applicable personal protective equipment is selected on the SWMS.                                  | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Lists any required permits or licenses.  | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Reflects and documents any legislative references and/or Australian Standards.                     | <input type="checkbox"/> | <input type="checkbox"/> |          |
| Identifies any hazardous substances used with specific control measures in line with any SDS.      | <input type="checkbox"/> | <input type="checkbox"/> |          |
|  |                          |                          |          |
| REVIEWED BY  |                          | DATE REVIEWED            |          |
| SIGNATURE  |                          | DATE COMPLETED           |          |