

| Paper Guillotine   SAFE WORK METHOD STATEMENT (SWMS)   |                |   |        |
|--|----------------|---|--------|
| TASK OR ACTIVITY: Paper Guillotine   |                |   |        |
| 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<br><br>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<br>HIGH     | 3<br>HIGH     | 4<br>ACUTE    | 4<br>ACUTE | 4<br>ACUTE   |                |                                   | <b>Elimination</b><br>Remove the hazard.                |
| LIKELY         | 2<br>MODERATE | 3<br>HIGH     | 3<br>HIGH     | 4<br>ACUTE | 4<br>ACUTE   | 4A<br>ACUTE    | DO NOT PROCEED                    | <b>Substitution</b><br>Replace the hazard.              |
| POSSIBLE       | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH     | 4<br>ACUTE | 4<br>ACUTE   | 3H<br>HIGH     | Review before work starts.        | <b>Isolation</b><br>Isolate People from the hazard      |
| UNLIKELY       | 1<br>LOW      | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH  | 4<br>ACUTE   | 2M<br>MODERATE | Ensure control measures in place. | <b>Engineering</b><br>Isolate the hazard.               |
| RARE           | 1<br>LOW      | 1<br>LOW      | 2<br>MODERATE | 3<br>HIGH  | 3<br>HIGH    | 1L<br>LOW      | Monitor and keep records          | <b>Administrative</b><br>Change the work.<br><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       | Poor workstation ergonomics,<br>Unauthorised access to equipment | 2M           | <ul style="list-style-type: none"> <li>- Ensure proper ergonomics at workstations by providing adjustable chairs, wrist rests, and footrests to enable workers to maintain a neutral posture while operating the paper guillotine.</li> <li>- Provide regular training for employees on ergonomic best practices, making sure they understand the importance of maintaining good posture and taking breaks to avoid strains related to poor ergonomics.</li> <li>- Designate specific individuals who are trained and authorised to operate the paper guillotine, ensuring that only these individuals have access to the equipment.</li> <li>- Display clear signage near the paper guillotine indicating that only authorised personnel are allowed access to the equipment, with a warning about potential risks involved in unauthorised operation.</li> <li>- Install barriers or fencing around the paper guillotine area to prevent unauthorised personnel from accessing the equipment, while still allowing for proper ventilation and visibility.</li> <li>- Implement a stringent lockout/tagout procedure for the paper guillotine, ensuring that only authorised personnel can power on and operate the equipment.</li> <li>- Establish a maintenance schedule for the paper guillotine, performing regular inspection and servicing to ensure all components are in proper working condition and minimising the risk of malfunctions leading to potential hazards.</li> <li>- Develop an emergency response plan specifically tailored to incidents involving the paper guillotine, with detailed procedures for dealing with injuries, equipment failures, or other emergencies related to its use.</li> <li>- Organise regular safety meetings for employees to discuss common hazards associated with the paper guillotine, review control measures, and share any concerns or suggestions for improvement.</li> <li>- Perform ongoing evaluations of workstation ergonomics and equipment usage, continually updating and adjusting control measures as necessary to ensure the ongoing safety of workers using the paper guillotine.</li> </ul> | 1L            |                    |
| 2. Material handling | Manual lifting injuries, Slips and trips                         | 2M           | <ul style="list-style-type: none"> <li>- Conduct manual handling training for all employees involved in the task to educate them on proper lifting techniques and safe handling of materials.</li> <li>- Perform risk assessments before starting work to identify potential hazards related to material handling and develop appropriate control measures based on the findings.</li> <li>- Utilise appropriate tools such as trolleys or pallet jacks to minimise manual lifting and the associated risks during material handling.</li> <li>- Ensure the work area is clean and free of obstacles, including regular inspections and housekeeping procedures to minimise slips and trips hazards.</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     |
|                     |                                   |              | <ul style="list-style-type: none"> <li>- Ensure that the paper guillotine is situated at an appropriate height and position to minimise bending, twisting, or reaching during operation.</li> <li>- Implement a system for coordinating and controlling the movement of materials within the workplace, including designated pathways and communication systems amongst workers.</li> <li>- Encourage workers to take short breaks to rest and stretch, helping to reduce the risk of injury due to repetitive motions or static postures.</li> <li>- Provide and require the use of appropriate personal protective equipment (PPE) such as gloves with grip surfaces, ensuring adequate protection against potential injuries.</li> <li>- Establish procedures for reporting and addressing near-miss incidents promptly, encouraging workers always to consider safety and the well-being of themselves and their colleagues.</li> <li>- Clearly mark storage areas with signage and ensure that materials are stacked securely to prevent accidental falls or trip hazards.</li> <li>- Rotate tasks among workers to avoid prolonged periods of the same activity, reducing physical strain and preventing weariness or lack of attention while handling materials.</li> <li>- Regularly review and update SWMS to ensure they remain relevant and effective, incorporating feedback from workers and continuously seeking opportunities for improvement in workplace health and safety practices.</li> </ul> |               |                    |
