

| Working Alone  | SAFE WORK METHOD STA   | TEMENT (SWMS)   |                                     |  |
|--|--|---|-------------------------------------|--|
| ١  | ASK OR ACTIVITY: Working Alo                                     | ne  |                                     |  |
| Business Name: [Company Name]  |  | ABN: [ABN]  | SWMS#                               |  |
| Business Address: [Company Address]  |  |   |                                     |  |
| Contact Person:  | Phone: [Phone]   | E gil:  |                                     |  |
| 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 3U) is                        | required to thurs at a safe work method s                             | statement (SWMS) is prepared before |  |
| Full Name:   |  |   |                                     |  |
| Signature:   |  | Title:  | Date:                               |  |
| Contact Person:       Phone: [Phone]       E.uil:         IT IS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PL J OF THE PROJECT         Under the Work Health and Safety Regulation (WHS Regulation), a person conducting a business or undertaking (N-BU) is required to low or at a safe work method statement (SWMS) is prepared before in the prosecular work stats.         Full Name:       Title:       Date:         Details of the person(s) responsible for ensuring implementation, monitoring an tocompliance of the SWMS. well as reviews and modifications of the SWMS.       Title:       Phone:         Full Name:       Title:       Phone:       Phone:         Safety meetings or toolbox talks will be schere ad in accordance with gislative requirements to first identify any site hazards nonline in the gislative preated before in the severity of the incident, a meeting will be called with all workers to amend 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.       NAME       SIGNATURE       DATE |  |   |                                     |  |
| Full Name:   |  | Title:  | Phone:                              |  |
|  | N. 1E AND DATED SIGNATURE OF A<br>CC. MUNICATED TO IN THE DEVELO | ALL RELEVANT PERSONNEL WHO HAVE B<br>OPMENT AND APPROVAL OF THIS SWMS | EEN CONSULTED AND                   |  |
| requirements to first identify any site hazards, conduction unical those   | NAME   | SIGNATURE   | DATE                                |  |
| on the severity of the incident, a meeting will be called with all workers to amend  |  |   |                                     |  |
| Any changes made to the SWMS after an incident or a near miss must be<br>approved by the Person Conducting Business or Undertaking and<br>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 HIG                       | H-RISK CON TUCT         |  | ARRIED 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<br>PERSON |
|---------------------|---|-----------------|--|------------------|-----------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                      | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS   | RESIDUAL<br>RISK | NAME OF PERSON        |
| 1. Preparation      | Slips, trips and falls, Inadequate lighting | 2M              | <ul> <li>Conduct a thorough inspection of the work area before commencing the task to identify and remove any potential trip or slip hazardo tich as loose cables, uneven surfaces, and wet or slippery floors.</li> <li>Ensure that proper housekeeping is maintened throughout the working alone process by keeping the work area clean, of thised, and the working alone process by keeping the work area clean, of thised, and the working alone process by keeping the work area clean, of thised, and the working alone process by keeping the work area clean, of thised, and the working alone process by keeping the work area clean, of the work and the working alone process by keeping the work area clean, of the work and the working alone process by the equipment (PPE) such as non-slip footwear to protect workers against slipp tips, and fall.</li> <li>Clearly mark and signost an identified hazards in the working alone, include undy syste where results for workers who are working alone, include undextended to accedure at regular intervals to ensure their safety.</li> <li>Proving all quate the uping and instruction to workers on safe work practices when working lone including thazards associated with slips, trips, and falls, and how to revent em.</li> <li>Include undextended. If required, use portable lights to create adequate visibility.</li> <li>Iake sure that workers have easy access to emergency exits and escape routes in callof accidents or emergencies.</li> <li>Develop and implement emergency response procedures for workers who are working alone, including guidelines on how to raise the alarm and seek help if they encounter a hazard or are involved in an accident.</li> <li>Encourage workers to report new hazards or potential risks immediately so that they can be promptly addressed and removed from the work area.</li> <li>Regularly review and update risk assessments to ensure that all potential hazards are identified and appropriate control measures are implemented.</li> <li>Establish a reporting and follow-up procedure for a</li></ul> | 1L               |                       |
| 2. Equipment Check  | Faulty equipment, Lack of training          | 2M              | <ul> <li>Develop and implement a comprehensive equipment inspection programme, including regular checks for wear and tear, damage or malfunction.</li> <li>Provide staff with the necessary training on the proper use, maintenance, and storage of all equipment used in their tasks.</li> </ul>  | 1L               |                       |



