

Lathe Metal Cutting	SAFE WORK METHOD S	TATEMENT (SWMS)	
TA	SK OR ACTIVITY: Lathe Metal Cu	itting	
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 PL OF THE PROJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conducte proposed work starts.	cting a business or undertaking (k BU) is	required to ture out a safe work method s	statement (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	vs 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	ALL RELEVANT PERSONNEL WHO HAVE B OPMENT AND APPROVAL OF THIS SWMS	EEN CONSULTED AND
Safety meetings or toolbox talks will be sched ed in accordance with regislative requirements to first identify any site hazards, condition of unical those hazards and then to further take steps to either the sched or control eat chazard.	NAME	SIGNATURE	DATE
If an incident or a near miss occurs, all work must study unately. 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						
Project Name:					Provide a detailed description of the specific work being carried out (otherwis						
Project Address:				ŀ	known as cope of works).						
Project Manager	:										
Contact Phone:											
Project Manager	Signature:										
Date SWMS sup	plied to Project Manag	er:									
ANY HIGH-RISK CON PUCL NO JRK BEING CARRIED OUT											
involves a risk of	a person falling more than	2 meters.		is carried out on of	near pressurised gas main	s or piping.					
is carried out on	a telecommunication tower			☐ is carried out on or near chemical, fuel or refrigerant lines.							
involves demoliti	on of an element of a struct	ure that is load-be		is carried out on or near energised electrical installations or services.							
involves demoliti	on of an element related to	the physical integrit of a st	ir e,	☐ is carried out in an area that may have a contaminated or flammable atmosphere.							
involves, or is like	ely to involve, disturbing a	estos.		involves tilt-up or precast concrete.							
involves structura	al alteration or repair that re	mporan upp to	prevent collapse.	is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.							
☐ is carried out in c	or near 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/r	near a shaft or trench deepe	er than 1.5m or tunnel involv	ving use of explosives.	is carried out in areas with artificial extremes of temperature.							
☐ is carried out in c	or near water or other liquid	that involves a risk of drown	ning.	involves diving wo	rk.						
		ANY	HIGH-RISK MACHINE	RY OR EQUIPMENT	NEARBY						
Forklift	Crane/s	☐ Hoist/s	Excavator	Backhoe/Loader	Boom Lift	EWP	Genie Lift				
Trencher	Drilling Rig	Trucks		Bobcat	E Flammable Gas	Fuel	Dozer				
High Voltage	Mulcher	Tilt-up Panels	Roller	Scissor Lift	Tractor	Other -					







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	Poor housekeeping, Inadequate trainik		<ul> <li>Implement a thorough housekeeping protocol: Ensure the workplace is cleaned regularly and properly maintained to prevent clutter of build-up of dirt or debris. This includes establishing designated waste disc our areas, frequently emptying bins, and cleaning the floors and work surfaceatily.</li> <li>Provide comprehensive safety training for the employed or ensure all workers operating or working near lathe machines have ended adequate training on safe machine operation, hazard awareness, and risk engation strategies. This includes on-the-job training and refree to courses as needs.</li> <li>Establish clear safety procedure: Develop comprehence safety procedures that meet legislative statement on drivere these are undeatood by all employees. Procedures show include notice for emergence situations, equipment maintenance of the use to bersons protein or equipment (PPE).</li> <li>Utilien varning in age and labels: Play appropriate hazard and safety signs near the law tetal or under to increase worker awareness and guide safe behave the These are undeatood by all employees.</li> <li>Condult prevent finsplotions: Perform regular checks on equipment and addo or to meet being and inadequate training.</li> <li>Condult prevent insploted areas: Keep raw materials, finished products, and oth items appropriately stored in well-organised areas to minimise clutter and prevent obstruction of walkways and workspaces.</li> <li>Maintain an incident register. Record all incidents and near-misses to improve overall safety measures and prevent future reoccurrences. This process should also involve reviewing the effectiveness of current control measures and making necessary adjustments.</li> <li>Supervise inexperienced workers: Assign a trained employee to supervise less experienced operators while they become familiar with lathe metal cutting tasks; this ensures proper guidance, mentoring and adherence to safety measures.</li> <li>Develop and maintain clear communication channels: Encourage open dialogue between staff memb</li></ul>	1L	



