

Compressed Air   SAFE WORK METHOD STATEMENT (SWMS)			
TASK OR ACTIVITY: Compressed Air			
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 PCBU 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	
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.	NAME	SIGNATURE	DATE
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 support 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			<b>Elimination</b> Remove the hazard.
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCEED	<b>Substitution</b> Replace the hazard.
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	<b>Isolation</b> Isolate People from the hazard
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.	<b>Engineering</b> Isolate the hazard.
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	Monitor and keep records	<b>Administrative</b> Change the work. <b>PPE</b>

**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 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	Slips, trips, and falls, Inadequate lighting	2M	<ul style="list-style-type: none"> <li>- Ensure a thorough inspection and assessment of the worksite prior to commencing work, identifying any potential hazards such as uneven surfaces, cables, or obstacles.</li> <li>- Maintain a clean and organised workspace by removing debris, equipment, and other materials that could cause slips, trips, and falls.</li> <li>- Provide adequate lighting in all areas where work with compressed air is being performed, ensuring shadows or glare does not hinder visibility and workers' ability to move safely.</li> <li>- Clearly mark any changes in level, such as steps or edges, with brightly coloured tape or paint to reduce the risk of slips and falls.</li> <li>- Install guardrails or temporary barriers around any open pits, trenches, or other drop-offs to prevent potential falls.</li> <li>- Place anti-slip mats or apply anti-slip surface treatments in areas prone to wet or slippery conditions to reduce the risk of slips.</li> <li>- Encourage workers to wear sturdy footwear with slip-resistant soles, providing appropriate safety gear when necessary.</li> <li>- Properly store cables, hoses, and tools when not in use, preventing entanglements and trip hazards.</li> <li>- Implement regular maintenance and housekeeping practices, promptly addressing any spills or hazards that arise during work.</li> <li>- Conduct regular worker training on proper workplace health and safety procedures, ensuring everyone is aware of the risks associated with compressed air tasks and proper hazard mitigation techniques.</li> <li>- Require workers to report any hazards, near misses, or incidents related to slips, trips, and falls to their immediate supervisor for investigation and corrective action.</li> <li>- Routinely assess the effectiveness of implemented control measures, determining whether they are sufficient to minimise risks or if additional actions need to be taken.</li> <li>- Consult with workers to identify any new potential hazards or concerns regarding slips, trips, and falls during the preparation stage, effectively addressing these issues to ensure safe working conditions for all involved.</li> </ul>	1L	
2. Inspection	Poorly maintained equipment, Untrained personnel	3H	<ul style="list-style-type: none"> <li>- Conduct regular equipment inspections and maintenance according to manufacturer's guidelines to ensure all components are in proper working condition.</li> <li>- Replace worn or damaged parts promptly to avoid accidents or malfunctions resulting from poorly maintained equipment.</li> <li>- Provide comprehensive training for all personnel involved in the operation, inspection, and maintenance of compressed air systems. This includes correct handling procedures, awareness of potential hazards, and appropriate emergency response protocols.</li> </ul>	2M	