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|                     |                                 |                 | <ul> <li>Implement policies and guidelines to ensure that all workers are aware of the appropriate use of each piece of equipment and understand the risks and hazards associated.</li> <li>Encourage workers to report any faulty equipment or machinery promptly and display clear instructions for workers in cace we equipment malfunction.</li> <li>Establish a procedure for regularly reviewing and unuming training materials to ensure that they remain current and relevant to unuming training materials to communication (e.g., cell photogradio) in case of eutropy, equipment being used.</li> <li>Ensure that workers who musbe working alone we a reliable means of communication (e.g., cell photogradio) in case of eutropy, equipment trailure, or other issues.</li> <li>Schedule region Safety metings toolbox to where equipment usage, potential hazins, and contor measure, are uncussed to help maintain a high level of awareness upong works.</li> <li>Stor whipmen moderly when not in use, ensuring that it is protected from advers the utomme of conditions and potential damage.</li> <li>Mainta the ugh reliads of equipment maintenance, inspections, and repairs to track profem up as an identify trends for future improvements.</li> <li>On the muipment inventory and replacement schedules after identifying faulty equipment. This ensures all tools remain up-to-date and in good working condition.</li> <li>Provide ongoing support and supervision for workers, particularly for those new to using particular equipment, reducing initial risk exposure until familiarity is achieved.</li> <li>Install and maintain Emergency Stop buttons or similar safety devices on equipment where appropriate to allow for immediate shutdown in the case of a malfunction.</li> <li>Promote a strong workplace safety culture that encourages workers to exercise diligence when performing equipment checks and prioritise safety at all times—both individually and as part of a team effort.</li> </ul> |                  |                       |
| 3. Workspace Setup  | Poor ergonomics, Electric shock | 2M              | <ul> <li>Establish a well-lit workspace: Ensure that the work area has sufficient lighting to prevent eye strain, reduce the risk of trips and falls, and facilitate proper identification of potential hazards.</li> <li>Set up an ergonomic workstation: Arrange the desk, chair, and equipment such that they offer optimal comfort and reduced physical strain on the worker. This might include adjusting the height of the chair, placing the monitor at the correct eye level, and providing a footrest if necessary.</li> <li>Organise tools and equipment: Keep all necessary tools and equipment in their designated places, within easy reach, to minimise unnecessary movements, bending, and stretching.</li> </ul>   | 1L               |                       |



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|                                |  |                 | <ul> <li>Regular breaks: Schedule regular breaks for workers operating alone to help<br/>mitigate fatigue and stress, encouraging them to step away from their workspace<br/>and stretch or move around.</li> </ul>   |                  |                       |
|                                |  |                 | - Electrical inspection: Regularly inspect electric outlets, cords, and wiring for any signs of damage or wear. Replace or repair us damaged electrical components immediately.   |                  |                       |
|                                |  |                 | - Use of RCDs (Residual Current Devices): Utrastan RCD for each circuit in the workspace, which will automatically shut off power f an unbalanced current is detected, reducing the risk of conctric shock.   |                  |                       |
|                                |  |                 | <ul> <li>Proper use of external points of a bind should be block.</li> <li>Proper use of external points of a bind should be block of a bind should be bind should be block of a bind should be</li></ul> |                  |                       |
|                                |  |                 | - Propertorage Nice is and chemicals: Ensure that liquids and chemicals are stored in early larged containers and kept a safe distance away from electrical outlets including to minimise the risk of spills, electrical shorts, and fire hazard.   |                  |                       |
|                                |  |                 | Hazaro ommerication and signage: Clearly identify and communicate potential havings in the work area through appropriate cautionary signs, labels, and markings.<br>Emergy or contact information: Provide workers with a list of essential emergency   |                  |                       |
|                                |  |                 | ntacts, including colleagues, supervisors, and first aid or medical assistance, as<br>not led.<br>Workspace inspection and housekeeping: Regularly inspect the work area to   |                  |                       |
|                                |  |                 | ensure that there are no potential hazards such as clutter, spills, frayed wiring, and poorly maintained equipment that may pose a risk to the worker.  |                  |                       |
|                                |  |                 | <ul> <li>Training for safe work practices: Educate workers on how to identify and minimise<br/>risks associated with working alone, including ergonomics, proper use of tools and<br/>equipment, and best practices to prevent accidents and injuries. Provide ongoing<br/>refresher training to reinforce safe working methods.</li> </ul>   |                  |                       |
|                                |  |                 |   |                  |                       |
|                                |  |                 |   |                  |                       |
| 4. Work Alone<br>Communication | Ineffective communication, Lack of support | ЗH              |   | 2M               |                       |
|                                |  |                 |   |                  |                       |
|                                |  |                 |   |                  |                       |

Date of Issue:



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|                     |                        |                 |  |                  |                       |



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|                              |   |                 |  |                  |                       |
| 5. Work Permit<br>Processing | Failure to obtain permit.<br>Miscommunication | 21              |  | 1L               |                       |



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|                      |   |                 |  |                  |                       |
| 6. Material Handling | Manual handling in ties the workstorage | BΗ              |  | 2М               |                       |



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|---------------------|----------------------------------|-----------------|--|------------------|-----------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE           | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON        |
|                     |                                  |                 |  |                  |                       |
| 7. Work Execution   | Mental fatigue, Unfamiliar tasks | ЗН              |  | 2М               |                       |

