

Vertical Borer S	SAFE WORK METHOD STA	TEMENT (SWMS)	
1	TASK OR ACTIVITY: Vertical Bore	er	
Business Name: [Company Name]		ABN: [ABN]	SWMS#
Business Address: [Company Address]			
Contact Person:	Phone: [Phone]	E il:	
THIS SAFE WORK METHOD	STATEMENT IS APPROVED BY	THE POJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.	cting a business or undertaking (N 3U) is	required to ture at a safe work method s	tatement (SWMS) is prepared before
Full Name:			
Signature:		Title:	Date:
Details of the person(s) responsible for ensuring implementation, monitoring a	compliance of the SWMS well as review	s and modifications of the SWMS.	
Full Name:		Title:	Phone:
ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS WMS. ST HAVE THE FOLLOWING COMMUNICATED	N. 1E AND DATED SIGNATURE OF A CO. MUNICATED TO IN THE DEVELO	LL RELEVANT PERSONNEL WHO HAVE B PMENT AND APPROVAL OF THIS SWMS	EEN CONSULTED AND
Safety meetings or toolbox talks will be sched ed in accordance with agislative requirements to first identify any site hazards, conditions 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.			

Version 2.5 Authorised by Review # Date of Issue: Review Date: 1



CLIENT OR PRINCIPAL CONTRACTOR DETAILS									
Client:						SCOPE OF WORKS			
Project Name:				Provide a detailed description 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	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	ied out on or near chemical, fuel or refrigerant lines.				
☐ involves demolition of	of an element of a structure	that is load-be n.		is carried out on	t on or near energised electrical installations or services.				
☐ involves demolition of	of an element related to the	e physical integril of a str	2	is carried out in	ut in an area that may have a contaminated or flammable atmosphere.				
☐ involves, or is likely t	o involve, disturbing a	stos.		☐ involves tilt-up o	ves tilt-up or precast concrete.				
involves structural al	teration or repair that re	upp to p	prevent collapse.	is carried out on	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	is carried out in an area of a workplace where there is any movement of powered mobile plant.				
is carried out in/near	a shaft or trench deeper th	nan 1.5m or tunnel involvir	ng use of explosives.	is carried out in areas with artificial extremes of temperature.					
is carried out in or ne	ear water or other liquid tha	at involves a risk of drowni	involves diving v	involves diving work.					
	ANY HIGH-RISK MACHINERY OR EQUIPMENT NEARBY								
☐ Forklift	☐ Crane/s	☐ Hoist/s	☐ Excavator	☐ Backhoe/Loade	r 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 -			

Version 2.5 Authorised by Review # Date of Issue: Review Date: 2





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 RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
1. Preparation	Unstable floor surface, Poorly maintained equipment	2M	 Inspect the floor surface prior to beginning work, identifying any uneven or unstable areas that could pose a risk during operation. If necestary, level and stabilise the work area with appropriate materials. Keep the workspace clean and free of debter, spills, or loose objects that may contribute to an unstable floor surface or slipp in hazard. Develop and implement regular maintenance. It calls for vertical borer equipment to ensure all parts and components a ring good working order. This includes checking for leaks, wen belts, and proper obrication. Train all workers on tope tope a end operation on a sucal borers, as well as how to identify and reaccistance reports and proper obrication. Train all workers on the pool of maintained equipment of PPE) is worn by workers operating vertice borers and assafet to asses, hearing protection, and appropriate footw. Install was ing signed enear the vertical borer work area to alert other workers about the population of such and instruct them to maintain a safe distance from the machine while it is in operation. Develop an emergency response plan to address potential incidents that may occur ongothe operation of vertical borers, such as machine malfunctions or injuries to workers. Regularly assess the condition of supporting structures (e.g., benches or platforms) that the vertical borer may be mounted on, ensuring they remain stable and secure during operation. Utilise temporary barriers or delineate the work zone using safety tape to keep unauthorised personnel away from the vertical borer while it's in use. Encourage open communication among employees and supervisors, fostering a positive safety culture where workers feel comfortable discussing potential hazards and sharing ideas for improving workplace health and safety. Conduct periodic safety audits and risk assessments, continually evaluating the workplace for potential hazards and adjusting control measures as nece	1L	
2. Pre-operation check	Inadequate training, Inspect safety guarding	3Н	 Ensure that all operators have received appropriate training and are competent in operating the vertical borer before commencing work. Provide ongoing training and refresher courses to keep operators up-to-date on best practices and any changes in technology or procedures. Implement a system for monitoring and evaluating operator performance, including regular assessments to ensure competency in safe use of the vertical borer. 	2M	