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2. Inspection	Faulty equipment, Unguarded moving parts	ЗН	<ul> <li>Conduct routine equipment inspection: Ensure that a thorough inspection of the lathe and its components is performed by a qualifier arson before the commencement of each work shift. This inspection mould include checking for any visible defects, damages or missing parts.</li> <li>Adherence to manufacturer guidelines: All uss follows a manufacturer's instructions on proper usage, maintenance, a vergen of the lathe to minimise the risk of faulty equipment causing an incident.</li> <li>Implement machine guardin. Ensure that all unguited aroung parts of the lathe are fitted with appropriate guara to prevent accident an usact with workers during operation.</li> <li>Develop as a worce look ultagoe procedure Prior to performing any maintenance, e ensuing the equipment is de-energised to prevent unexpected startu.</li> <li>Estalt shuhar construincation protocol: Maintain open lines of communication with team in the and starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards are identified during inspection, and escentre on a starvisors when any hazards protective training in Workplace Health and Safety (WHS) standards, specifically focusing on the peration and maintenance of lathes, to reduce the likelihood of incidents and their injury.</li> <li>Use personal protective equipment (PPE): Employees operating the lathe should be provided with and required to wear appropriate PPE, such as safety glasses, gloves, and hearing protection, to safeguard against potential risks.</li> <li>Display hazard signage: Place clear, easily visible signs near the lathe to remind workers of potential hazards, emphasise safe work practices, and increase awareness abo</li></ul>	1L	
3. Machine Setup	Entanglement, Incorrect tool selection	2M	- Provide proper training: Ensure all operators have received appropriate training in machine setup, tool selection, and safe operation of lathe metal cutting equipment.	1L	



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			<ul> <li>Establish a lockout/tagout procedure: Implement a lockout/tagout policy to ensure that the machine is rendered inoperable during setup and tool change to prevent accidental entanglement.</li> <li>Use appropriate personal protective equipment PE): Require operators to wear appropriate PPE such as gloves, safety gourses, and close-fitting clothing during machine setup.</li> <li>Install machine guards: Equip lathe machines of paroper guards over the rotating parts to protect workers from entanglement haze st.</li> <li>Create and implement Stance (Operating Procescescences): Develop clear SOPs for machine setupion of secution, and usage, e counting that operators adhere to them.</li> <li>Inspect tool and equipment prior takes: Perform routine inspections of lathe tools and eactipments identifiency potential enterems or damage that may lead to incontrol ool secution of the hazards.</li> <li>Main introclean a longanised work area: Keep the area around the lathe metal cutting accure free trebers, clutter, and excess materials to reduce the risk of acciden.</li> <li>Instrained and authorised personnel: Restrict access to the lathe metal cutting area on trained and authorised personnel who are skilled in machine setup and loeratio.</li> <li>Communicate hazard warnings: Clearly label the lathe machine and its surrounding area with the necessary hazard warnings related to entanglement and incorrect tool selection.</li> <li>Conduct regular safety audits: Periodically assess and evaluate the effectiveness of existing control measures to identify areas for improvement and ensure commitment to workplace health and safety requirements.</li> </ul>		
4. Turning Operations	Flying debris, Eye injury	2M		1L	



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5. Grinding Operations	Excessive noise, Dust exposure	2M		1L	

Version 2.5



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6. Drilling Operations	Projectiles, Repetitive motion injuries	2M		1L	



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7. Tool Changing	Pinch points, Burra from bet	2M		1L	

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8. De-burring Operations	Sharp edges, Hand injuries	2М		1L	

Version 2.5

Date of Issue:



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9. Quality Inspection	Strain from improper ergonomics, Distraction leading to accidents	1L		1L	



Date of Issue:



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10. Coolant Management	Chemical exposure, Slips and falls	2М		1L	



