

**Lasers Classes 3A, 3B, 3R | SAFE WORK METHOD STATEMENT (SWMS)**

**TASK OR ACTIVITY: Lasers Classes 3A, 3B, 3R**

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**

	NAME	SIGNATURE	DATE
Safety meetings or toolbox talks will be scheduled in accordance with legislative requirements to first identify any site hazards, to conduct and 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	4A ACUTE	DO NOT PROCEED	<b>Elimination</b> Remove the hazard.
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review before work starts.	<b>Substitution</b> Replace the hazard.
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	2M MODERATE	Ensure control measures in place.	<b>Isolation</b> Isolate People from the hazard
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	1L LOW	Monitor and keep records	<b>Engineering</b> Isolate the hazard.
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH			<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	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"/>					

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	Improper setup, Lack of personal protective equipment	2M	<ul style="list-style-type: none"> <li>- Provide thorough hands-on training for employees on the proper setup and use of lasers Classes 3A 3B, 3R to minimise the risk of improper setup.</li> <li>- Establish a pre-use inspection procedure to ensure all equipment is in good working order and that lasers are set up properly prior to operation.</li> <li>- Implement clear signage around work areas where lasers are being used to communicate the hazards and risks associated with their use.</li> <li>- Require all personnel working with or around lasers to wear appropriate personal protective equipment (PPE) such as goggles with adequate optical density, gloves and long sleeves to protect against direct or reflected laser beams and potential burns.</li> <li>- Develop and distribute a written Safe Work Method Statement (SWMS) outlining the necessary steps, precautions, and controls required for working with lasers Classes 3A 3B, 3R.</li> <li>- Designate a Laser Safety Officer (LSO) who will be responsible for overseeing all laser-related activities and ensuring compliance with safety regulations and guidelines.</li> <li>- Schedule periodic audits and inspections of laser workstations to ensure adherence to established safety protocols and to identify any potential equipment malfunctions or weaknesses.</li> <li>- Limit access to work areas containing Class 3A, 3B, and 3R lasers by only allowing trained and authorised personnel to work with or around these devices.</li> <li>- Encourage workers to report any identified hazards, near miss incidents or concerns related to laser safety as soon as possible, fostering an open communication environment on safety issues.</li> <li>- Review and update the SWMS periodically to stay current with any changes in legislation, industry best practices, and advancements in laser technology; ensuring optimal safety measures are always in place.</li> </ul>	1L	
2. Equipment Inspection	Faulty equipment, Insufficient training	2M	<ul style="list-style-type: none"> <li>- Regular maintenance and inspection: Conduct routine maintenance checks and inspections of the equipment to detect any faults, wear, or damage early on, ensuring that it operates safely at all times.</li> <li>- Adequate training and certification: Ensure that all workers handling laser equipment have received proper training and possess the necessary certifications to operate Class 3A, 3B, and 3R lasers effectively and safely.</li> <li>- Clear instructions for inspection: Provide clear, easy-to-follow guidelines and procedures for equipment inspection, which should be readily accessible to all team members.</li> <li>- Implement a pre-use inspection checklist: Develop and distribute a comprehensive checklist for workers to follow before using any laser equipment, including Class 3A,</li> </ul>	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
			<p>3B, and 3R lasers, as a way to ensure complete safety and adherence to appropriate protocols.</p> <ul style="list-style-type: none"> <li>- Establish a reporting system: Encourage workers to report any faults or inadequacies in the equipment immediately, with a no-blame culture, by providing an accessible and straightforward process for doing so.</li> <li>- Electrical safety: Inspect all electrical connections, cables, and power sources regularly for damage, wear, and corrosion, ensuring that they meet safety standards and function properly.</li> <li>- Proper storage and handling: Store all laser equipment securely when not in use, avoiding exposure to extreme temperatures, moisture, or other hazardous conditions that may compromise their integrity.</li> <li>- Availability of personal protective equipment (PPE): Ensure that all workers are equipped with adequate PPE, such as safety goggles and gloves, and understand how to use them properly while operating laser equipment.</li> <li>- Manufacturer's guidelines adherence: Strictly follow manufacturer-recommended inspection routines and pay extra attention to their fault detection recommendations.