

Cut Off Wheel | SAFE WORK METHOD STATEMENT (SWMS)

TASK OR ACTIVITY: Cut Off Wheel

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			Elimination Remove the hazard.
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCEED	Substitution Replace the hazard.
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	Isolation Isolate People from the hazard
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.	Engineering Isolate the hazard.
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	Monitor and keep records	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	Exposure to sharp edges, Slips and falls	2M	<ul style="list-style-type: none"> - Conduct a pre-work risk assessment to identify potential hazards, including sharp edges and slippery surfaces. - Implement regular housekeeping practices to keep work areas free of debris, clutter and any slippery substances. - Wear appropriate personal protective equipment (PPE), such as gloves, non-slip footwear and safety glasses to protect against sharp edges and slip hazards. - Provide employees with training on how to safely use the cut-off wheel and other tools associated with the task, including safe handling techniques. - Clearly mark designated walkways and working areas to prevent accidental slips and falls. - Inspect work platforms, ladders and scaffolding to ensure they are in good condition and meet regulatory standards. - Install anti-slip surfaces and grip aids where required, especially near machinery or workstations where water and oil might create slippery surfaces. - Ensure that workers take frequent breaks to reduce fatigue, which can increase the likelihood of slip, trips and falls. - Regularly maintain and inspect cutting equipment to minimise exposure to sharp edges; replace damaged or worn-out blades as needed. - Develop a Safe Work Method Statement (SWMS) outlining the proper procedure for utilising cut-off wheels and provide employee training on the SWMS. - Encourage open communication between workers and supervisors regarding any potential hazards or concerns about the work environment. - Monitor and continuously improve workplace health and safety procedures by conducting routine audits and implementing necessary changes to minimise risks. 	1L	
2. Equipment Inspection	Defective equipment, Incorrect setup	2M	<ul style="list-style-type: none"> - Conduct a thorough visual inspection of the cut-off wheel equipment before each use, checking for any signs of damage or wear. - Ensure that all guards and safety devices are securely in place, well maintained, and functioning correctly. - Verify that the equipment is properly assembled and set up according to the manufacturer's guidelines. - Investigate the equipment's service history regularly and perform timely maintenance as required to keep it in optimal working condition. - Familiarise yourself with and adhere to manufacturer guidelines on the use, maintenance, and safe operation of cut-off wheel equipment. - Utilise only equipment that has been designed and approved for the specific cutting application being undertaken. 	1L	

JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR	RESPONSIBLE PERSON
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<ul style="list-style-type: none"> - Confirm that the correct size and type of cut-off wheel is being used, considering factors such as material, thickness, and desired cutting speed. - Inspect and ensure the integrity of mounting flanges, ensuring they are of equal diameter, flat and free from burrs or irregularities. - Prior to operation, run the cut-off wheel equipment at operating speed for at least 30 seconds while standing clear, in order to observe if any abnormalities occur. - Implement a system for reporting damaged or faulty equipment with a designated person responsible for addressing issues promptly. - Train employees on how to carry out equipment inspections and identify potential hazards associated with their tasks. - Provide personal protective equipment (PPE) such as safety glasses, gloves, and hearing protection, and enforce their use during equipment operation and inspection. - Establish a regular schedule for reviewing control measures and making improvements when necessary, in accordance with relevant industry standards and regulations. - Promote a workplace culture that encourages open communication about safety concerns, providing employees with avenues for raising issues and receiving appropriate assistance and guidance. 		
3. Personal Protective Equipment(PPE) Selection	Inadequate PPE, Unsuitable materials	3H	<ul style="list-style-type: none"> - Conduct a comprehensive risk assessment to identify the specific Personal Protective Equipment (PPE) required for each worker operating the cut-off wheel. - Provide training and instruction on the proper usage, maintenance, and fitting of PPE to ensure workers are aware of how to use the equipment safely and effectively. - Ensure workers wear appropriate PPE such as safety glasses or goggles, face shields, earplugs or earmuffs, gloves, and steel-toed boots when using cut-off wheels to protect against flying debris, noise, and potential impacts. - Inspect PPE regularly for signs of wear, damage or degradation, replacing unsuitable or damaged items immediately to maintain a high level of protection for users. - Provide flame-resistant or heat-resistant clothing for workers if the task involves cutting materials that may generate extreme heat or sparks. - Consider supplying respiratory protection such as dust masks or air-purifying respirators if the work involves cutting materials that can release hazardous particles or fumes. - Keep a well-stocked supply of PPE on hand so that workers always have access to the appropriate equipment when needed. - Establish a designated area for storing PPE, ensuring that it is kept clean, dry, and free from contaminants that could compromise its protective qualities. 	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
			<ul style="list-style-type: none"> - Encourage workers to report any discomfort, ill-fitting or damaged PPE so that management can address issues promptly, ensuring ongoing workplace health and safety is maintained. - Regularly review and update the organisation's PPE policies in line with industry standards, technological advancements, and local regulatory requirements. - Create a culture of safety within the workplace, emphasising the importance of utilising PPE to prevent accidents, injuries, and long-term health issues among staff members. - Consult with users and conduct continuous improvement initiatives to identify and implement more effective PPE solutions, prioritising worker comfort and suitability to specific tasks. 		
4. Work Area Set-up	Poor ventilation, Obstructed access	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> <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]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
5. Cut Off Wheel Installation	Unbalanced wheel, tightening fasteners	2M	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[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]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
6. Wheel Speed Check	Excessive vibration, Exceeding manufacturer limits	2M	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[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]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
8. Test Cut	Projection of fragments, Loss of control	3H	[REDACTED]	2M	
			[REDACTED]		
			[REDACTED]		
			[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]		
9. Execute Cutting	Flying debris, Unintended cuts	3H	[REDACTED]	2M	

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]		
10. Material Handling	Strains and sprains, Dropping materials	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]		
11. Tool Maintenance	Improper lubrication, Damaged components	3H	[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]		
12. Wheel Replacement	Incorrect installation, Mismatched components	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]		
13. Debris Cleanup	Inhalation of dust, Eye injury	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]		
14. Equipment Storage	Tripping hazards, Cluttered workspace	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]		
15. Post-Operation Review	Unreported incidents, Inadequate follow-up	2M	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[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]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[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>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	