Version 2.5

Date of Issue:



| JOB STEP                   | POTENTIAL HAZARDS                | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE<br>PERSON |
|----------------------------|----------------------------------|-----------------|--|------------------|-----------------------|
| SPECIFIC WORK STEPS        | HAZARDS THAT MAY ARISE           | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON        |
|                            |                                  |                 |  |                  |                       |
| 8. Confined Space<br>Entry | Oxygen deficiency, Toxic atmosph | 4A              |  | ЗН               |                       |



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|----------------------------|--|-----------------|--|------------------|-----------------------|
| SPECIFIC WORK STEPS        | HAZARDS THAT MAY ARISE                   | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON        |
|                            |  |                 |  |                  |                       |
| 9. Emergency<br>Procedures | Inadequate response, Panic during crisis | ЗН              |  | 2М               |                       |

Version 2.5

Review #

Date of Issue:



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|---------------------|------------------------------|-----------------|--|------------------|-----------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE       | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON        |
| 10. Break Time      | Poor diet, insufficient rest | 2M              |  | 1L               |                       |



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|-------------------------------|---|-----------------|--|------------------|-----------------------|
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|                               |   |                 |  |                  |                       |
| 11. Maintenance<br>Operations | Exposure to hazardous substances,<br>Working at heights | ЗН              |  | 2М               |                       |



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|---------------------|---|-----------------|--|------------------|-----------------------|
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|                     |   |                 |  |                  |                       |
| 12. Work Completion | Incomplete documentation, Overlooking hazards | 2M              |  | 1L               |                       |

Version 2.5

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|                                |   |                 |  |                  |                       |
| 13. Housekeeping<br>Activities | Improper waste disposati Slutter<br>workspace | 2М              |  | 1L               |                       |



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|-------------------------|--------------------------------|-----------------|--|------------------|-----------------------|
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|                         | C                              |                 |  |                  |                       |
| 14. End-of-Day Security | Unauthorised access, Vandalism | 2М              |  | 1L               |                       |

Version 2.5



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|                     |                        |                 |  |                  |                       |
|                     |                        |                 |  |                  |                       |
|                     | 5                      |                 |  |                  |                       |



#### **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 F   | REFERENCES   |
|---|--|
| RELEVANT LEGISLATION AND CODES OF PRACTICE. DELETE THE LEG  | SISLATIVE REFERENCES ANY STATE AT ARE NOT APPLICABLE   |
| Queensland & Australian Capital Territory<br>Work Health and Safety Act 2011<br>Work Health and Safety Regulations 2011<br>Legislation QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws</u><br>Codes of Practice QLD: <u>https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice</u><br>Legislation ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u><br>Codes of Practice ACT: <u>https://www.worksafe.act.gov.au/laws-and-compliance/codes-of-practice</u>   | Victoria<br>Octopational Health and Safety Action 04<br>Octopational Health and Infetty regulations 2017<br>Legismon VIC: <u>https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-<br/>rulations</u><br>Codes on mactice VIC <u>artips://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: <a href="https://www.safework.nsw.gov.au/legal-obligations/legislatic">https://www.safework.nsw.gov.au/legal-obligations/legislatic</a> Codes of Practice NSW: <a href="https://www.safework.nsw.gov.au/resource-library/lis">https://www.safework.nsw.gov.au/legal-obligations/legislatic</a>   | Western Australia<br>Work Health and Safety Act 2020<br>Work Health and Safety Regulations 2022<br>Legislation Western Australia: <u>https://www.commerce.wa.gov.au/worksafe/legislation</u><br>Codes of Practice WA: <u>https://www.commerce.wa.gov.au/worksafe/codes-practice</u>  |
| Northern Territory<br>Work Health and Safety (National Uniform Legislation) Act 2011<br>Work Health and Safety (National Uniform Legislation) Regulation, 201,<br>Legislation NT: <u>https://worksafe.nt.gov.au/laws-and-compliance/worplace-serve-laws</u><br>Codes of Practice NT: <u>https://worksafe.nt.gov.au/fecture-serve-laws</u>   | Safe Work Australia Links<br>Law and Regulation (All States): <u>https://www.safeworkaustralia.gov.au/law-and-regulation</u><br>Model Codes of Practice: <u>https://www.safeworkaustralia.gov.au/resources-publications/model-<br/>codes-of-practice</u>   |
| South Australia<br>Work Health and Safety Act 2012 (SA)<br>Work Health and Safety Regulations 2012 (SA)<br>Legislation for SA: <u>https://www.safework.sa.gov.au/resources/legislation</u><br>Codes of Practice for SA: <u>https://www.safework.sa.gov.au/work_sa.gov.au/work_saces/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):<br>• Permits from local council<br>• 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    |          |