| 3. Machine setup    | Pinch points, Unexpected start-up | 3H           | <ul style="list-style-type: none"> <li>- Proper Training: Ensure that all machine operators have undergone comprehensive training on the safe use and operation of the paper guillotine, as well as relevant WHS regulations.</li> <li>- Lockout/Tagout Procedures: Implement lockout/tagout procedures for the paper guillotine, ensuring that the power source is disconnected, and the equipment is in a safe state before performing any machine setup tasks.</li> <li>- Pre-Operation Inspection: Before beginning the machine setup, inspect the paper guillotine for any visible damage or defects, such as worn or broken parts.</li> <li>- Safety Guards: Install adequate safety guarding around pinch points and other hazardous areas of the machine, to minimise the risk of entrapment and injury to workers.</li> <li>- Emergency Stop Systems: Ensure that working emergency stop buttons and systems are in place and accessible in case of unexpected machine start-up during setup.</li> <li>- Two-Hand Operation: During the machine setup process, implement two-hand controls to eliminate the chance of accidental activation and unexpected start-up of the paper guillotine.</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     |
|                       |  |              | <ul style="list-style-type: none"> <li>- Standard Operating Procedures (SOPs): Develop and maintain clear and detailed SOPs for machine setup and operation, outlining necessary safety protocols and control measures.</li> <li>- Regular Maintenance Checks: Schedule regular preventive maintenance checks on the paper guillotine to ensure proper functioning and alignment of all components.</li> <li>- Personal Protective Equipment (PPE): Require all machine operators and personnel involved in the setup process to wear appropriate PPE, such as safety glasses, gloves, and hearing protection.</li> <li>- Warning Labels: Place visible warning labels near the paper guillotine, indicating the potential hazards and required control measures for machine setup and operation.</li> <li>- Communication and Supervision: Maintain open lines of communication between workers participating in the machine setup process, ensuring that each worker understands their role and responsibility in preventing accidents and injuries.</li> <li>- Periodic Safety Audits: Conduct regular safety audits and assessments to evaluate the effectiveness of control measures currently in place, identifying opportunities for improvement and updating the SWMS as needed.</li> </ul> |               |                    |
| 4. Blade installation | Cuts from sharp blades, Lacerations to blade during installation | 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>   | 2M            |                    |

Operator hand

2M

| 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]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
| 6. Cutting operation | Entanglement, Crush injuries | 3H           | [REDACTED]   | 2M            |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |
|                      |                              |              | [REDACTED]   |               |                    |



| 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]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
| 7. Waste disposal   | Slips and trips, Manual handling injuries | 1L           | [REDACTED]   | 1L            |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [REDACTED]   |               |                    |
|                     |   |              | [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     |
|                         |  |              | <div>SAMPLE</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div> |               |                    |
| 10. Machine maintenance | Exposure to electrical hazards, Pinch points | 4A           | <div>[REDACTED]</div> <div>[REDACTED]</div> <div>[REDACTED]</div>   | 2M            |                    |



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]   |               |                    |
|                     |  |              | [REDACTED]   |               |                    |
| 12. Inspection      | Unexpected machine activation, Contact with moving parts | 3H           | [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     |
|                     |                        |              |  |               |                    |
|                     |                        |              |  |               |                    |

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

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           |          |