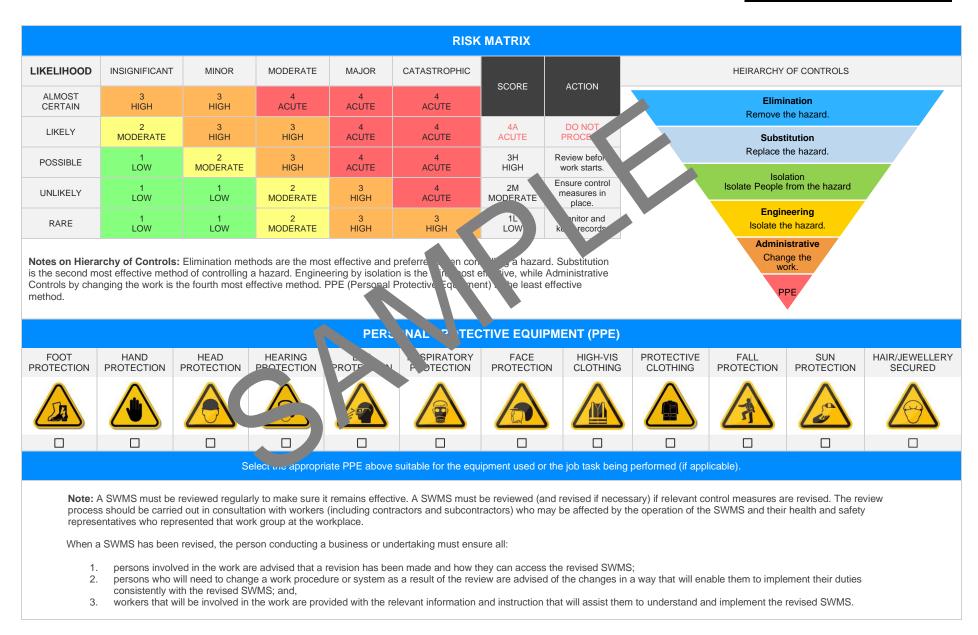
Metal Stamping Press SAFE WORK METHOD STATEMENT (SWMS)											
TASK OR ACTIVITY: Metal Stamping Press											
Business Name: [Company Name]		ABN: [ABN]	SWMS#								
Business Address: [Company Address]											
Contact Person:	Phone: [Phone]	E gil:									
THIS SAFE WORK METHOD STATEMENT IS APPROVED BY THE PLOT OF THE PROJECT											
Under the Work Health and Safety Regulation (WHS Regulation), a person conductive proposed work starts.	acting a business or undertaking (H BU) is	required to thurs at a safe work method s	tatement (SWMS) is prepared before								
Full Name:											
Signature:		Title:	Date:								
Details of the person(s) responsible for ensuring implementation, monitoring	compliance of the SWMS well as review	vs and modifications of the SWMS.									
Full Name:		Title:	Phone:								
ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS WMS. ST HAVE THE FOLLOWING COMMUNICATED	N. TE AND DATED SIGNATURE OF A CO. MUNICATED TO IN THE DEVELO	LL RELEVANT PERSONNEL WHO HAVE B OPMENT AND APPROVAL OF THIS SWMS	EEN CONSULTED AND								
Safety meetings or toolbox talks will be sched ed in accordance with egislative requirements to first identify any site hazards, conduction inicial those hazards and then to further take steps to either conduction of the activation hazard.	NAME	SIGNATURE	DATE								
If an incident or a near miss occurs, all work must study unately. 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						
Project Address:					known as cope of works)						
Project Manager:											
Contact Phone:											
Project Manager	Signature:										
Date SWMS supp	olied to Project Manag	er:									
		ANY HIG	H-RISK CON JUCT	N JRK BEING	ARRIED OUT						
involves a risk of	a person falling more than	2 meters.		is carried out on c	r near pressurised gas mair	ns or piping.					
is carried out on a	a telecommunication tower			☐ is carried out on or near chemical, fuel or refrigerant lines.							
involves demolition	on of an element of a struct	ure that is load-be		☐ is carried out on or near energised electrical installations or services.							
involves demolition	on of an element related to	the physical integrit of a s	tr e.	is carried out in an area that may have a contaminated or flammable atmosphere.							
involves, or is like	ely to involve, disturbing a	estos.		involves tilt-up or precast concrete.							
involves structura	al alteration or repair that re	mporal, upp to	o prevent collapse.	is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor.							
is carried out in o	r 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/n	ear a shaft or trench deepe	er than 1.5m or tunnel invol-	ving use of explosives.	is carried out in areas with artificial extremes of temperature.							
is carried out in o	r near water or other liquid	that involves a risk of drow	ning.	involves diving wo	ork.						
		ANY	HIGH-RISK MACHINI	ERY OR EQUIPMEN	FNEARBY						
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 -					







