Line Borer | SAFE WORK METHOD STATEMENT (SWMS)

TASK OR ACTIVITY: Line Borer

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, secondly to communicate those hazards and then to further take steps to either eliminate or control each hazard.			
If an incident or a near miss occurs, all work must stop immediately. Depending on the severity of the incident, a meeting will be called with all workers to amend the SWMS if required. The meeting may also be an educational opportunity.			
Any changes made to the SWMS after an incident or a near miss must be approved by the Person Conducting Business or Undertaking and communicated to all relevant personnel.			
The SWMS must be kept and be available for inspection at least until the work is completed. Where a SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to which the SWMS relates, then the SWMS must be kept for at least two years from the occurrence of the notifiable incident.			

CLIENT OR PRINCIPAL CONTRACTOR DETAILS	
Client:	SCOPE OF WORKS
Project Name:	Provide a detailed description of the specific work being carried out (otherwise known as a scope of works).
Project Address:	
Project Manager:	
Contact Phone:	
Project Manager Signature:	
Date SWMS supplied to Project Manager:	

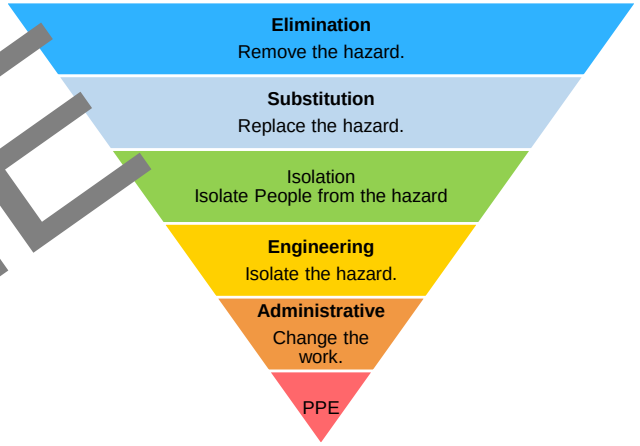
ANY HIGH-RISK CONSTRUCTION WORK BEING CARRIED OUT	
☐ involves a risk of a person falling more than 2 meters.	☐ is carried out on or near pressurised gas mains or piping.
☐ is carried out on a telecommunication tower.	☐ is carried out on or near chemical, fuel or refrigerant lines.
☐ involves demolition of an element of a structure that is load-bearing.	☐ is carried out on or near energised electrical installations or services.
☐ involves demolition of an element related to the physical integrity of a structure.	☐ is carried out in an area that may have a contaminated or flammable atmosphere.
☐ involves, or is likely to involve, disturbing asbestos.	☐ involves tilt-up or precast concrete.
☐ involves structural alteration or repair that requires temporary support 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 than 1.5m or tunnel involving use of explosives.	☐ is carried out in areas with artificial extremes of temperature.
☐ is carried out in or near water or other liquid that involves a risk of drowning.	☐ involves diving work.

ANY HIGH-RISK MACHINERY OR EQUIPMENT NEARBY							
☐ Forklift	☐ Crane/s	☐ Hoist/s	☐ Excavator	☐ Backhoe/Loader	☐ Boom Lift	☐ EWP	☐ Genie Lift
☐ Trencher	☐ Drilling Rig	☐ Trucks	☐ Formwork	☐ Bobcat	☐ Flammable Gas	☐ Fuel	☐ Dozer
☐ High Voltage	☐ Mulcher	☐ Tilt-up Panels	☐ Roller	☐ Scissor Lift	☐ Tractor	☐ Other -	

RISK MATRIX

LIKELIHOOD	INSIGNIFICANT	MINOR	MODERATE	MAJOR	CATASTROPHIC	SCORE	ACTION
ALMOST CERTAIN	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4 ACUTE		
LIKELY	2 MODERATE	3 HIGH	3 HIGH	4 ACUTE	4 ACUTE	4A ACUTE	DO NOT PROCEE
POSSIBLE	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	4 ACUTE	3H HIGH	Review befo work starts.
UNLIKELY	1 LOW	1 LOW	2 MODERATE	3 HIGH	4 ACUTE	2M MODERATE	Ensure control measures in place.
RARE	1 LOW	1 LOW	2 MODERATE	3 HIGH	3 HIGH	1L LOW	nitor and k records

HEIRARCHY OF CONTROLS



Notes on Hierarchy of Controls: Elimination methods are the most effective and preferre en co lli d hazard. Substitution is the second most effective method of controlling a hazard. Engineering by isolation is the ost ef ve, while Administrative Controls by changing the work is the fourth most effective method. PPE (Personal Protective Eq ment) he least effective method.