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11. Waste Removal	Manual handling injuries, Environmental hazards	2M		1L	



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12. Shut Down & Clean Up	Electrical hazards, Slips, trips, and falls	2М		1L	

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	S				



#### 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.

	REFERENCES					
RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEGISLATIVE REFERENCES ANY STATE AT ARE NOT APPLICABLE						
Queensland & Australian Capital Territory Work Health and Safety Act 2011 Work Health and Safety Regulations 2011 Legislation QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws</u> Codes of Practice QLD: <u>https://www.worksafe.gld.gov.au/laws-and-compliance/codes-of-practice</u> Legislation ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u> Codes of Practice ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u>	Victoria Octopational Health and Safety Actor 24 Octopational Health and Safety Actor 24 Degis from VIC: <u>https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and- gulates</u> Codes on mactice VIC <u>attps://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice</u>					
New South Wales Work Health and Safety Act 2011 Work Health and Safety Regulations 2017 Legislation NSW: <u>https://www.safework.nsw.gov.au/legal-obligations/legislati</u> Codes of Practice NSW: <u>https://www.safework.nsw.gov.au/resource-library/lis</u>	Western Australia Work Health and Safety Act 2020 Work Health and Safety Regulations 2022 Legislation Western Australia: <u>https://www.commerce.wa.gov.au/worksafe/legislation</u> Codes of Practice WA: <u>https://www.commerce.wa.gov.au/worksafe/codes-practice</u>					
Northern Territory Work Health and Safety (National Uniform Legislation) Act 2011 Work Health and Safety (National Uniform Legislation) Regulation 2011 Legislation NT: <u>https://worksafe.nt.gov.au/laws-and-compliance/wc_place-sector-laws</u> Codes of Practice NT: <u>https://worksafe.nt.gov.au/f_compliance/wc_place-sector-laws</u>	Safe Work Australia Links Law and Regulation (All States): <u>https://www.safeworkaustralia.gov.au/law-and-regulation</u> Model Codes of Practice: <u>https://www.safeworkaustralia.gov.au/resources-publications/model- codes-of-practice</u>					
South Australia Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA) Legislation for SA: <u>https://www.safework.sa.gov.au/resources/legislation</u> Codes of Practice for SA: <u>https://www.safework.sa.gov.au/work_dces/codes-of-practice#COPs</u>	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					
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: <a href="https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice">https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice</a> Codes of Practice for TAS: <a href="https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice">https://worksafe.tas.gov.au/topics/laws-and-compliance/codes-of-practice</a>	<ul> <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> </ul>					
Details of permits, licenses or access required by regulatory bodies (add or delete as required): - Permits from local council - Authorisation to commence work	<ul> <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>					

- Any required documents.



#### SIGNATORIES OF THE SAFE WORK METHOD STATEMENT

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

Worker Name	Position	Signature	Date	Time	Supervisor
			Date:		
			Datu		
			ı te:		
			Date:		

#### SAF WC A STHUD STATEMENT MONITORING AND REVIEW

The SWMS must be reviewed regularly to review the sure it remains revised if necessary) if relevant control measure are a conconsultation with workers (including contractors are subcontract of the SWMS and their health and safety representatives who re workplace.

ke sure it remains effective and must be reviewed (and acception of the process should be carried out in s any subcontract s) who may be affected by the operation esentatives who received that work group at the

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	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	
Name, signature, position and date signed of the person approving the SWMS.			
Specific personnel and qualifications, experience is noted in the SWMS.			
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 SWN			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effecting sections.			
Responsible person is assigned and listed on the SWMS for the imement of cont, measures.			
Permit requirements specified, such as Hot Wey, Electrical Work, Verat Heights etc.			
SWMS identifies plant and equipment to be up t.			
Details of inspection checks required for any equipment listed approved 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.			
Identifies any hazardous substances used with specific control measures in line with any SDS.			
REVIEWED BY	DATE RI	EVIEWED	
SIGNATURE	DATE CO	MPLETED	