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	Unsecured equipment, Lack of safety training	ЗН	 Implement a thorough safety training program that will educate workers about the potential hazards, safe operating procedures and energency protocols. Develop and enforce a strict policy on the user of Personal Protective Equipment (PPE) to defend against injuries. Ensure all equipment is securely fixed onto a table or callation base to prevent accidents due to slippage or toppling. Review the layout of the workplace to eliminate to becessare ostacles, providing clear pathways for workers. Regularly inspect out of equipment to detect and vectify any faults or damage promptly. Provide appropriate signer to remine the about the risks and safety precautions applicate to the task? Inves the tay upper how thenance of machines by trained professionals to detect and fix faults that used leave shazardous incidents. Store leavy upper to store a low level to minimise risk of injury if equipment falls or offs unspector. Create and enforce strict no-go zones around dangerous machinery where ecessare. Install reliable safety features like emergency stop buttons on all machines. Mandate regular breaks for workers to minimize fatigue-induced errors, leading to serious incidents. Install reliable safety features like emergency stop buttons on all machines. Institute a two-man rule for certain high-risk tasks – no one should perform these tasks alone without someone nearby trained to assist in an emergency. 	2M	
2. Machine Start-up	Unexpected start-ups, Electrical hazards	4A	 Ensure that all machine operators are properly trained on the Metal Stamping Press and have been given comprehensive safety briefings prior to operation. Implement a lockout/tagout system to prevent unexpected start-ups. This entails de-energising the machine and putting a lock or tag on the power source so it can't be started up accidentally. Regularly inspect and maintain electrical equipment and fixtures to prevent electrical hazards. Always turn off the machine and disconnect from power before doing any inspection, maintenance, adjustments, or repairs. Use appropriate personal protective equipment (PPE) such as safety goggles, gloves, and steel-toed shoes for added protection while operating the machine. 	ЗH	



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																												
			- Keep the work area around the machine clean and clutter-free to minimise trip and fall hazards.																														
			- Ensure the machine is grounded correctly to avoid dectrical faults or shocks.																														
			- Follow strict procedures for starting up the scenine, with checks in place to ascertain that all safety devices function placerly before scartain commences.																														
			- Install emergency stop buttons at easily acceptible ocations around the machine. Train operators on when and how to use these.																														
			- Make certain operators only lise tools and equitment are oved for use with the Metal Stamping Press machine. Is incompatible tool and a cause unexpected reactions or damage.																														
			- Regularly to safe and revery safe to tking produces and procedures associated with the mach to startup to insure the optimum relevant and effective.																														
			- Work rs, ust be propriately trained on how to load materials onto the metal stampler p. s. This cludes correct lifting and loading techniques.																														
			- Use on lerse of Protective Equipment (PPE), such as safety glasses, gloves, and el-toe shoes hould be enforced during the loading process.																														
			- Working hould be familiarised with the emergency stop button or procedures to alt open on if needed.																														
																															- gular equipment maintenance and checks are crucial to reduce risk of sudden manunctions that could cause falling objects or trauma injuries.		
			 Adequate lighting should be provided to ensure workers can see clearly while loading materials onto the press. 																														
3. Loading Material	Falling objects, Trauma injury risks	ЗН	- A designated spotter or supervisor should be present to oversee work activities and ensure safety measures are being followed.	2M																													
			- Encourage use of proper handling tools e.g. forklift, pallet jack, etc., which can minimise direct handling of heavy materials and hence lower risks of injury.																														
			- A clean and organised workplace will help prevent tripping hazards during material handling.																														
			- Implement a buddy system for loading heavy items – never allow a single worker to handle a heavy load alone.																														
			- Restrict access to only necessary personnel in the immediate area where the press is being loaded.																														
			- Storage racks and shelves for material storage should be sturdy and well anchored to prevent falls or accidental topples.																														
			- An updated Risk Assessment plan should be developed for loading tasks to identify potential risks and guide prevention measures.																														