PERS NAL TECTIVE EQUIPMENT (PPE)

FOOT PROTECTION	HAND PROTECTION	HEAD PROTECTION	HEARING PROTECTION	E PROTE	SPIRATORY PROTECTION	FACE PROTECTION	HIGH-VIS CLOTHING	PROTECTIVE CLOTHING	FALL PROTECTION	SUN PROTECTION	HAIR/JEWELLERY SECURED
											
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

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	Trip hazards, Electrical hazards	2M	- Regular inspection and maintenance of the work area to identify and rectify any potential trip hazards such as uneven surfaces, cords and cables, or debris. - Use proper signage and barriers around the Line Borer machine and in designated walkways to minimise risk from trip hazards as workers move throughout the area. - Ensure that all power cords and extension leads used with electrical equipment are in good condition, without damage, frayed wiring or exposed conductors. - Follow appropriate lockout/tagout procedures when operating, servicing or maintaining electrical equipment in order to prevent accidental energization. - Use Ground Fault Circuit Interrupter (GFCI) outlets or portable GFCI devices to protect against ground faults and reduce the likelihood of electrical shocks. - Provide adequate lighting in the work area to ensure workers can easily identify and avoid potential risks related to trip and electrical hazards. - Implement regular training sessions for employees to reinforce awareness of workplace health and safety policies, including how to identify and minimise trip and electrical hazards in their day-to-day operations. - Store tools, materials, and equipment properly when they are not in use to keep the work area organised and free from clutter that may contribute to trip hazards. - Encourage workers to wear proper footwear that provides support, slip resistance, and electric shock protection as well as other required personal protective equipment (PPE) where necessary. - Ensure that a qualified electrician conducts inspections of all electrical installations at regular intervals to identify any potential electrical issues before they escalate into serious hazards.	1L	
2. Line Borer Set-Up	Manual handling, Falling equipment	3H	- Implement proper manual handling training for all workers involved in the Line Borer Set-Up, emphasising correct lifting techniques and body mechanics to reduce the risk of injuries. - Schedule regular breaks for workers during the set-up process to prevent fatigue and ensure they have adequate time for rest and recovery. - Provide appropriate personal protective equipment (PPE), such as gloves, safety footwear, and high-visibility vests to all employees involved in the Line Borer Set-Up. - Utilise mechanical aids or equipment such as trolleys, hoists, or forklifts for handling heavy or awkward items when setting up the Line Borer, reducing the strain on workers. - Ensure that all equipment used during the Line Borer Set-Up, including lifting devices and rigging, are regularly inspected and maintained according to the manufacturer's guidelines. - Identify potential pinch points, trip hazards, or other obstacles in the working area and eliminate or minimise them before beginning the set-up process.	2M	

