



Hot Glue Applicator U	se SAFE WORK METHOD	STATEMENT (SWMS)	
TASK	OR ACTIVITY: Hot Glue Applicat	or Use	
Business Name:		ABN:	SWMS#
Business Address:			
Contact Person:	Phone:	E jil:	
THIS SAFE WORK METHOD	STATEMENT IS APPROVED BY	THE PC. OF THE ROJECT	
Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.	eting a business or under a (PC 1) is	required to en that a safe work method s	statement (SWMS) is prepared before
Full Name:			
Signature:		Title:	Date:
Details of the person(s) responsible for ensuring implementation, monitoring a	opliance the VMS a well as review	s and modifications of the SWMS.	
Full Name:		Title:	Phone:
ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS & MS MAY HAVE THE FOLLOWING COMMUNICATED	NA. 2 OF ALL RELEVANT PERSONNI EVELOPMENT AND APPROVAL OF	EL WHO HAVE BEEN CONSULTED AND C THIS SWMS	OMMUNICATED TO IN THE
Safety meetings or toolbox talks will be sched ed in account with a gislative requirements to first identify any site hazards, and then to further take steps to either eliminate or continuous each hazard.			
If an incident or a near miss occurs, all work must ste, an alately. 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.			

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CLIENT OR PRINCIPAL	CONTRACTOR DETAILS
Client:	SCOPE OF WORKS
Project Name:	
Project Address:	
Project Manager:	
Contact Phone:	
Date SWMS supplied to Project Manager:	
ANY HIGH BIOK CONSTRUCTOR	NAME OF THE POLIT
ANY HIGH-RISK CONSTRUCTOR	N WC & BEIN C ARIED OUT
☐ involves a risk of a person falling more than 2 meters	is carried out on or near pressurised gas mains or piping
☐ is carried out on a telecommunication tower	carried out on or near chemical, fuel or refrigerant lines
☐ involves demolition of an element of a structure that is load-bearing	\square is carried out on or near energised electrical installations or services
☐ involves demolition of an element related to the physical integral of a functure	☐ is carried out in an area that may have a contaminated or flammable atmosphere
☐ involves, or is likely to involve, disturbing asb	☐ involves tilt-up or precast concrete
☐ involves structural alteration or repair that —quires term — v sup —rt to prevent collapse	☐ is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor
☐ is carried out in 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/near a shaft or trench deeper that. tunnel involving use of explosives	☐ is carried out in areas with artificial extremes of temperature.
\square is carried out in or near water or other liquid that involves a risk of drowning.	☐ involves diving work.
ANY HIGH-RISK MACHINER	Y OR EQUIPMENT NEARBY

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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	SCORE	ACTION	Elimination Remove the hazard.		
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCE	Substitution		
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	Replace the hazard.		
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.	Isolate People from the hazard		
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	nitor and	Engineering Isolate the hazard.		
Notes on Hierarchy of Controls: Elimination methods are the most effective and preferrence on controls by changing the work is the fourth most effective method. PPE (Personal Protective Eq. ment)) the least effective Administrative Change the work. Change the work. PPE										

				PERS		TIVE EQUIPM					
		Select the app	propriate PPL	abo√ ≃uitab	ic or the equi	pment used or	the job task	being perforr	ned (if applica	ıble).	
FOOT PROTECTION	HAND PROTECTION	HEAD PROTECTION	HEARING ETION	P ECTION	R PIRATORY PROTECTION	FACE PROTECTION	HIGH-VIS CLOTHING	PROTECTIVE CLOTHING	FALL PROTECTION	SUN PROTECTION	HAIR/JEWELLERY SECURED
Other PPE R	Required:										
	Permit or Licenses Requirements					Mandatory Qualifications and Training					



JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR
SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK
1. Preparation	Fire hazard from hot components, Munual handling huniurs whilst loading glue, Tripping hazards from unsecured equipment or air hoses	ЗН	 Conduct a pre-use inspection of the hot also applicator and all components to ensure they are in good working condition. Ensure that all staff using the hot glue application and emergency procedures. Provide heat-resistant gloves oprons, and safety asset protect users from burns and other heat-related injuries. Implement a now procect is for inclacing glue tacks or cartridges to minimise risk from manual handling. Ensure all too and manual needed a loading glue are within easy reach to reduce strain and awkw no sture. Security schor as air hoses and electrical cords to prevent tripping incidents during use. Maintan a conn and stanised workspace to prevent accidents and facilitate safe and efficient neeration. Kenda mable materials and substances away from the work area to mitigate the risk of fire. Designas a specific area for glue applicating tasks, marked with appropriate signage to warn others of pointial hazards. Install fire extinguishers nearby and ensure personnel are trained in their proper use. Regularly review and update the Safe Work Method Statement (SWMS) based on feedback and changes in equipment or procedures. Limit access to the area where the hot glue applicator is being used to authorised personnel only. Establish clear communication protocols for reporting and responding to incidents involving hot glue equipment. 	2M
2. Initial Safety Checks	Electric shock risk from faulty equipment, Burning hazards from faulty equipment	3Н	 Inspect all electrical cords and plugs for visible signs of damage before use. Ensure the work area is dry and free from moisture to prevent electric shock. Use a residual current device (RCD) to reduce the risk of electric shock. Test portable appliance testing (PAT) tagged tools periodically to ensure they are compliant with safety standards. Check that the glue applicator's power switch functions correctly before each use. Disconnect the tool from the power source when not in use, during maintenance, or while changing accessories. Wear appropriate personal protective equipment (PPE), such as heat-resistant gloves, to protect against burns. 	2M



