

**Electric Welder | SAFE WORK METHOD STATEMENT (SWMS)**

**TASK OR ACTIVITY: Electric Welder**

|                                     |                |            |       |
|-------------------------------------|----------------|------------|-------|
| 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 PROJECT MANAGER 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**

|  | NAME | SIGNATURE | DATE |
|--|------|-----------|------|
| Safety meetings or toolbox talks will be scheduled in accordance with legislative requirements to first identify any site hazards, to conduct a risk assessment of those hazards and then to further take steps to either eliminate or control each hazard.  |      |           |      |
| 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>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 supports 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      | 4A ACUTE    | DO NOT PROCEED                    | <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.<br><b>PPE</b> |

**Notes on Hierarchy of Controls:** 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/FACE 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"/> |

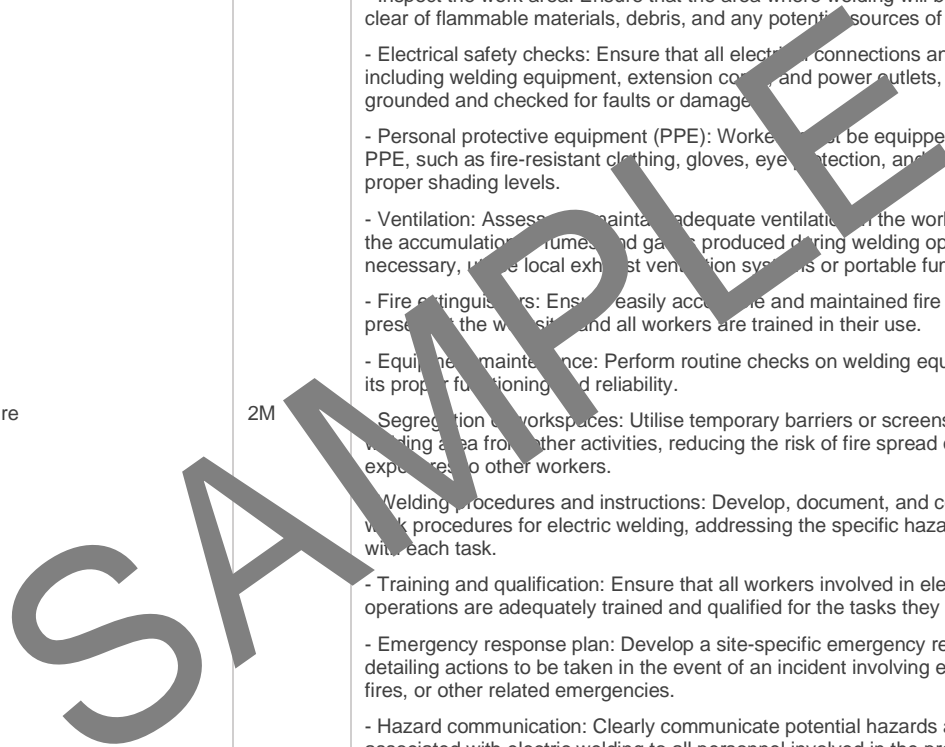
Select the appropriate PPE above suitable for the equipment used or the job task being performed (if applicable).

**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.

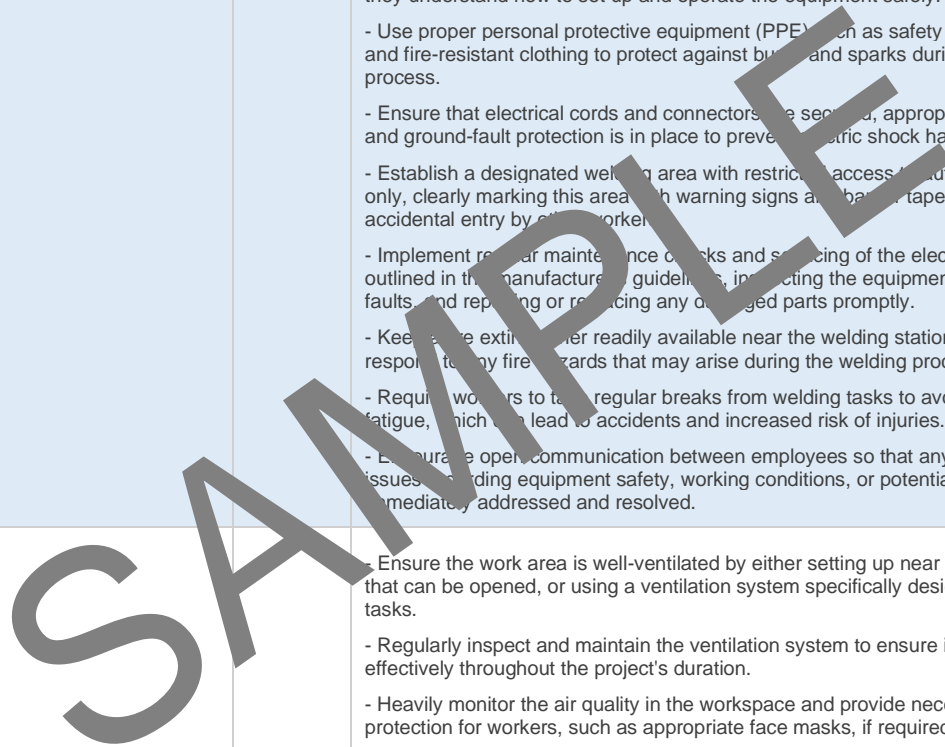
When a SWMS has been revised, the person conducting a business or undertaking must ensure all:

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 RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL RISK | NAME OF PERSON     |
| 1. Preparation          | Electric shock, fire       | 2M           | <ul style="list-style-type: none"> <li>- Inspect the work area: Ensure that the area where welding will be carried out is clear of flammable materials, debris, and any potential sources of ignition.</li> <li>- Electrical safety checks: Ensure that all electrical connections and components, including welding equipment, extension cords, and power outlets, are properly grounded and checked for faults or damage.</li> <li>- Personal protective equipment (PPE): Workers must be equipped with appropriate PPE, such as fire-resistant clothing, gloves, eye protection, and welding helmets with proper shading levels.</li> <li>- Ventilation: Assess and maintain adequate ventilation in the workspace to minimise the accumulation of fumes and gases produced during welding operations. If necessary, utilise local exhaust ventilation systems or portable fume extractors.</li> <li>- Fire extinguishers: Ensure easily accessible and maintained fire extinguishers are present at the worksite and all workers are trained in their use.</li> <li>- Equipment maintenance: Perform routine checks on welding equipment to ensure its proper functioning and reliability.</li> <li>- Segregation of workspaces: Utilise temporary barriers or screens to separate the welding area from other activities, reducing the risk of fire spread or inadvertent exposures to other workers.</li> <li>- Welding procedures and instructions: Develop, document, and communicate clear work procedures for electric welding, addressing the specific hazards associated with each task.</li> <li>- Training and qualification: Ensure that all workers involved in electric welding operations are adequately trained and qualified for the tasks they are performing.</li> <li>- Emergency response plan: Develop a site-specific emergency response plan detailing actions to be taken in the event of an incident involving electric shocks, fires, or other related emergencies.</li> <li>- Hazard communication: Clearly communicate potential hazards and risks associated with electric welding to all personnel involved in the project, including subcontractors and visitors to the worksite.</li> <li>- Continuous monitoring and supervision: Supervisors and safety officers should closely monitor electric welding activities to identify potential hazards and ensure preventative control measures are followed consistently by all workers.</li> </ul> | 1L            |                    |
| 2. Equipment inspection | Tripping and falling, burn | 2M           | <ul style="list-style-type: none"> <li>- Ensure that a thorough visual inspection of the welding equipment is conducted before use, checking for any signs of wear or damage to cables, connections, and other components.</li> <li>- Keep the worksite clean and free from clutter, debris, or loose items that could cause tripping hazards in the area where welding will take place.</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>- Provide appropriate training for all employees using the electric welder to ensure they understand how to set up and operate the equipment safely.</li> <li>- Use proper personal protective equipment (PPE) such as safety gloves, goggles, and fire-resistant clothing to protect against burns and sparks during the welding process.</li> <li>- Ensure that electrical cords and connectors are secured, appropriately insulated, and ground-fault protection is in place to prevent electric shock hazards.</li> <li>- Establish a designated welding area with restricted access for authorised personnel only, clearly marking this area with warning signs and barrier tape to prevent accidental entry by other workers.</li> <li>- Implement regular maintenance checks and servicing of the electric welder as outlined in the manufacturer's guidelines, inspecting the equipment for potential faults, and repairing or replacing any damaged parts promptly.</li> <li>- Keep fire extinguisher readily available near the welding station to quickly respond to any fire hazards that may arise during the welding process.</li> <li>- Require workers to take regular breaks from welding tasks to avoid issues with fatigue, which can lead to accidents and increased risk of injuries.</li> <li>- Encourage open communication between employees so that any concerns or issues regarding equipment safety, working conditions, or potential hazards can be immediately addressed and resolved.</li> </ul> |               |                    |
| 3. Setting up work area | Poor ventilation, inadequate workspace | 2M           | <ul style="list-style-type: none"> <li>- Ensure the work area is well-ventilated by either setting up near windows or doors that can be opened, or using a ventilation system specifically designed for welding tasks.</li> <li>- Regularly inspect and maintain the ventilation system to ensure it is functioning effectively throughout the project's duration.</li> <li>- Heavily monitor the air quality in the workspace and provide necessary respiratory protection for workers, such as appropriate face masks, if required.</li> <li>- Designate a buffer zone around the welding area to minimise the risk of accidental contact with the welding arc or other hazards.</li> <li>- Allocate adequate space for workers, materials, and equipment so that proper clearances are maintained around the welding area, allowing for safe movement and storage of materials.</li> <li>- Implement proper housekeeping protocols to keep the work area free from clutter, debris, and tripping hazards.</li> <li>- Clearly mark designated workspaces for each task, providing walkways and separating each area with barriers, tape, or signage.</li> <li>- Require all workers to wear appropriate PPE, such as safety glasses, welding gloves, protective clothing, and closed-toe shoes, while in the welding area.</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>- Educate workers on proper lifting techniques and the use of mechanical aids when handling heavy or bulky materials/equipment.</li> <li>- Provide ongoing training and refresher courses to ensure all workers understand and adhere to established safety procedures and guidelines.</li> <li>- Ensure all electrical equipment used in the welding process is properly grounded and protected from moisture to prevent shock or electrocution.</li> <li>- Establish a routine inspection schedule to identify potential hazards in the work area and address them promptly.</li> <li>- Create an emergency action plan and post it in a visible location within the work area to ensure all workers know what to do in case of an incident or hazard.</li> <li>- Maintain open lines of communication between workers and management to encourage reporting of any identified hazards or unsafe practices, promoting a culture of workplace safety.</li> </ul> |               |                    |
| 4. Connecting power supply | Electric shock, equipment malfunction | 3H           | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>  | 1L            |                    |