order complete swms

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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
			- Ensure workers take regular breaks to combat fatigue, which can lead to errors in judgement or clumsiness, thereby causing accidents.		
4. Operating the Press	Trapping/crushing, Noise pollution	44		3H	
5. Unloading Finished Parts	Cuts and abrasions, Manual handling injuries	зн		2M	

Version 2.5



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
6. Repeating Process	Repetitive work injuries, Long-term exposure to noise	4A		2М	



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
7.Maintenance & Cleaning	Exposure to chemicals, Slip/Trip/Fall	ЗН		2М	

Version 2.5

Date of Issue:



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.Equipment Shutdown	Accidental start-ups, Electric shock risk	4A		ЗН	



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
9.Sudden Machine Stop	Injury from trapping/crusning, Electrocution risk	4A		3Н	



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. Changing Tools/Dies	Sharp object hazards, Heavy lifting injuries	ЗН		2М	
11. Reporting Defects/Issues	Psychological stress, Communication breakdown	2M		1L	

Version 2.5



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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. Inspecting Finished Products	Eye strain, Cut and abrasion hazards	2M		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
	S				
13.Rest Breaks	Dehydration, Fatigue	2M		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
	S				
14.Emergency Stop Activation	Panic situations, Uncoordinated evacuation	ЗН		2М	



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
15.Material Disposal	Handling hazardous waste materials, Exposure to airborne particles	ЗН		2М	

Version 2.5

Date of Issue:



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
	S				

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 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	Victoria Ordipational Health and Safety Acta 04 Occupational Health and affety orgulations 2017 Legismon VIC: <u>https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and- rulations</u> ordes of charactice VICouttps://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/legislati- Codes of Practice NSW: https://www.safework.nsw.gov.au/legal-obligations/legislati-	Western Australia Work Health and Safety Act 2020 Work Health and Safety Regulations 2022 Legislation Western Australia: <u>https://www.commerce.wa.gov.au/worksafe/legislation</u> Codes of Practice WA: <u>https://www.commerce.wa.gov.au/worksafe/codes-practice</u>							
Northern Territory Work Health and Safety (National Uniform Legislation) Act 2011 Work Health and Safety (National Uniform Legislation) Regulation 2011 Legislation NT: https://worksafe.nt.gov.au/laws-and-compliance/workplace-serve-laws Codes of Practice NT: https://worksafe.nt.gov.au/laws-and-compliance/workplace-serve-laws Codes of Practice NT: https://worksafe.nt.gov.au/laws-and-compliance/workplace-serve-laws	Safe Work Australia Links Law and Regulation (All States): <u>https://www.safeworkaustralia.gov.au/law-and-regulation</u> Model Codes of Practice: <u>https://www.safeworkaustralia.gov.au/resources-publications/model- codes-of-practice</u> Model Codes of Practice							
South Australia Work Health and Safety Act 2012 (SA) Work Health and Safety Regulations 2012 (SA) Legislation for SA: <u>https://www.safework.sa.gov.au/resources/legislation</u> Codes of Practice for SA: <u>https://www.safework.sa.gov.au/worf_aces/codes-of-practice#COPs</u>	 Managing noise and preventing hearing loss at work Confined spaces Labelling of workplace hazardous chemicals Managing risks of hazardous chemicals in the workplace Welding processes 							
Tasmania Work Health and Safety Act 2012 Work Health and Safety (Transitional and Consequential Provisions) Act 2012 Work Health and Safety Regulations 2012 Work Health and Safety (Transitional) Regulations 2012 Legislation for TAS: 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	 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 							
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.	 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:		
			Datu		
			ı te:		
			Date:		

