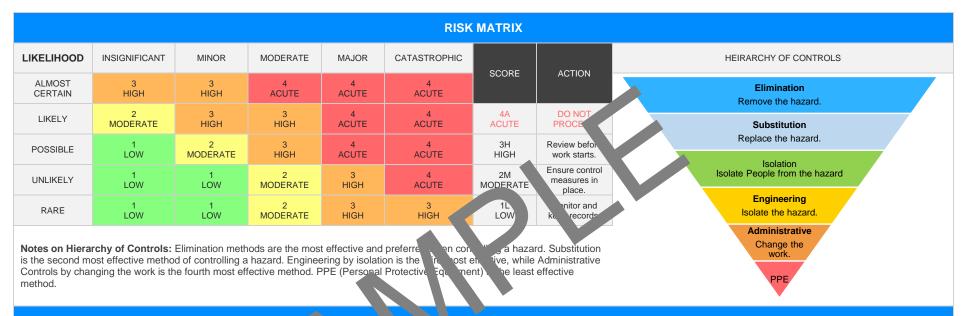


| Vacuum Pump   S  | SAFE WORK METHOD STA   | TEMENT (SWMS)  |                                    |
|--|--|--|------------------------------------|
| Т  | ASK OR ACTIVITY: Vacuum Pun                                      | np   |                                    |
| Business Name: [Company Name]  |  | ABN: [ABN]   | SWMS#                              |
| Business Address: [Company Address]  |  |  |                                    |
| Contact Person:  | Phone: [Phone]   | E fil:   |                                    |
| THIS SAFE WORK METHOD  | STATEMENT IS APPROVED BY   | THE POST THE PROJECT   |                                    |
| Under the Work Health and Safety Regulation (WHS Regulation), a person conduct the proposed work starts.   | cting a business or undertaking (N 3U) is                        | required to ture 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 a   | ompliance of the SWMS well as review                             | s and modifications of the SWMS.                                     |                                    |
| Full Name:   |  | Title:   | Phone:                             |
| ALL PERSONNEL PARTICIPATING IN ANY ACTIVITY ON THIS WMS. ST HAVE THE FOLLOWING COMMUNICATED  | N. 1E AND DATED SIGNATURE OF A<br>CO. MUNICATED TO IN THE DEVELO | LL RELEVANT PERSONNEL WHO HAVE BI<br>PMENT 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, conditions unical those hazards and then to further take steps to either the conditions of the conditions are or conditional talks.   | NAME   | SIGNATURE  | DATE                               |
| If an incident or a near miss occurs, all work must steam ately. 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. |  |  |                                    |



|                             |                              | CLI                           | ENT OR PRINCIPAL      | CONTRACTOR D  | 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 Sig         | nature:                      |                               |                       |   |  |                               |                      |  |
| Date SWMS supplie           | d to Project Manager:        |                               |                       |   |  |                               |                      |  |
|                             |                              | ANY HIGH-                     | RISK CON PUCT         | N' JRK BEING  | CARRIED OUT  |                               |                      |  |
| ☐ involves a risk of a pe   | erson falling more than 2 m  | neters.                       |                       | is carried out on   | ed out on or near pressurised gas mains or piping.                               |                               |                      |  |
| is carried out on a tel     | ecommunication tower.        |                               | $H \cap H$            | ☐ is carried out on   | or near chemical, fuel or refrig   | erant lines.                  |                      |  |
| ☐ involves demolition o     | f an element of a structure  | that is load-be n.            |                       | is carried out on   | rried out on or near energised electrical installations or services.             |                               |                      |  |
| ☐ involves demolition o     | f an element related to the  | physical integrit of a str    | 9                     | is carried out in an area that may have a contaminated or flammable atmosphere. |  |                               |                      |  |
| ☐ involves, or is likely to | o involve, disturbing a      | tos.                          |                       | involves tilt-up or precast concrete.   |  |                               |                      |  |
| involves structural alt     | eration or repair that re    | inporal, upp to p             | prevent collapse.     | is carried out on   | , in or adjacent to a road, railw  | ay, shipping lane or other to | raffic corridor.     |  |
| is carried out in or ne     | ar a confined space.         |                               |                       | is carried out in   | an area of a workplace where   | there is any movement of p    | owered mobile plant. |  |
| is carried out in/near      | a shaft or trench deeper th  | nan 1.5m or tunnel involvin   | ng use of explosives. | is carried out in   | areas with artificial extremes o   | f temperature.                |                      |  |
| is carried out in or ne     | ar water or other liquid tha | t involves a risk of drowning | ng.                   | ☐ involves diving v   | vork.  |                               |                      |  |
|                             |                              | ANY HI                        | IGH-RISK MACHINEF     | RY OR EQUIPMEN  | NT NEARBY  |                               |                      |  |
| Forklift                    | ☐ Crane/s                    | ☐ Hoist/s                     | ☐ Excavator           | ☐ Backhoe/Loade   | r 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 -                     |                      |  |





