

| Confined Spaces  | SAFE WORK METHOD ST   | ATEMENT (SWMS)  |                                    |
|--|---|---|------------------------------------|
| TA   | ASK OR ACTIVITY: Confined Space                               | ces   |                                    |
| Business Name: [Company Name]  |   | ABN: [ABN]  | SWMS#                              |
| Business Address: [Company Address]  |   |   |                                    |
| Contact Person:  | Phone: [Phone]  | E fil:  |                                    |
| THIS SAFE WORK METHOD  | STATEMENT IS APPROVED BY                                      | THE POST THE PROJECT  |                                    |
| Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.   | cting a business or undertaking (N 3U) is                     | required to ture at a safe work method s                            | tatement (SWMS) is prepared before |
| Full Name:   |   |   |                                    |
| Signature:   |   | Title:  | Date:                              |
| Details of the person(s) responsible for ensuring implementation, monitoring   | compliance of the SWMS well as review                         | s and modifications of the SWMS.                                    |                                    |
| Full Name:   |   | Title:  | Phone:                             |
| ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS WMS. ST HAVE THE FOLLOWING COMMUNICATED  | N. 1E AND DATED SIGNATURE OF A CO. MUNICATED TO IN THE DEVELO | LL RELEVANT PERSONNEL WHO HAVE B<br>PMENT AND APPROVAL OF THIS SWMS | EEN CONSULTED AND                  |
| Safety meetings or toolbox talks will be sched ed in accordance with agislative requirements to first identify any site hazards, conditions unical those hazards and then to further take steps to either the conditions of the cond | NAME  | SIGNATURE   | DATE                               |
| If an incident or a near miss occurs, all work must steam ately. 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.   |   |   |                                    |



|                            |                               | CL                             | IENT OR PRINCIPAL     | CONTRACTOR D  | DETAILS  |                        |              |  |  |
|----------------------------|-------------------------------|--------------------------------|-----------------------|---|--|------------------------|--------------|--|--|
| Client:                    |                               |                                |                       |   |  | SCOPE OF WORKS         |              |  |  |
| Project Name:              |                               |                                |                       | Provide a detailed description  | n of the specific work being                                   | carried out (otherwise |              |  |  |
| Project Address:           |                               |                                |                       |   | known as cope of works).                                       |                        |              |  |  |
| Project Manager:           |                               |                                |                       |   |  |                        |              |  |  |
| Contact Phone:             |                               |                                |                       |   |  |                        |              |  |  |
| Project Manager Sig        | gnature:                      |                                |                       |   |  |                        |              |  |  |
| Date SWMS supplie          | ed to Project Manager:        |                                |                       |   |  |                        |              |  |  |
|                            |                               | ANY HIGH                       | RISK CON PUCT         | N' JRK BEING  | CARRIED OUT  |                        |              |  |  |
| ☐ involves a risk of a p   | erson falling more than 2 n   | neters.                        |                       | is carried out on or near pressurised gas mains or piping.                                      |  |                        |              |  |  |
| ☐ is carried out on a te   | lecommunication tower.        |                                | M + M                 | is carried out on   | is carried out on or near chemical, fuel or refrigerant lines. |                        |              |  |  |
| ☐ involves demolition of   | of an element of a structure  | that is load-be                |                       | is carried out on or near energised electrical installations or services.                       |  |                        |              |  |  |
| ☐ involves demolition of   | of an element related to the  | e physical integril of a str   | 3                     | is carried out in an area that may have a contaminated or flammable atmosphere.                 |  |                        |              |  |  |
| ☐ involves, or is likely t | o involve, disturbing a es    | stos.                          |                       | involves tilt-up or precast concrete.   |  |                        |              |  |  |
| ☐ involves structural al   | teration or repair that re    | mporal, upp to p               | prevent collapse.     | is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.  |  |                        |              |  |  |
| is carried out in or ne    | ear a confined space.         |                                |                       | ☐ is carried out in an area of a workplace where there is any movement of powered mobile plant. |  |                        |              |  |  |
| ☐ is carried out in/near   | a shaft or trench deeper th   | nan 1.5m or tunnel involvir    | ng use of explosives. | is carried out in areas with artificial extremes of temperature.                                |  |                        |              |  |  |
| is carried out in or ne    | ear water or other liquid tha | at involves a risk of drowning | ng.                   | involves diving v   | vork.  |                        |              |  |  |
|                            |                               | ANY H                          | IGH-RISK MACHINER     | RY OR EQUIPMEN  | NT NEARBY  |                        |              |  |  |
| ☐ Forklift                 | ☐ Crane/s                     | ☐ Hoist/s                      | ☐ Excavator           | ☐ Backhoe/Loader  | Boom Lift  | □ EWP                  | ☐ Genie Lift |  |  |
| ☐ Trencher                 | ☐ Drilling Rig                | Trucks                         | Formwork              | ☐ Bobcat  | ☐ Flammable Gas  | ☐ Fuel                 | ☐ Dozer      |  |  |
| ☐ High Voltage             | ☐ Mulcher                     | ☐ Tilt-up Panels               | Roller                | ☐ Scissor Lift  | ☐ Tractor  | ☐ Other -              |              |  |  |