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			- Establish a clear communication system among workers engaged in the Line Borer Set-Up, including using hand signals, two-way radios, or designated spotters to reduce the risk of accidents or mishaps. - Implement a buddy system, whereby workers assist and watch out for each other during the set-up process, promoting teamwork and enhancing safety awareness. - Ensure that any equipment or materials that need to be lifted or manipulated during the set-up process are securely fastened and properly balanced to minimise the risk of falling equipment. - Develop and implement an emergency response plan specific to situations involving falling equipment or injuries related to manual handling during the Line Borer Set-Up, including first aid procedures and evacuation protocols. - Conduct regular safety meetings and toolbox talks to refresh workers' knowledge on proper techniques, hazard identification and control measures linked to the Line Borer Set-Up process. - Regularly review and update the SWMS to reflect new information or changes in the workplace environment, ensuring that all control measures are up-to-date and effective in minimising hazards during the Line Borer Set-Up.		
3. Measuring Workpiece	Sharp edges, Eye strain	3H	- Personal Protective Equipment (PPE): Ensure that all workers wear appropriate PPE, including safety glasses or goggles and gloves, to protect their eyes and hands from sharp edges and debris. - Proper Training and Supervision: Offer training on how to handle tools and equipment involved in the measuring process, as well as educate them on potential hazards and risks associated with this task. Ensure that trained personnel supervise the work step. - Pre-Inspection: Conduct a thorough inspection of the workpiece before measuring, to identify any hazardous sharp edges or burrs that may be present. - Correct Lighting: Ensure sufficient lighting is provided at the workstation to minimise eye strain during the measuring process. - Ergonomic Design: Utilise ergonomic tools and workstations that help maintain proper posture and minimise repetitive stress on the worker's body. - Breaks and Rest Periods: Encourage regular breaks and rest periods to prevent eye fatigue and strain, including following the 20-20-20 rule: Every 20 minutes, take a 20-second break and look at something 20 feet away. - De-burring Tools: Provide tools specifically designed for removing burrs and sharp edges from workpieces to reduce the risk of injury. - Use of Precision Instruments: Equip workers with high-quality measuring instruments to facilitate accurate measurements and prevent eye strain.	2M	

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			- Clear Communication: Implement clear communication protocols among team members to make sure they follow safety precautions and report any issues immediately. - Regular Maintenance: Ensure that all measuri[redacted]ools and equipment are routinely checked and maintained for damages, ensu[redacted] their accuracy and safe operation. - Emergency Procedures: Establish and com[redacted]unicate[redacted]ergency procedures in case of accidents, injuries or equipment failure[redacted]d to the measuring work step. - Continuous Improvement: R[redacted]ularly review and [redacted]date the [redacted]WMS and control measures, taking into account [redacted]rker feedback, inc[redacted]nt [redacted]orts, and industry best practices to ensure continuous i[redacted]rovement in work[redacted]e health and safety.		
4. Securing Workpiece	Crush injuries, Pinc[redacted]oint[redacted]	[redacted]3H	[redacted]	1L	

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			[redacted]		
5. Positioning Line Borer	Pinch points, Noise exposure	2M	[redacted]	1L	

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			[redacted]		
6. Aligning Machine	Incorrect alignment, Mechanical fa[illegible]e	2M	[redacted]	1L	

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			[redacted]		
7. Drilling Process	Entanglement, Flying debris	3H	[redacted]	2M	

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			[redacted]		
8. Boring Process	Overheating, Vibration exposure	3H	[redacted]	2M	

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			[redacted]		
9. Reaming Process	Projectiles, Repetitive motion injuries	2M	[redacted]	1L	

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			[redacted]		
10. Tool and Cutter Change	Sharp edges, Pinch points	3H	[redacted]	1L	

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			[redacted]		
11. Quality Check	Eye strain, Incorrect measurements	2M	[redacted]	1L	

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			[redacted]		
12. Cleanup and Shutdown	Chemical exposure, Manual handling	2M	[redacted]	1L	

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			[redacted]		

JOB STEP	POTENTIAL HAZARDS	IR	CONTROL MEASURES	RR	RESPONSIBLE PERSON
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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 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

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

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/forms-and-resources/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

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 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

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	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 changed. 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	☐ 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.	☐	☐	
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 SWM	☐	☐	
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.	☐	☐	
Check control measures added to the SWMS are the most effecti se tions.	☐	☐	
Responsible person is assigned and listed on the SWMS for the im ementa of cont measures.	☐	☐	
Permit requirements specified, such as Hot Wor Electrical Work, W at Heights etc.	☐	☐	
SWMS identifies plant and equipment to be us d.	☐	☐	
Details of inspection checks required for any equipment listed ar noted on the SWMS.	☐	☐	
Describes any mandatory qualifications, experience, training 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 REVIEWED**	
SIGNATURE		**DATE COMPLETED**	