

| Hydraulic Iron Worke   | er   SAFE WORK METHOD                     | STATEMENT (SWMS)   |                                    |
|--|---|--|------------------------------------|
| TASI   | K OR ACTIVITY: Hydraulic Iron W           | orker or the state of the state |                                    |
| Business Name: [Company Name]  |   | ABN: [ABN]   | SWMS#                              |
| Business Address: [Company Address]  |   |  |                                    |
| Contact Person:  | Phone: [Phone]                            | E 111:   |                                    |
| 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 (r 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  |   | LL RELEVANT PERSONNEL WHO HAVE B<br>PMENT AND APPROVAL OF THIS SWMS  | EEN CONSULTED AND                  |
| Safety meetings or toolbox talks will be scheded 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 conditions are or conditions.   | NAME                                      | SIGNATURE  | DATE                               |
| If an incident or a near miss occurs, all work must standardly. 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.        |                                | $H \cap H$            | 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  | 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   | f 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      | Slips, trips and falls, Inadequate maintenance of equipment        | 2M              | Clearly mark walkways, designated work areas, and storage locations to prevent clutter and promote a well-organised workspace that induces the risk of slips, trips, and falls.  Perform regular housekeeping measures can as sweeping or mopping away any debris, spills, or accumulated material that is all decons a tripping hazard.  Conduct routine visual checks and maintenance moses, fittings, and other hydraulic components prior to commencing open, ans with the an Worker to identify any leaks, wear, or declage that could response in malf extons or accidents.  Regularly inspect all and rigg, a devices, and equation involved in the operation for any signs of man or or age, in facing or repatring them as necessary to ensure proper functionally and sally.  Ensure all weaters operang the Hyorona fron Worker are trained and competent in its properage of the roles.  Utilises upportate a well as educated about relevant WHS regulations and stands to cerating occedures for their roles.  Utilises upportate spage, barriers, or cones around the work area if required, effective roles, atting a space and alerting pedestrians and other workers to stential azard in the vicinity.  English partiate spage, barriers, or cones around the work area if required, effective roles, atting a space and alerting pedestrians and other workers to stential azard in the vicinity.  English partials brookear and floor mats or strips to reduce slip-related incidents, articular in wet or slippery environments.  Candate pre-operational checks for the Hydraulic Iron Worker, confirming proper peal ormance of safety mechanisms, emergency stops, and guarding to minimise accidental injury to operators or nearby workers.  Encourage open communication channels, allowing workers to report hazardous conditions, near misses, or concerns regarding equipment and processes without fear of retribution or blame.  Create and maintain procedural documentation specific to the task, outlining steps, risks, control measures, and responsibilities, ensuring all workers are | 1L               |                    |
| 2. Job setup        | Manual handling injuries, Crushing hazard from hydraulic equipment | 2M              | <ul> <li>Conduct a pre-operational safety briefing to ensure all workers are aware of the hydraulic iron worker's operation, potential hazards, and control measures.</li> <li>Provide manual handling training for workers, emphasising proper lifting techniques and body mechanics to minimise the risk of injuries during job setup.</li> <li>Establish designated exclusion zones around the hydraulic iron worker to prevent workers from getting too close to the equipment and potentially being crushed.</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     |
|                         |  |   | - Ensure workers receive training on the proper use of hydraulic equipment, including its inspection and maintenance procedures, to avoid unexpected failures leading to crushing hazards.   |                  |                    |
|                         |  |   | - Implement a two-person setup rule, where or corker operates the equipment while another monitors for potential hazard and provides assistance if needed.   |                  |                    |
|                         |  |   | - Utilise mechanical aids or lifting equipment, such as salifts or hoists, to transport and position heavy or awkward components, in any granual handling risks.   |                  |                    |
|                         |  |   | - Encourage frequent breaks and rotation of tasks along works to avoid repetitive motion injuries and muscle stream caused by prolong the stream all handling activities.  |                  |                    |
|                         |  |   | - Inspect and main and the second sec |                  |                    |
|                         |  |   | - Require works to wear propriate and protective equipment (PPE) such as glove teel-to cots a high-visibility clothing to minimise the risk of injuries in the experimental of the second secon |                  |                    |
|                         |  | - Develop a Limple ont a clear emergency response plan, ensuring workers know how to spot appropriately in case of accidents or incidents involving the hydraulic from workers. |  |                  |                    |
|                         | •  | 1   | - Catinut Isly monitor and review the effectiveness of implemented control measure adapting and updating the Safe Work Method Statement (SWMS) as eded to an aintain optimal workplace safety.   |                  |                    |
|                         |  |   | Regular equipment inspection: Conduct routine inspections of the hydraulic iron worker to ensure that all electric components and safety features are intact and functioning correctly.  |                  |                    |
|                         |  |   | - Maintain electrical components: Ensure that the electrical wiring, switches, and other components of the hydraulic iron worker are in good condition, with no signs of wear or damage.   |                  |                    |
|                         |  |   | - Disconnect power supply: Unplug or disconnect the hydraulic iron worker from the electrical supply before performing any maintenance, repair, or inspection activities.  |                  |                    |
| 3. Equipment inspection | Electric shock, Incorrect use of Personal Protective Equipment | 2M  | - Proper grounding: Make sure that the hydraulic iron worker is properly grounded to prevent electrical shock hazards.   | 1L               |                    |
|                         |  |   | - Fused equipment: Verify that the hydraulic iron worker is equipped with proper fuses or circuit breakers to avoid electrical issues or accidents.  |                  |                    |
|                         |  |   | - Training and supervision: Provide adequate training to workers on correct usage, inspection, and adherence to safety protocols related to the hydraulic iron worker. Ensure proper supervision to avoid incorrect use of Personal Protective Equipment (PPE).  |                  |                    |
|                         |  |   | - Use of PPE: Ensure all workers operating the hydraulic iron worker wear appropriate PPE, including gloves, safety glasses, face shields, and hearing protection when necessary.  |                  |                    |



