

Reciprocating Saw | SAFE WORK METHOD STATEMENT (SWMS)

TASK OR ACTIVITY: Reciprocating Saw

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, then to communicate 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 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	Elimination Remove the hazard.
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	Substitution Replace the hazard.
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	2M MODERATE	Ensure control measures in place.	Isolation Isolate People from the hazard
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	1L LOW	Monitor and keep records	Engineering Isolate the hazard.
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH			Administrative Change the work.
								PPE

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, unguarded blade	3H	<ul style="list-style-type: none"> - Inspect the reciprocating saw for any visible damage or malfunction before use, focusing on the power cord, plug, and blade guard. If any issues are detected, remove the saw from use and report to a supervisor. - Properly secure and fasten the unguarded blade in place before starting the saw. Do not use the saw if the blade guard is missing or damaged. - Wear appropriate personal protective equipment (PPE) such as safety glasses, hearing protection, non-conductive gloves, and sturdy footwear to shield against potential injury caused by flying debris, sparks, or electrical shock. - Ensure that the work area is clean, decluttered, and free of tripping hazards, such as loose cords or debris, to minimize the risk of accidents during saw operation. - Confirm the presence of Ground Fault Circuit Interrupter (GFCI) outlets are in use or have portable units available to reduce the risk of electrical short circuits and shocks. - Unplug the reciprocating saw when it's not in use or while changing the blade or accessories. This helps prevent accidental start-up, electric shock, or injuries from an unguarded blade. - Keep the saw's power cord away from the cutting area to prevent accidental severing, resulting in possible electric shock or damage to the equipment. - Conduct a toolbox talk with all workers involved in using the reciprocating saw to discuss potential hazards, safety measures, and emergency procedures. - Adequately train workers on the correct operational procedures for using the reciprocating saw, emphasising key safety aspects like maintaining a firm grip, holding the tool securely, and keeping hands away from the exposed blade. - Implement a regular maintenance schedule to inspect, service, and replace parts as needed to ensure the reciprocating saw remains in safe working order. - Display clear safety signage and warnings around the work area as reminders to follow safety precautions and stay alert while using the reciprocating saw. 	1L	
2. Inspection	Defective equipment, insufficient PPE	2M	<ul style="list-style-type: none"> - Conduct routine maintenance and inspection of the reciprocating saw prior to use, ensuring it is in proper working condition. - Verify that all safety guards are in place and functioning effectively before operating the saw. - Provide clear instruction and hands-on training for all workers on the correct usage and handling of the reciprocating saw, emphasising the importance of adhering to safety procedures. - Ensure that all workers using the reciprocating saw wear appropriate PPE such as safety goggles, gloves, hearing protection, and steel-toed boots. - Create a checklist for inspecting the saw and its components, including the blade, power cord, and trigger switch, before each use. 	1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<ul style="list-style-type: none"> - Utilise signage and warning labels in the work area reminding workers of potential hazards and the necessary precautions associated with using a reciprocating saw. - Keep a record of all inspections and maintenance performed on the saw, as well as any reported incidents or issues related to equipment defects. - Remove damaged or defective reciprocating saws from service immediately and report the issue to a supervisor for repair or replacement as needed. - Implement a system for regularly updating the available PPE inventory and ensure it complies with relevant industry standards. - Encourage open communication between management and workers, initiating a culture wherein concerns regarding safety can be addressed promptly without fear of retaliation. - In the event of an unexpected issue with the reciprocating saw during operation, instruct workers to stop their task immediately and report the concern to their supervisor. - Monitor the worksite space for neatness and organisation, promptly removing any debris that could present a tripping hazard to workers using the reciprocating saw. - Develop emergency response plans for potential accidents involving defective equipment or insufficient PPE, ensuring all workers are familiar with these procedures. - Regularly review and update the Safe Work Method Statement (SWMS) and ensure all workers understand and follow the outlined protocols to maintain a safe work environment while using the reciprocating saw. 		
3. Saw setup	Incorrect blade installation, unstable work surface	3H	<ul style="list-style-type: none"> - Ensure all personnel operating the reciprocating saw have received appropriate training and are competent in its safe use. - Before starting any work, inspect the work area for potential hazards and address them accordingly to create a stable work surface. - Keep the work area clean and free of clutter to prevent any tripping hazards that may disrupt the stability of the work surface or operator. - Always use manufacturer-approved blades designed specifically for use with the intended reciprocating saw model. - Follow the manufacturer's guidelines for correct blade installation, ensuring it is securely fastened to prevent dislodging during operation. - Utilise a stable and secure work surface, such as a workbench equipped with clamps or vice grips, to hold the material being cut firmly in place. - Implement appropriate fall protection measures when working at heights to ensure the stability and safety of both the operator and the work surface. - Inspect the reciprocating saw and blade for any damage or wear before each use. Replace any damaged or worn components immediately. 	1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<ul style="list-style-type: none"> - Wear appropriate personal protective equipment (PPE), such as safety glasses, gloves, and hearing protection, to reduce the risk of injury from improper blade installation or unstable work surfaces. - Always keep hands and fingers away from the blade while operating the reciprocating saw to minimise the risk of contact with the cutting edge. - Disconnect the power source whenever changing or adjusting the blade on the reciprocating saw to prevent accidental activation during handling. - Regularly review and update your Safe Work Method Statement (SWMS) documentation to ensure all employees stay informed about current best practices for mitigating the risks associated with saw setup hazards. 		
4. Cutting material	Flying debris, excessive noise	2M	<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. Blade change	Contact with sharp edges, incorrect blade tension	2M	[REDACTED]	1L	