### PER NAL TECTIVE EQUIPMENT (PPE)

| FOOT<br>PROTECTION | HAND<br>PROTECTION | HEAD<br>PROTECTION | HEARING<br>PROTECTION | PROTE | SPIRATORY<br>P STECTION | FACE<br>PROTECTION | HIGH-VIS<br>CLOTHING | PROTECTIVE<br>CLOTHING | FALL<br>PROTECTION | SUN<br>PROTECTION | HAIR/JEWELLERY<br>SECURED |
|--------------------|--------------------|--------------------|-----------------------|-------|-------------------------|--------------------|----------------------|------------------------|--------------------|-------------------|---------------------------|
|                    |                    |                    | A                     |       |                         |                    |                      |                        |                    |                   |                           |
|                    |                    |                    |                       |       |                         |                    |                      |                        |                    |                   |                           |

Select me 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<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS   | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                                  |                 | - Ensure that the workplace is clean and free from clutter, objects, or debris that could create trip hazards around the vacuum pump a.  |                  |                    |
|                     |                                  |                 | - Properly store and secure all cables, hoses, power cords to prevent them from causing trip hazards, and use cable covers thecessary.   |                  |                    |
|                     |                                  |                 | - Conduct regular inspections of the work are to identify and address any potential trip hazards before they become a problem.   |                  |                    |
|                     |                                  |                 | - Clearly mark any uneven somes, elevation changes, or or potential trip hazards within the work area.   |                  |                    |
|                     |                                  |                 | - Verify that all elements of the vacuum pump, including power cords, switches, and mections, we in good condition and free from damage.   |                  |                    |
| 1. Preparation      | Trip hazards, Electrical hazards | 2M              | - Use Ground, Jult Circuit derrupters (RCDs) or Residual Current Devices (RCDs) for a separal electrical ety to protect gainst electric shock hazards.   | 1L               |                    |
|                     |                                  |                 | - Reg. a. inspect aintain, and test electrical tools and equipment to ensure their proper incoming.  |                  |                    |
|                     |                                  |                 | - Train a won as on sework practices, including proper handling, storage, and pintena ce of actrical equipment – emphasising the importance of following man fact or guitelines.   |                  |                    |
|                     |                                  |                 | Enforce use of appropriate Personal Protective Equipment (PPE) such as lety shoes with slip-resistant soles, safety glasses, gloves, and insulated tools as recoired.  |                  |                    |
|                     |                                  |                 | Establish an emergency response plan and provide training to personnel on its execution, including shutting down power sources, administering first aid in case of injuries, and contacting emergency services if necessary. |                  |                    |
|                     |                                  |                 | <ul> <li>Provide appropriate personal protective equipment (PPE) such as gloves, safety<br/>glasses, and steel-toed boots to reduce the risk of hand injuries and damage from<br/>dropped tools.</li> </ul>                  |                  |                    |
|                     |                                  |                 | - Conduct a pre-use inspection of all tools and equipment, including the vacuum pump, to ensure they are in good working condition and free from any defects.  |                  |                    |
| 2. Inspection       | Hand injuries, Dropping tools    | 2M              | - Implement a toolbox talk session before starting the task to discuss potential hazards and control measures with workers.  | 1L               |                    |
|                     |                                  |                 | - Provide workers with proper training on the handling, operation, and maintenance of the vacuum pump and related tools, to minimise the risk of accidents and injuries.   |                  |                    |
|                     |                                  |                 | - Ensure workers use ergonomically designed tools to reduce strain and fatigue, further preventing the dropping of tools or mishandling during the inspection process.   |                  |                    |
|                     |                                  |                 | - Use tool lanyards, tethers, and wrist straps when working at height or in confined spaces to prevent tools from falling or causing injury.   |                  |                    |