</li> <li>- Regularly review training materials: Update training materials and courses frequently—based on industry standards and advancements in laser technology—to ensure workers maintain a deep understanding of safe procedures, thus minimising the risk of accidents or injuries.</li> <li>- Immediate removal of faulty equipment: Once a fault is discovered, tag the equipment as "out of service" immediately, and ensure it is securely stored away from operational areas to prevent accidental use.</li> <li>- Encourage open communication: Foster a supportive work environment that encourages workers to ask questions, seek clarification, or request additional training if they are unsure about any aspect of equipment inspection or laser safety protocols. This helps to maintain a consistently high level of safety awareness within the workplace.</li> </ul>		
3. Laser Alignment	Incorrect alignment, Eye exposure to laser beams	3H	<ul style="list-style-type: none"> <li>- Comprehensive Laser Safety Training: Ensure that all personnel involved in the alignment process undergo thorough laser safety training, which includes hazard identification, operation procedures, and emergency response protocols.</li> <li>- Use of Personal Protective Equipment (PPE): Provide appropriate PPE, such as laser safety goggles with suitable wavelength protection, to minimise the risk of eye exposure to laser beams during the alignment process.</li> <li>- Establish a Controlled Access Area: Set up designated laser work zones with restricted access, allowing only authorised and trained personnel to enter the area during alignment procedures.</li> <li>- Pre-Alignment Inspection: Conduct a comprehensive inspection of the laser equipment, including mounts, beam paths, and other associated components to identify any potential hazards or misalignments before commencing work.</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>- Beam Blockers and Shields: Use beam blockers and shields to prevent accidental exposure to stray beams during alignment procedures.</li> <li>- Utilise Lower-Power Alignment Techniques: Whenever possible, align the system using lasers with low-power settings to minimize the risks associated with higher-power beams.</li> <li>- Visible Aiming Beams: Employ visible aiming beams for preliminary alignment checks, reducing the need for direct exposure to higher-class laser beams during the alignment process.</li> <li>- Proper Labeling and Signage: Clearly label all areas containing lasers with appropriate warning signs indicating the class of lasers as well as outline the specific hazards present and necessary precautions required.</li> <li>- Apply Laser Shutter Systems: Make use of shutters to block the beam immediately when it's not in use, providing an additional layer of protection from accidental exposures.</li> <li>- Maintain Regular Maintenance Schedules: Schedule periodic inspections, cleanings, and preventive maintenance of all laser equipment to ensure optimal functioning and minimize the potential for unforeseen hazards to arise during work procedures.</li> <li>- Documentation and Recordkeeping: Maintain detailed records of all laser-related activities, including training sessions, risk assessments, and incident reporting, ensuring transparency and accountability within the workplace.</li> <li>- Emergency Response Plan: Develop an emergency response plan, detailing the necessary steps to take in case of a laser-related incident or injury, as well as providing first aid resources and eye-wash stations in the work area.</li> <li>- Periodic Safety Audits: Conduct routine assessments of the workplace's laser safety practices, monitoring compliance with relevant guidelines and regulations, and identifying opportunities to improve overall safety measures.</li> </ul>		
4. Workspace Setup	Inadequate work area, Trip hazards	2M	<p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	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
			[REDACTED]		
5. Laser Operation	Unauthorised access, Inadequate warning signs	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
8. Ventilation Control	Fumes buildup, Insufficient ventilation	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]		
9. Emergency Response	Delayed response, Insufficient first aid supplies	2M	[REDACTED]	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
10. Waste Disposal	Chemical spills, Incorrect waste separation	M	[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. Equipment Shutdown	Improper shutdown of equipment	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]		
12. Clean-up and Storage	Improper storage, use of equipment	2M	[REDACTED]	1L	
			[REDACTED]		

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]		

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

**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-of-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/workplaces-and-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>

**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>

**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

**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:		

**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"/>	
<b>REVIEWED BY</b>		<b>DATE REVIEWED</b>	
<b>SIGNATURE</b>		<b>DATE COMPLETED</b>	