| 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     |
|                      |   |                 | - Correct sizing and fitting of PPE: Confirm that the PPE provided to workers fits correctly and comfortably to ensure maximum protection against potential hazards during operation.  |                  |                    |
|                      |   |                 | - Clear signage and hazard labels: Place visible arning signs near the hydraulic iron worker to remind workers about potent azards and the importance of using PPE while working.  |                  |                    |
|                      |   |                 | - Emergency procedures: Establish clear emen response guidelines for workers to follow if an incident involving electrical bock or incompact PPE usage occurs. This should include in aid procedures, conact information for emergency services, and site evacuation procedures. |                  |                    |
|                      |   |                 | - Incorporate edition in the country out to out procedures: Implement a lock-out/tag-out system to epice that the requirement of worker into accidentally powered on while being service or inspected.   |                  |                    |
|                      |   |                 | - Pre scheck Fr arage workers to perform a thorough pre-start check of the hydraction won a inspecting for any visible damage or issues related to equipment appectice and potential hazards.  |                  |                    |
| 4. Loading materials | Falling objects, Faulty lifting numents | 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. Machine operation | Entanglement with moving parts, Noise exposure | ЗН              |  | 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     |
|                       |   |                 |  |                  |                    |
| 6. Material alignment | Struck by debris, Misalignment leading to material damage | 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     |
|                     |                               |                 |  |                  |                    |
| 7. Cutting/Shaping  | Sharp edges, Flying particles | 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     |
|                     |   |                 |  |                  |                    |
| 8. Quality checks   | Exposure to hazardous substances,<br>Contact with hot surfaces or materials | 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     |
|                        |   |                 |  |                  |                    |
| 9. Offloading/Stacking | Collapse of unstable stacks, Collisions with other workers or equipment | 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     |
|                     |   |                 |  |                  |                    |
| 10. Housekeeping    | Poor housekeeping, Accumulation of debris | 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. Maintenance     | Incorrect lockout/tagout procedures, Release of stored energy | 3H              | SPECIFIC MEASURES TO BE POT IN PLACE TO ELIMINATE OR CONTROL. THE RISKS | 2M               | 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. Tool Storage    | Unauthorised access actors, Improstorage of hazardous materials | 2M              |  | 1L               |                    |



| JOB STEP           | POTENTIAL HAZARDS      | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|--------------------|------------------------|-----------------|--|------------------|--------------------|
| PECIFIC 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

 $\textbf{Legislation QLD:} \ \underline{\textbf{https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws}$ 

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/legislatide

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 201

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: <a href="https://www.safework.sa.gov.au/resources/legislation">https://www.safework.sa.gov.au/resources/legislation</a>

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 all Safety Act 34

Occupational Health and Infety gulations 2017

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

<u>qulat.</u>

des on actice VI autros://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: https://www.commerce.wa.gov.au/worksafe/legislation

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



### 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 all 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 review revised if necessary) if relevations consultation with workers (in of the SWMS and their healt workplace.  When the SWMS has been an advised that a revision has been who will need to change a way that will enable them the will be involved in the work in the survey. | ant control measu cluding contractors and subth and safety representatives revised the PCBU must ensive made and how they call ork procedure or system as to implement their duties contract be provided with the reliable contract. | contract s) who may be aff s who re esented that work are that all persons involved in access the revised SWMS a result of the review are accessistently with the revised SN | hould be carried out in ected by the operation group at the  with the work are including all persons this do the changes in MMS. All workers that | effective in reducing the person responsible for remploy a multi-faceted and the second secon | with workers, contractors as on a continual basis.  ous improvement, promptly te corrective action and continuation and conti | he workplace safe for a sof the Safe Work Met ut is not limited to: and sub-contractors.  recording inconsistent insultation with all relevant | all personnel. The hod Statement should statement should size or deficiencies, ant 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    |          |