#### FOOT HAND **HEAD HEARING** SPIRATORY FACE HIGH-VIS **PROTECTIVE** FALL SUN HAIR/JEWELLERY CLOTHING **PROTECTION PROTECTION** PROTECTION **PROTECTION** PROTE DTECTION **PROTECTION** CLOTHING **PROTECTION PROTECTION SECURED**

Select me 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:

- 1. persons involved in the work are advised that a revision has been made and how they can access the revised SWMS;
- 2. 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.
- 3. 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<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL<br>RISK | NAME OF PERSON     |
| 1. Preparation      | Poor ventilation, Incorrect PPE          | 2M              | <ul> <li>Pre-work risk assessment: Conduct a thorough risk assessment prior to commencing any work tasks for the identification of cliential hazards and implementation of necessary control measures.</li> <li>Adequate ventilation: Ensure proper ventile on in the confined space by using fans or blowers to provide fresh air, replacing any exic or has a dous gas build-up.</li> <li>Selecting the correct PPE: Wear appropriate to the protective equipment such as respiratory protection, eye protection, and cloining that is sufficient for the specific task being performed within the confined space.</li> <li>Training and commences Ensignall workers have a prived relevant training on working safely with a confined spaces, including the proper use and maintenance of PPE.</li> <li>Monitoring are stallity: Be calarly monitorial quality within the confined space to ensure and tever of a gen and dangerous gases are maintained within safe limits.</li> <li>Imply the roag and only permit system: Restrict access to the confined space through an any permit system, ensuring that only authorised and trained personnel are allohed to noter.</li> <li>Tablishing encitive communication: Set up a reliable method of communication betwork any rikers inside the confined space and those outside to report any issues or oncern, or ring the working process.</li> <li>Intergency response plan: Develop a comprehensive emergency response plan tanked to the specific confined space, considering potential risks like hazardous gas exposure, fires, or worker injury.</li> <li>Safe work procedures: Adhere to established safe work procedures for all activities within the confined space, taking proper caution to prevent accidents and mitigate hazards.</li> <li>Regular inspection and maintenance: Conduct frequent inspections of the confined space and required equipment to ensure everything is in good working order, addressing any wear or damage immediately to prevent further risks.</li> </ul> | 1L               |                    |
| 2. Entry Access     | Slips and trips, Confined space collapse | 3Н              | <ul> <li>Proper Housekeeping: Ensure the immediate work area is clean and free of debris or obstacles that may cause slips, trips, or falls; maintain good housekeeping practices throughout the project.</li> <li>Pre-assessment and Safety Briefings: Conduct a thorough risk assessment for confined space entry prior to undertaking the task, identifying potential hazards present in the confined space, and hold safety briefings with all workers involved.</li> <li>Adequate Lighting: Install adequate temporary lighting at the entrance to the confined space and any working areas within it, reducing risks associated with limited visibility.</li> <li>Floor Conditions and Surface Evaluation: Inspect the floor surface and conditions inside the confined space for slip and trip hazards, and ensure proper measures are</li> </ul>  | 2M               |                    |