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
			 Establish a pre-operation checklist to be completed by operators before using the vertical borer, ensuring all critical safety checks are conducted. 		
			- Inspect the safety guarding around the vertical by prior to operation, ensuring it is correctly fitted and that all parts are intact an anctioning as intended.		
			- Develop a routine maintenance schedule the vertical prer, including regular inspections and servicing of safety guarding appoint.		
			- Conduct regular audits of the workshop envirous ent to identify any potential hazards that may impact the fe operation of the rtical box, such as poor housekeeping or inadequate it, sing.		
			- Maintain records care using, a essments, inspections, maintenance, and other relevant documentation relenge to a safe use of management of the vertical borer.		
			- Corpornicate parly and all staff menders about their responsibilities for maintain a said said environment when using the vertical borer, including follows a said said said procedures related to workplace health and safety.		
			- Provide personal projective equipment (PPE) such as safety goggles, gloves, and bearing office of for operators, and ensure they are trained in its proper use and in intendice.		
	7		Ence open communication between employees and managers, fostering a fety curve that encourages workers to raise concerns or report potential hazards wout fear of reprisal.		
			Install emergency stop buttons and other safety features on the vertical borer machine to provide additional safeguards against accidents or injuries during operation.		
			- Limit access to the vertical borer area to authorised personnel only, reducing the risk of injury to untrained individuals who may attempt to operate the machine.		
			- Designate a safety officer or manager responsible for overseeing the implementation and ongoing management of these control measures, ensuring that they are consistently applied and effective in maintaining a safe working environment when using the vertical borer.		
			- Proper training: Ensure that all operators have undergone appropriate training for setting up and using the Vertical Borer, so they are competent to perform tasks safely.		
3. Setup	Improper machine setup, Tools damage	3H	- Follow manufacturer guidelines: Always adhere to the manufacturer's instructions and guidelines for machine setup, operation, maintenance, and tool usage.	1L	
			- Equipment inspection: Regularly inspect the Vertical Borer and tools for signs of wear and damage. Remove any damaged tools or equipment from use immediately.		



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
			- Safe lifting techniques: Utilise safe lifting techniques and mechanical aids, such as pallet jacks or cranes, when necessary to handle heavy components during the setup process.		
			- Protective gear: Ensure workers wear approprie e personal protective equipment (PPE) during setup, including safety glassom gloves, and steel-toed boots.		
			- Tool management: Implement a system for a trolling and tracking the use and condition of tools to minimise the risk of using the use and condition of tools to minimise the risk of using the use and condition of tools to minimise the risk of using the use and use of the use of the use and use of the use of		
			- Pre-setup checks: Conduct prough pre-operationspection of the Vertical Borer, its settings, and work at before beginning everything is in work		
			- Adequate we pace: Ma ain a an, organized, and well-ventilated work area around the inchine to reduce the rise of accents and provide ample room for maneutering using setu		
			- Lock to agout adures: Follow proper lockout/tagout procedures when perform he aintending the or setup tasks on the Vertical Borer to prevent accidental activation.		
			Use of prrece pols: Umise appropriate tools and fixtures specifically designed for with a Ven J Borer to ensure accurate setup and reduce the risk of tool dam.		
			s revisors regarding any issues or concerns with the machine or setup process to advess potential hazards promptly.		
	5				
4. Alignment & calibration	Unplanned movements, Wrongly fitted tools	3H		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
5. Loading materials	Manual handling of heavy objects, Dropping objects	2M		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
6. Operating the borer	Rotating or moving parts, Splinters/foreign objects	3H		2M	



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
7. Adjusting settings	Unsafe changes in speed, Improper securing of components	2M		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



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

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

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

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 2011

Legislation NT: https://worksafe.nt.gov.au/laws-and-compliance/wo_place-syllaws

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

South Australia

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Legislation for SA: https://www.safework.sa.gov.au/resources/legislation

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

Tasmania

Work Health and Safety Act 2012

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

Work Health and Safety Regulations 2012

Work Health and Safety (Transitional) Regulations 2012

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

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

Details of permits, licenses or access required by regulatory bodies (add or delete as required):

- Permits from local council
- Authorisation to commence work
- Any required documents.

Victoria

Occupational Health at Safety Act 34

Occupational Health and afety 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.

Worker Name	Pos	sition	Signature	Date	Time	Sup	pervisor
				Date:			
				l te:			
			AV	Date:			
				Date:			
				Date:			
				Date:			
		SAF WC A	STATEMENT	MONITORING AND	REVIEW		
The SWMS must be reviewed regularly to be ke sure it remains effective and must be reviewed (and revised if necessary) if relevant control measure are subcontracted. The review process should be carried out in consultation with workers (including contractors and subcontracted) who may be affected by the operation of the SWMS and their health and safety representatives who redesented 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.				effective in reducing the person responsible for remploy a multi-faceted 1. Spot Checks 2. Consultation 3. Internal audit An approach of continut followed up by immedia	onitored regularly for the risk of incidents, keeping nonitoring the effectivenes approach which includes b with workers, contractors as on a continual basis. Dus improvement, promptly the corrective action and contently developing ever-imp	the workplace safe for a sof the Safe Work Met ut is not limited to: and sub-contractors. recording inconsistence insultation with all relevants.	all personnel. The hod Statement should statement should size or deficiencies, ant personnel ensures
REVIEW NUMBER	<u> </u>	□ 2	□ 3	□ 4	□ 5	□ 6	□ 7
NAME							
INITIALS							
DATE							

Version 2.5 Authorised by Review # Date of Issue: Review Date: 12



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.

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 train							
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.		D'					
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 SWI							
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 implementation of contameasures.							
Permit requirements specified, such as Hot Wee, Electrical Work, Verat Heights etc.							
SWMS identifies plant and equipment to be u 1.							
Details of inspection checks required for any equipment listed at 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.							
Identifies any hazardous substances used with specific control measures in line with any SDS.							
REVIEWED BY	DATE R	EVIEWED					
SIGNATURE	DATE CO	MPLETED					