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| JOB STEP            | POTENTIAL HAZARDS                | IR              | CONTROL MEASURES  | RR               | RESPONSIBLE PERSON |
|---------------------|----------------------------------|-----------------|---|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE           | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                                  |                 | <ul> <li>Follow a standardised inspection procedure, with clearly defined steps to ensure<br/>consistency and thoroughness, minimising the chances of overlooking hazards.</li> </ul>             |                  |                    |
|                     |                                  |                 | - Establish designated work zones with barriers or this to prevent unauthorised access and reduce the risk of collisions or copy with untrained personnel that may lead to accidents or injuries. |                  |                    |
|                     |                                  |                 | - Keep the work area clean, well-lit, and free clutter reduce trip hazards and improve visibility during the inspection process   |                  |                    |
|                     |                                  |                 | - Develop a clear communication protocol for work as to follow uring the inspection process, including the use of most or hand signals and incidents.   |                  |                    |
|                     |                                  |                 | - Encourage waters to repair any less or harms sencountered during the inspection places prompt so that a section actions can be taken.   |                  |                    |
|                     |                                  |                 | - Recordy review and coate the SWN, pased on worker feedback, incident reported chair and equipment or processes, to ensure continuous improvement and relicion of we place hazards.              |                  |                    |
|                     |                                  |                 | Provide appropriate training and instructions for workers on handling and setting up to vacuum pum, to prevent falls and mitigate risk from dropped objects.                                      |                  |                    |
|                     |                                  |                 | Imple to a buddy system, where two or more workers are present during the tup to assist one another, ensuring proper communication and efficient handling of the vacuum pump.                     | f                |                    |
|                     |                                  |                 | Utilise fall arrest systems, such as harnesses and lanyards, for workers operating at heights when setting up the vacuum pump.  |                  |                    |
|                     |                                  |                 | - Establish barricades and signage in high-risk areas where workers are exposed to falls, clearly identifying a safe area around the setup site.  |                  |                    |
| 3. Setup            | Falls from height, Struck by Set | 2M              | - Conduct regular inspections of the workplace environment, including ladders and scaffolding systems used during the setup process, to identify potential hazards and ensure proper stability.   | 1L               |                    |
|                     |                                  |                 | - Provide workers with suitable personal protective equipment (PPE) such as hard hats, gloves, and appropriate footwear during the setup process.   |                  |                    |
|                     |                                  |                 | - Ensure that heavy and awkward objects are lifted and transported with adequate numbers of workers, employing proper lifting techniques to avoid injury.   |                  |                    |
|                     |                                  |                 | - Secure all tools, materials, and equipment that may cause struck-by-object incidents, storing them safely away from work areas when not in use.   |                  |                    |
|                     |                                  |                 | - Schedule vacuum pump setup tasks during non-peak periods to minimise congestion and reduce the likelihood of accidents occurring due to overcrowding at the job site.                           |                  |                    |
|                     |                                  |                 | - Coordinate work activities with other trades working nearby to ensure a clear understanding of each team's respective responsibilities, reducing the risks associated with overlapping tasks.   |                  |                    |



| JOB STEP            | POTENTIAL HAZARDS        | IR              | CONTROL MEASURES  | RR               | RESPONSIBLE PERSON |
|---------------------|--------------------------|-----------------|---|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE   | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS  | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                          |                 | - Establish a designated spotter who will observe the crane and vacuum pump movements during setup, ensuring adequate warning is given to reduce the risk of struck-by-object accidents.  |                  |                    |
|                     |                          |                 | - Encourage a culture of open communication active reporting of near misses or hazardous situations to promote swift rectiff and and to implement preventive actions.   |                  |                    |
|                     |                          |                 | - Perform ongoing risk assessments and revieur of measures periodically, making adjustments for continual improvement and on work medical educations are undustrated and experience, as well as any remaining regulations are undustrated and ards. |                  |                    |
| 4. Assembly         | Pinch points, Mustanskel | 2M              |   | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS       | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|-------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE  | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                         |                 |  |                  |                    |
| 5. Pump connection  | Explosive atmosphere, L | ЗН              |  | 2M               |                    |



| JOB STEP            | POTENTIAL HAZARDS                     | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|---------------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                                       |                 |  |                  |                    |
| 6. System testing   | Excessive noise, Exposed moving parts | 2M              |  | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS                                       | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|---|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                                  | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |   |                 |  |                  |                    |
| 7. Operation        | Entanglement in hoses, Contact with hazardous materials | ЗН              |  | 2M               |                    |



| JOB STEP                  | POTENTIAL HAZARDS                         | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------------|---|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS       | HAZARDS THAT MAY ARISE                    | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
| 8. System troubleshooting | Electric shock, Inadequate lockout/tagout | ЗН              |  | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS                 | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|-----------------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE            | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                                   |                 |  |                  |                    |
| 9. Repair work      | Confined space, Inappropriate PPE | 2M              |  | 1L               |                    |