| JOB STEP             | POTENTIAL HAZARDS                          | IR              | CONTROL MEASURES  | RR               | RESPONSIBLE PERSON |
|----------------------|--|-----------------|---|------------------|--------------------|
| SPECIFIC WORK STEPS  | SPECIFIC WORK STEPS HAZARDS THAT MAY ARISE | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS taken to address such hazards (e.g., applying non-slip surfaces, fixing uneven   | RESIDUAL<br>RISK | NAME OF PERSON     |
|                      |  |                 | surfaces).  Proper Personal Protective Equipment (PPE): Proceed workers with appropriate PPE suitable for confined spaces, such as now up footwear, hard hats, and work gloves, ensuring their overall protection dure in the entry access phase.  Access Equipment Inspection and Maintens the: Eproce all access equipment, such as ladders or platforms, is inspected and the united routinely to guarantee structural integrity and safe unage.  Regulated Access to Confine Space: Limit access to convince workers authorised and traing a confine space work, minited in the potential for accidents involving unprepared personnel.  Supporting suctures any varriers, other and adequate supports and barriers around the actors point to prevent the conental collapse of muddy or loose material maintains of the entry and exitroutes.  Two-lay, nommulations: Maintain two-way communication systems between worken inside the coned space and attendants/management outside, allowing quick reporting and resistion of any issues that arise during access and work.  Perge by Remanse Plan: Develop a comprehensive emergency response plan appropriate for confined space incidents, including evacuation procedures, first aid, escue to esc, and site-specific hazards.  Intilation and Monitoring: Continuously monitor confined space air quality and entered proper ventilation to prevent accumulation of hazardous gases or materials that could potentially increase the risk of slips, trips, or confined space collapse.  Confined Space Training and Education: Offer regular training sessions and educational resources for all workers involved in confined space entry, covering hazard identification, emergency procedures, and general safety guidelines, ensuring each worker is well-prepared for accessing and working in confined spaces. |                  |                    |
| 3. Tools & Equipment | Electric shock, Inadequate lighting        | 2M              | <ul> <li>Proper inspection and maintenance: Before beginning work, ensure that all tools and electrical equipment are in good working order, with no signs of damage or wear on cords, plugs, and other components.</li> <li>Use of appropriate PPE: Workers should be equipped with necessary personal protective equipment (PPE), including insulated gloves and safety footwear specifically designed for electrical work.</li> <li>Training and certification: Ensure only trained and certified workers operate electrical equipment in confined spaces, as they possess knowledge of necessary safety precautions.</li> <li>Proper grounding and bonding: Always use tools and equipment with three-pronged plugs to ensure grounding and minimise the risk of electric shock. When necessary, use bonding straps to eliminate static discharge.</li> </ul>   | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS            | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE       | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS   | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                              |                 | - Isolation and lockout/tagout: Implement lockout/tagout procedures to isolate energy sources before working on electrical equipment to prevent accidental energization.   |                  |                    |
|                     |                              |                 | - Adequate lighting: Ensure sufficient illumination is resent within the confined space by utilising intrinsically safe, explosion of lighting equipment. This ensures clear visibility while preventing any accident agnition of flammable gases or chemicals.  |                  |                    |
|                     |                              |                 | - Ventilation: Regularly monitor and maintain to avoid the buildup of hazardour fumes that could extruct visibility or pose health risks to workers.   |                  |                    |
|                     |                              |                 | - GFCI protection: Use a pund to all Circuit Interrupts (GFCIs) on all electrical circuits within the antine acceptance acceptance and the continuous cont |                  |                    |
|                     |                              |                 | - Safe use on tension cord. Use he v-dr extension cords with protective covers and key them are from water access or pathways to minimise tripping hazar and average circuiting.   |                  |                    |
|                     |                              |                 | - Lado s d scan ling: Choose non-conductive ladders and scaffolds made from materia su as fib. lass or wood when working around electrical equipment in order to hinin a the hoof electrocution.   |                  |                    |
|                     |                              |                 | nerge by rest to see plan: Develop and communicate a comprehensive emeting response plan detailing procedures to follow in case of an electrical merge. This plan should include first-aid measures, rescue protocols, and acuation procedures to ensure the safety of all workers in confined spaces.   |                  |                    |
|                     | 5                            |                 |  |                  |                    |
| 4. Air Monitoring   | Incorrect reading, Gas leaks | 2M              |  | 1L               |                    |
|                     |                              |                 |  |                  |                    |
|                     |                              |                 |  |                  |                    |