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			- Ensure that the tool's housing, nozzle, and any other parts are intact and not cracked or damaged.	1
			- Keep a first aid kit nearby, including treatment supplies for burn injuries.	
			- Follow manufacturer's instructions and guidance in safe operation and maintenance of the glue applicator.	
			- Utilize only extension leads rated for the poor load of the hot glue applicator.	
			- Avoid touching the nozzle or heated elements and and immediately after use to prevent burns.	
			- Ensure adequate lighting in the workspace to fact that clean subility and avoid accidental contact with hot surfaces.	
			- Provide commensive that ling for all operations on the correct and safe usage of hot glue applicators.	
			- Implement an oddy syst where income enced users are supervised by experienced operators.	
			- Ens. s. Il operative ar appropriate personal protective equipment, including heat-resistant gloves and st. signoggles	
			- Regularly has ect an amaintain the hot glue applicator to ensure it is operating efficiently and safely.	
3. Operating the	Inadequate training presenting personal		Pisplay lear corating instructions and warning signs near the machine.	
Machine Machine	injury risks, High temperatures present burn risks	3H	- Es. lis, an emergency procedure for incidents involving burns or other injuries.	1L
	Summons		Reinforce the importance of staying focused and attentive while using the machine to minimise a idents.	
			- Use temperature controls and settings carefully to avoid excessive heat output exceeding safe operational limits.	
			- Keep the workspace organised and free from clutter to prevent trips or interferences during operation.	
			- Prohibit any distractions such as mobile phone use or non-work-related conversations in the vicinity of	
			the machine.	
Transporting Materials	Manual handling injuries due to lifting,	2M		1L
ivialtilais	Trip hazards from obstructed work area			



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5. Finishing up	Danger of leaving, achine on after use, Possibility of remaining hot comments presenting a burn	ЗН		2M
6. Maintenance Checks	Electric shock risk from faulty equipment, Pinch point hazards while checking moving parts	3H		1L



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7. Emergency Response Preparation	Inadequate safety knowledge, Lack of appropriate safety gear	ЗН		2M



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8. Cleaning/Maintenance	Fire risk from flammable cleaning products, Eye irritation or demage from chemical cleaners	214		1L
9. Equipment Shutdown	Accident risk if applied hastily, Accidental burns or electric shocks if not shut down properly	3Н		1L



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				•
10. Disposal of Waste	Risk from toxic waste disposal without procedure having been followed,	3H		2M
Materials	Physical harm risk from machinery	011		2101



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				'



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

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

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/legislations/

Codes of Practice NSW: https://www.safework.nsw.gov.au/resource-library/lis > odes-oi racti

Northern Territory

Work Health and Safety (National Uniform Legislation) Act 2011

Work Health and Safety (National Uniform Legislation) Regulation 201

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

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 al. Safety Act

Occupational Health and afety gulations 2017

Legis on VIC: https://www.csafe.vic.gov.au/occupational-health-and-safety-act-and-

gulat

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	Signature	Date

SAFE WORK IN THE STATEMENT MONITORING AND REVIEW

The SWMS must be reviewed regularly to make sure it remains a fective of must be reviewed (and revised if necessary) if relevant control measures are revised. The view process should be carried out in consultation with workers (including contractors 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 mast ensure that 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 rest of the review are advised of the changes in a way that will enable them to implement their duties and the 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:

- Spot Checks.
- 2. Consultation with workers, contractors and sub-contractors.
- 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							

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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	COMMENTS	
The company details have been entered, including the project name and address.			
All relevant personnel consulted during the development of the SWMS.			
Name, signature, position and date signed of the person approving the SWMS.			
Specific personnel and qualifications, experience is noted in the SWMS.	7		
Provides a step-by-step process of tasks required to carry out the activity or task.	<u>k</u>		
Adequate risk assessment of any identified hazards has been completed.	\boxtimes		
Foreseeable hazards are identified and documented for each step.			
Any hazards listed in any site risk assessments have been added to the SWMS	\boxtimes		
SWMS initial risk (IR) column as well as residual risk (RR) column mpleted.	\boxtimes		
Check control measures added to the SWMS are the most effective selections			
Responsible person is assigned and listed on the property of the improvention control measures.			
Permit or licenses requirements specified, sur as Hot Work, Electric Work, Work at Heights etc.			
SWMS identifies plant and equipment to be us			
Details of inspection checks required for any equipment listed a noted on the SWMS.			
Describes any mandatory qualifications, experience, or skills required to perform the work.			
Applicable personal protective equipment is selected on the SWMS.			
Reflects and documents any legislative references and/or Australian Standards.			
Identifies any hazardous substances used with specific control measures in line with any SDS.	\boxtimes		
REVIEWED BY	DATE RE	DATE REVIEWED	
SIGNATURE	DATE CO	MPLETED	