SAMPLE

| 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]   |               |                    |
| 5. Welder setup     | Incorrect settings, damaged equipment | 3H           | [REDACTED]   | 1L            |                    |

SAMPLE

| 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]   |               |                    |
| 6. Material preparation | Cuts, eye injury       | 2M           | [REDACTED]   | 1L            |                    |
|                         |                        |              | [REDACTED]   |               |                    |
|                         |                        |              | [REDACTED]   |               |                    |
|                         |                        |              | [REDACTED]   |               |                    |
|                         |                        |              | [REDACTED]   |               |                    |
|                         |                        |              | [REDACTED]   |               |                    |

SAMPLE



| 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]   |               |                    |
| 7. Dry run          | Incorrect weld placement, poor technique | 1L           | [REDACTED]   | 1L            |                    |

SAMPLE

| 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. Performing weld  | Ultraviolet radiation, splatter | 3H           | [REDACTED]   | 2M            |                    |
|                     |                                 |              | [REDACTED]   |               |                    |
|                     |                                 |              | [REDACTED]   |               |                    |

SAMPLE

| 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]   |               |                    |
|                     |                                   |              | [REDACTED]   |               |                    |
|                     |                                   |              | [REDACTED]   |               |                    |
|                     |                                   |              | [REDACTED]   |               |                    |
| 9. Finishing weld   | Grinding hazards, dust inhalation | 2M           | [REDACTED]   | 1L            |                    |

SAMPLE

| 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]   |               |                    |
| 10. Inspecting weld | Hot surfaces, poor visibility | 2M           | [REDACTED]   | 1L            |                    |

SAMPLE

| 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]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |

SAMPLE

| 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]   |               |                    |
| 11. Cleaning workspace | Trip and fall hazards, chemical exposure |              | [REDACTED]   | 1L            |                    |
| 12. Storing equipment  | Improper storage, unauthorised access    | 2M           | [REDACTED]   | 1L            |                    |

SAMPLE

| 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]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |
|                     |                        |              | [REDACTED]   |               |                    |

SAMPLE

| 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     |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |

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 FOR ANY STATE THAT ARE NOT APPLICABLE

|   |  |
|---|--|
| <p><b>Queensland &amp; Australian Capital Territory</b><br/>                 Work Health and Safety Act 2011<br/>                 Work Health and Safety Regulations 2011<br/>                 Legislation QLD: <a href="https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws">https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws</a><br/>                 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><br/>                 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><br/>                 Codes of Practice ACT: <a href="https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice">https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</a></p> | <p><b>Victoria</b><br/>                 Occupational Health and Safety Act 2004<br/>                 Occupational Health and Safety Regulations 2017<br/>                 Legislation VIC: <a href="https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations">https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations</a><br/>                 Codes of Practice VIC: <a href="https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice">https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice</a></p>   |
| <p><b>New South Wales</b><br/>                 Work Health and Safety Act 2011<br/>                 Work Health and Safety Regulations 2017<br/>                 Legislation NSW: <a href="https://www.safework.nsw.gov.au/legal-obligations/legislation">https://www.safework.nsw.gov.au/legal-obligations/legislation</a><br/>                 Codes of Practice NSW: <a href="https://www.safework.nsw.gov.au/resource-library/list-of-codes-of-practice">https://www.safework.nsw.gov.au/resource-library/list-of-codes-of-practice</a></p>   | <p><b>Western Australia</b><br/>                 Work Health and Safety Act 2020<br/>                 Work Health and Safety Regulations 2022<br/>                 Legislation Western Australia: <a href="https://www.commerce.wa.gov.au/worksafe/legislation">https://www.commerce.wa.gov.au/worksafe/legislation</a><br/>                 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></p>   |
| <p><b>Northern Territory</b><br/>                 Work Health and Safety (National Uniform Legislation) Act 2011<br/>                 Work Health and Safety (National Uniform Legislation) Regulations 2011<br/>                 Legislation NT: <a href="https://worksafe.nt.gov.au/laws-and-compliance/workplaces-and-laws">https://worksafe.nt.gov.au/laws-and-compliance/workplaces-and-laws</a><br/>                 Codes of Practice NT: <a href="https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice">https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice</a></p>  | <p><b>Safe Work Australia Links</b><br/>                 Law and Regulation (All States): <a href="https://www.safeworkaustralia.gov.au/law-and-regulation">https://www.safeworkaustralia.gov.au/law-and-regulation</a><br/>                 Model Codes of Practice: <a href="https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice">https://www.safeworkaustralia.gov.au/resources-publications/model-codes-of-practice</a></p>  |
| <p><b>South Australia</b><br/>                 Work Health and Safety Act 2012 (SA)<br/>                 Work Health and Safety Regulations 2012 (SA)<br/>                 Legislation for SA: <a href="https://www.safework.sa.gov.au/resources/legislation">https://www.safework.sa.gov.au/resources/legislation</a><br/>                 Codes of Practice for SA: <a href="https://www.safework.sa.gov.au/workplaces/codes-of-practice#COPs">https://www.safework.sa.gov.au/workplaces/codes-of-practice#COPs</a></p>   | <p><b>Model Codes of Practice</b></p> <ul style="list-style-type: none"> <li>- Managing noise and preventing hearing loss at work</li> <li>- Confined spaces</li> <li>- Labelling of workplace hazardous chemicals</li> <li>- Managing risks of hazardous chemicals in the workplace</li> <li>- Welding processes</li> <li>- First aid in the workplace</li> <li>- Managing the risk of falls at workplaces</li> <li>- Hazardous manual tasks</li> <li>- Managing the risk of falls in housing construction</li> <li>- Managing electrical risks in the workplace</li> <li>- Demolition work</li> <li>- Excavation work</li> <li>- Work health and safety consultation, cooperation and coordination</li> <li>- Managing the work environment and facilities</li> <li>- How to manage work health and safety risks</li> <li>- Managing risks of plant in the workplace</li> <li>- Construction work</li> </ul> |
| <p>Details of permits, licenses or access required by regulatory bodies (add or delete as required):</p> <ul style="list-style-type: none"> <li>- Permits from local council</li> <li>- Authorisation to commence work</li> <li>- Any required documents.</li> </ul>  |  |

**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"/> |          |
| <b>REVIEWED BY</b>   |                          | <b>DATE REVIEWED</b>     |          |
| <b>SIGNATURE</b>   |                          | <b>DATE COMPLETED</b>    |          |