SAL WO A STHUD STATEMENT MONITORING AND REVIEW

The SWMS must be reviewed regularly to revised if necessary) if relevant control measure are revised if necessary) if relevant control measure are revised if necessary if relevant control measure are revised of the SWMS and their health and safety representatives who reworkplace.

ke sure it remains effective and must be reviewed (and are subcontractions) who may be affected by the operation sentatives who received that work group at the

When the SWMS has been revised the PCBU must ensure that all persons involved with the work are advised that a revision has been made and how they can access the revised SWMS, including all persons who will need to change a work procedure or system as a result of the review are advised of the changes in a way that will enable them to implement their duties consistently with the revised SWMS. All workers that will be involved in the work must be provided with the relevant information and instruction that will assist them to understand and implement the revised SWMS.

The SWMS must be monitored regularly for the effectiveness of ensuring hazard controls are effective in reducing the risk of incidents, keeping the workplace safe for all personnel. The person responsible for monitoring the effectiveness of the Safe Work Method Statement should employ a multi-faceted approach which includes but is not limited to:

- 1. Spot Checks.
- Consultation with workers, contractors and sub-contractors.
- 3. Internal audits on a continual basis.

An approach of continuous improvement, promptly recording inconsistencies or deficiencies, followed up by immediate corrective action and consultation with all relevant personnel ensures that the PCBU is consistently developing ever-improving systems of safe work principles.

REVIEW NUMBER	1	2	3	4	5	6	7
NAME							
INITIALS							
DATE							

SAFE WORK METHOD STATEMENT REVIEW CHECKLIST

This Safe Work Method Statement Review Checklist is to be followed and used upon initial development of the SWMS to help ensure that all steps have been adequately taken before work commences. Think of this document as an internal audit review checklist before commencing work, and may form part of a Toolbox Talk (safety meeting) and may be used as an opportunity for education and training.

ITEMS WHICH MUST BE INCLUDED IN THE SWMS	COMPLETED	TO BE DONE	COMMENTS
The company details have been entered, including the project name and address.			
Names and signatures of all relevant personnel consulted during the development of the SWMS.		P	
Name, signature, position and date signed of the person approving the SWMS.			
Specific personnel and qualifications, experience is noted in the SWMS.	–		
Provides a step-by-step process of tasks required to carry out the activity or task.			
Adequate risk assessment of any identified hazards has been completed.			
Foreseeable hazards are identified and documented for each step.			
Any hazards listed in any site risk assessments have been added to the SWN			
SWMS initial risk (IR) column as well as residual risk (RR) columns completed.			
Check control measures added to the SWMS are the most effecting sections.			
Responsible person is assigned and listed on the SWMS for the impement of continue measures.			
Permit requirements specified, such as Hot Wrock Electrical Work, Volume at Heights etc.			
SWMS identifies plant and equipment to be used.			
Details of inspection checks required for any equipment listed ar noted on the SWMS.			
Describes any mandatory qualifications, experience paining skills required to perform the work.			
Applicable personal protective equipment is selected on the SWMS.			
Lists any required permits or licenses.			
Reflects and documents any legislative references and/or Australian Standards.			
Identifies any hazardous substances used with specific control measures in line with any SDS.			
REVIEWED BY	DATE RI	EVIEWED	
SIGNATURE	DATE CO	MPLETED	