| JOB STEP            | POTENTIAL HAZARDS                         | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON     |
|---------------------|---|-----------------|--|------------------|------------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                    | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | PERSON  NAME OF PERSON |
|                     |   |                 |  |                  |                        |
| 10. Disassembly     | Releasing pressure, Airborne contaminants | 2M              |  | 1L               |                        |
|                     |   |                 |  |                  |                        |



| JOB STEP            | POTENTIAL HAZARDS                                 | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|---|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE                            | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |   |                 |  |                  |                    |
| 11. Clean-up        | Slips, trips, and falls, Hazardous waste handling | 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 | PERSON  NAME OF PERSON |
| 12. Decommissioning | Heavy lifting, Exposure to residual chemicals | 2M           |  | 1L       |                        |



| JOB STEP            | POTENTIAL HAZARDS      | IR              | CONTROL MEASURES   | RR               | RESPONSIBLE PERSON |
|---------------------|------------------------|-----------------|--|------------------|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS | RESIDUAL<br>RISK | NAME OF PERSON     |
|                     |                        |                 |  |                  |                    |



| JOB STEP            | POTENTIAL HAZARDS      | IR              | CONTROL MEASURES   |  | RESPONSIBLE PERSON |
|---------------------|------------------------|-----------------|--|--|--------------------|
| SPECIFIC WORK STEPS | HAZARDS THAT MAY ARISE | INITIAL<br>RISK | SPECIFIC MEASURES TO BE PUT IN PLACE TO ELIMINATE OR CONTROL THE RISKS |  | NAME OF PERSON     |
|                     |                        |                 |  |  |                    |





#### **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 OF AT ARE NOT APPLICABLE.

#### **Queensland & Australian Capital Territory**

Work Health and Safety Act 2011

Work Health and Safety Regulations 2011

 $\textbf{Legislation QLD:} \ \underline{\textbf{https://www.worksafe.qld.gov.au/laws-and-compliance/work-health-and-safety-laws}$ 

Codes of Practice QLD: <a href="https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice">https://www.worksafe.qld.gov.au/laws-and-compliance/codes-of-practice</a> Legislation ACT: <a href="https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations">https://www.worksafe.act.gov.au/laws-and-compliance/acts-and-regulations</a>

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/legislative

Codes of Practice NSW: https://www.safework.nsw.gov.au/resource-library/lis codes-of ractice NSW: https://www.safework.nsw.gov.au/resource-library/lis codes-of-ractice NSW

#### **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/wo\_place-

Codes of Practice NT: https://worksafe.nt.gov.au/5

#### 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/le\_lation

Codes of Practice for SA: https://www.safework.sa.gov.au/work\_aces/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 al. Safety Act

Occupational Health and affety gulations 2017

Legis on VIC: https://www.xsafe.vic.gov.au/occupational-health-and-safety-act-and-

<u>Julai.</u>

des on actice VI autros://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: <a href="https://www.commerce.wa.gov.au/worksafe/legislation">https://www.commerce.wa.gov.au/worksafe/legislation</a>

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  | Pos      | sition   | Signature  | Date             | Time  | Supe | ervisor |
|--|----------|----------|--|------------------|-------|------|---------|
|  |          |          |  | Date:            |       |      |         |
|  |          |          |  | Date             |       |      |         |
|  |          |          |  | L te:            |       |      |         |
|  |          |          |  | Date:            |       |      |         |
|  |          |          |  | Date:            |       |      |         |
|  |          |          |  | Date:            |       |      |         |
|  |          |          |  | Date:            |       |      |         |
|  |          | SAF WO A | STATEMENT  | MONITORING AND R | EVIEW |      |         |
| The SWMS must be reviewed regularly to revise the sure it remains effective and must be reviewed (and revised if necessary) if relevant control measure and subcontract as the very revised by the operation of the SWMS and their health and safety representatives who redesented 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  | <u> </u> | □ 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.  |           | D )        |          |
| 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 effections.   |           |            |          |
| Responsible person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is assigned and listed on the SWMS for the imperent person is as a sign of the SWMS for the imperent person is a sign of the SWMS |           |            |          |
| Permit requirements specified, such as Hot Work, Veral Heights etc.   |           |            |          |
| SWMS identifies plant and equipment to be u d.  |           |            |          |
| Details of inspection checks required for any equipment listed at noted on the SWMS.  |           |            |          |
| Describes any mandatory qualifications, experience raining 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 R    | EVIEWED    |          |
| SIGNATURE   | DATE CO   | MPLETED    |          |