| JOB STEP             | POTENTIAL HAZARDS               | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|----------------------|---------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS  | HAZARDS THAT MAY ARISE          | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                      |                                 |                 |  |                  |                    |
| 5. Ventilation Setup | Improper setup, Excessive noise | 2M              |  | 1L               |                    |



| JOB STEP                    | POTENTIAL HAZARDS                       | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|-----------------------------|---|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS         | HAZARDS THAT MAY ARISE                  | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                             |   |                 |  |                  |                    |
| 6. Communication<br>Systems | Miscommunication, Equipment malfunction | 3H              |  | 2M               |                    |



| JOB STEP                    | POTENTIAL HAZARDS                  | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|-----------------------------|------------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS         | HAZARDS THAT MAY ARISE             | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                             |                                    |                 |  |                  |                    |
| 7. Performing Work<br>Tasks | Manual handling, Chemical exposure | ЗН              |  | 2M               |                    |



| JOB STEP            | POTENTIAL HAZARDS                                 | IR              | CONTROL MEASURES   | RR                     | RESPONSIBLE PERSON     |
|---------------------|---|-----------------|--|------------------------|------------------------|
| SPECIFIC WORK STEPS | POTENTIAL HAZARDS  HAZARDS THAT MAY ARISE         | IR INITIAL RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RR<br>RESIDUAL<br>RISK | PERSON  NAME OF PERSON |
| 8. Rescue Plan      | Inadequate training, Inefficient rescue equipment | ЗН              |  | 1L                     |                        |



| JOB STEP            | POTENTIAL HAZARDS             | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|-------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE        | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                               |                 |  |                  |                    |
| 9. Housekeeping     | Mould growth, Poor ergonomics | 2M              |  | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS      | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                        |                 |  |                  |                    |
| 10. Egress          | Fatigue, Dizziness     | 2M              |  | 1L               |                    |



| JOB STEP                          | POTENTIAL HAZARDS                   | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|-----------------------------------|-------------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS               | HAZARDS THAT MAY ARISE              | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                                   |                                     |                 |  |                  |                    |
| 11. Decontamination<br>& Disposal | Chemical contact, Improper disposal | 2M              |  | 1L               |                    |



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



| JOB STEP                                | POTENTIAL HAZARDS                        | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---|--|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS                     | HAZARDS THAT MAY ARISE                   | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
| 12. Training &<br>Competency Evaluation | Insufficient skillset, Untrained workers | 31              |  | 1L               |                    |



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





#### **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. ANY STATE OF AT 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: <a href="https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice">https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice</a> Legislation ACT: <a href="https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations">https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations</a>

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

Codes of Practice NSW: https://www.safework.nsw.gov.au/resource-library/lis

#### **Northern Territory**

Work Health and Safety (National Uniform Legislation) Act 2011

Work Health and Safety (National Uniform Legislation) Regulation 2011

Legislation NT: https://worksafe.nt.gov.au/laws-and-compliance/wo\_place-

Codes of Practice NT: https://worksafe.nt.gov.au/5

#### South Australia

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Legislation for SA: https://www.safework.sa.gov.au/resources/le\_lation

Codes of Practice for SA: https://www.safework.sa.gov.au/work\_aces/codes-of-practice#COPs

#### Tasmania

Work Health and Safety Act 2012

Work Health and Safety (Transitional and Consequential Provisions) Act 2012

Work Health and Safety Regulations 2012

Work Health and Safety (Transitional) Regulations 2012

Legislation for TAS: https://worksafe.tas.gov.au/topics/laws-and-compliance/acts-and-regulations

Codes of Practice for TAS: https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice

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.