SAMPLE

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
6. Saw maintenance	Pinch points, exposure to grease and oil	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]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
7. Transportation	Manual handling injury, falling objects	2M	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		

SAMPLE

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			[REDACTED]		
8. Housekeeping	Slips, trips, and falls, accumulation of debris	2M	[REDACTED]	1L	

SAMPLE

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			[REDACTED]		
9. Saw storage	Inadequate ventilation, unauthorised access	2M	[REDACTED]	1L	

SAMPLE

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
10. Emergency response	Inadequate knowledge, failure to properly shut off saw	2M	[REDACTED]	1L	
			[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. Waste disposal	Cutting self on waste, environmental hazard	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]		
12. Debriefing	Improper communication, missed safety issues	2M	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		

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>Queensland & Australian Capital Territory Work Health and Safety Act 2011 Work Health and Safety Regulations 2011 Legislation QLD: https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws Codes of Practice QLD: https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice Legislation ACT: https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations Codes of Practice ACT: https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</p>	<p>Victoria Occupational Health and Safety Act 2004 Occupational Health and Safety Regulations 2017 Legislation VIC: https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations Codes of Practice VIC: https://www.worksafe.vic.gov.au/compliance-codes-and-codes-practice</p>
<p>New South Wales Work Health and Safety Act 2011 Work Health and Safety Regulations 2017 Legislation NSW: https://www.safework.nsw.gov.au/legal-obligations/legislation Codes of Practice NSW: https://www.safework.nsw.gov.au/resource-library/list-of-codes-of-practice</p>	<p>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</p>
<p>Northern Territory Work Health and Safety (National Uniform Legislation) Act 2011 Work Health and Safety (National Uniform Legislation) Regulations 2011 Legislation NT: https://worksafe.nt.gov.au/laws-and-compliance/workplaces-and-laws Codes of Practice NT: https://worksafe.nt.gov.au/laws-and-compliance/codes-of-practice</p>	<p>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</p>
<p>South Australia Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA) Legislation for SA: https://www.safework.sa.gov.au/resources/legislation Codes of Practice for SA: https://www.safework.sa.gov.au/workplaces/codes-of-practice#COPs</p>	<p>Model Codes of Practice</p> <ul style="list-style-type: none"> - 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
<p>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</p> <p>Details of permits, licenses or access required by regulatory bodies (add or delete as required):</p> <ul style="list-style-type: none"> - Permits from local council - Authorisation to commence work - Any required documents. 	

SIGNATORIES OF THE SAFE WORK METHOD STATEMENT

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

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

SAFE WORK METHOD STATEMENT MONITORING AND REVIEW

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

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

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

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

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

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

SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

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

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