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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"> <li>- Develop and implement Standard Operating Procedures (SOPs) for compressed air usage that address the safe handling, inspection, and maintenance of equipment to minimise risks associated with poorly maintained systems.</li> <li>- Ensure all operators of compressed air equipment hold relevant qualifications or certifications, as required by workplace regulations and industry standards.</li> <li>- Implement a clear reporting process for any issues related to equipment maintenance, ensuring any identified concerns are addressed promptly by qualified personnel.</li> <li>- Clearly display warning signs and labels on compressors and related equipment to remind users of potential hazards and necessary precautions.</li> <li>- Establish and maintain a well-organised work area to minimise the risk of accidents resulting from cluttered conditions or improper storage of tools or materials.</li> <li>- Provide appropriate personal protective equipment (PPE), such as safety goggles, gloves, and hearing protection for personnel working with or around compressed air systems.</li> <li>- Encourage a strong safety culture within the workplace through regular communication, training, and reinforcement of safe work practices when using compressed air equipment.</li> <li>- Regularly review and update the Safe Work Method Statement (SWMS) for compressed air operations to incorporate any relevant new information or changes in industry best practices. By doing so, you'll ensure your worksite remains compliant with current Australian Workplace Health and Safety regulations.</li> </ul>		
3. Set up Work Area	Incorrect identification of work area, Poor housekeeping	2M	<ul style="list-style-type: none"> <li>- Conduct a thorough site assessment and clearly identify the work area using signage or barricades to minimise the risk of unauthorised entry.</li> <li>- Provide training and safety induction for all workers involved in the task, ensuring they understand their roles and responsibilities.</li> <li>- Schedule regular inspections of the work area to maintain compliance with workplace housekeeping standards.</li> <li>- Establish designated access points and pathways for workers and visitors to navigate around the work area safely.</li> <li>- Store tools, materials, and equipment in their appropriate storage locations when not in use, keeping the work area clean and organised.</li> <li>- Implement a waste management plan to properly dispose of hazardous materials, such as used rags and oil-based products, following Australian regulations.</li> <li>- Regularly clean up spilled liquids or debris to prevent slip, trip and fall hazards.</li> <li>- Mark any uneven surfaces or potential hazards within the work area using clear warning signs, hi-vis tape or safety cones.</li> </ul>	1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<ul style="list-style-type: none"> <li>- Ensure proper use of personal protective equipment (PPE), including high-visibility vests, safety footwear, and hard hats, for all workers entering the work area.</li> <li>- Keep an updated record of who is authorised to enter the work area and ensure no unauthorised personnel are granted access.</li> <li>- Organise a buddy system for critical tasks requiring more than one person to complete safely, ensuring adequate communication and cooperation among team members.</li> <li>- If working at heights, implement the necessary fall protection measures, such as guardrails or personal fall arrest systems, in accordance with Australian height safety standards.</li> <li>- Inspect and maintain all relevant equipment, such as air compressors and hoses, to identify wear and tear or damage that may impact safe operation.</li> <li>- Communicate changes or updates to the Safe Work Method Statement (SWMS) and verify procedures to all personnel involved in the task, ensuring continuous improvement of health and safety practices in line with Australian WHS regulations.</li> </ul>		
4. Equipment Preparation	Faulty equipment, Misuse of equipment, Poor storage	3H	<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	

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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
5. Establishing Tools & Materials	Falling objects, Manual handling injuries	2M		1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
6. Compressed Air Set up	Leakage, Noise pollution	3H	[REDACTED]	1L	
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		
			[REDACTED]		



3H

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
8. Commence Work Process	Miscommunication, Failure to follow procedures	2M		1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
			<div></div> <div></div> <div></div> <div></div> <div></div> <div></div>		
9. Pneumatic Tool Usage	Equipment malfunction, Flying debris	3H	<div></div> <div></div> <div></div>	2M	

SAMPLE



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
12. Work Interruptions/Procedure Alterations	Lack of hazard awareness, Bypassing safety protocols	3H	[REDACTED]	2M	
13. Contingency Planning	Insufficient planning, Overlooking potential hazards	2M		1L	

**SAMPLE**





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
16. Post-Work Inspections	Missed defects, Inadequate record keeping	2M		1L	

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SPECIFIC WORK STEPS	HAZARDS THAT MAY ARISE	INITIAL RISK	SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS	RESIDUAL RISK	NAME OF PERSON
17. Staff Debrief	Failing to learn from previous incidents Lack of accountability	2M		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
18. Training & Development	Ineffective training provided Ignorance of workplace hazards	3H		2M	

Sample

2M

ar performance  
accurate reporting

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
			<div></div> <div></div> <div></div> <div></div> <div></div>		
20. Continuous Improvement	Failure to address identified issues, Resistance to change	2M	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>	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

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 IF ANY STATE THAT 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>

### 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>

### 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-codes-of-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>

### 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/workplace-safety-laws>

Codes of Practice NT: <https://worksafe.nt.gov.au/laws-and-compliance/codes-of-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

### 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>

### 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.

## 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	