#### Victoria

Occupational Health at Safety Act 34

Occupational Health and Infety gulations 2017

Legis on VIC: https://www.safe.vic.gov.au/occupational-health-and-safety-act-and-

gulat

des on actice VIC attps://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice

#### Western Australia

Work Health and Safety Act 2020

Work Health and Safety Regulations 2022

Legislation Western Australia: <a href="https://www.commerce.wa.gov.au/worksafe/legislation">https://www.commerce.wa.gov.au/worksafe/legislation</a> Codes of Practice WA: <a href="https://www.commerce.wa.gov.au/worksafe/codes-practice">https://www.commerce.wa.gov.au/worksafe/codes-practice</a>

#### 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



#### 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.

| Tollow any sale work instructions which are provided, and agrees to use an reisonal riotective Equipment where appropriate.   |       |            |                |   |                            |            |          |  |
|---|-------|------------|----------------|---|----------------------------|------------|----------|--|
| Worker Name   | Pos   | sition     | Signature      | Date  | Time                       | Sup        | pervisor |  |
|   |       |            |                | Date:   |                            |            |          |  |
|   |       |            |                | _   |                            |            |          |  |
|   |       |            | Date           |   |                            |            |          |  |
|   |       |            | l te:          |   |                            |            |          |  |
|   |       |            | AV             | Date:   |                            |            |          |  |
|   |       |            |                | Date:   |                            |            |          |  |
|   |       |            |                | Date:   |                            |            |          |  |
|   | Date: |            |                |   |                            |            |          |  |
|   |       | SAF WO A S | THUD STATEMENT | MONITORING AND  | REVIEW                     |            |          |  |
| The SWMS must be reviewed regularly to the ke sure it remains effective and must be reviewed (and revised if necessary) if relevant control measurements are subcontracted by process should be carried out in consultation with workers (including contractors are subcontracted)) who may be affected by the operation of the SWMS and their health and safety representatives who researched 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 |       |            |                | 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 |                            |            |          |  |
| them to understand and imp  |       |            |                |   | tently developing ever-imp | <b>3</b> , | · '      |  |
| REVIEW NUMBER   | 1     | □ 2        | □ 3            | □ 4   | □ 5                        | □ 6        | □ 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.                  |           |            |          |
| Names and signatures of all relevant personnel consulted during the development of the SWMS.    |           | P P        |          |
| Name, signature, position and date signed of the person approving the SWMS.                     |           |            |          |
| Specific personnel and qualifications, experience is noted in the SWMS.                         | P         |            |          |
| Provides a step-by-step process of tasks required to carry out the activity or task.            |           |            |          |
| Adequate risk assessment of any identified hazards has been completed.                          |           |            |          |
| Foreseeable hazards are identified and documented for each step.                                |           |            |          |
| Any hazards listed in any site risk assessments have been added to the SWh                      |           |            |          |
| SWMS initial risk (IR) column as well as residual risk (RR) columns completed.                  |           |            |          |
| Check control measures added to the SWMS are the most effecting so tions.                       |           |            |          |
| Responsible person is assigned and listed on the SWMS for the imperent of continue assures.     |           |            |          |
| Permit requirements specified, such as Hot Work, Veralt Heights etc.                            |           |            |          |
| SWMS identifies plant and equipment to be u d.  |           |            |          |
| Details of inspection checks required for any equipment listed are noted on the SWMS.           |           |            |          |
| Describes any mandatory qualifications, experience raining skills required to perform the work. |           |            |          |
| Applicable personal protective equipment is selected on the SWMS.                               |           |            |          |
| Lists any required permits or licenses.   |           |            |          |
| Reflects and documents any legislative references and/or Australian Standards.                  |           |            |          |
| dentifies any hazardous substances used with specific control measures in line with any SDS.    |           |            |          |
|   |           |            |          |
| REVIEWED BY   | DATE R    | EVIEWED    |          |
| SIGNATURE   | DATE CO   | MPLETED    |          |