

# EJ & DJ Graves

## Safe Work Method Statement (SWMS) Template

ORGANISATION DETAILS			
Principal Contractor:		Contact Number:	
Project Manager or Supervisor:		Contact Number:	
Other PCBU's:		Contact Number:	
Person completing the SWMS:		Contact Number:	
Position:		Reviewed by:	
Date prepared:		Review date:	
PROJECT/JOB DETAILS			
What is the scope of work?			
Who else was consulted/involved in preparing this SWMS			
References: Legislation, Australian Standards, Codes of Practice, MSDS & SOP's			
Plant and equipment involved in the scope of work			
What "high risk" licence classes will be required to do the work?			

What high risk work is covered by the SWMS?	<input type="checkbox"/>	Risk of falls from greater than 2 metres	<input type="checkbox"/>	Work on a telecommunications tower	<input type="checkbox"/>	Demolition of load-bearing structure
	<input type="checkbox"/>	Likely to involve disturbing asbestos	<input type="checkbox"/>	Temporary load-bearing support structures	<input type="checkbox"/>	Work in confined spaces
	<input type="checkbox"/>	Work in or near shaft or trench with an excavated depth greater than 1.5m or in a tunnel	<input type="checkbox"/>	Use of explosives	<input type="checkbox"/>	Work on or near pressurised gas pipes or mains
	<input type="checkbox"/>	Work on or near chemical, fuel or refrigerant lines	<input type="checkbox"/>	Work on or near energised electrical installations or services	<input type="checkbox"/>	Work in an area with contaminated or flammable atmosphere
	<input type="checkbox"/>	Work with tilt up or pre-cast concrete	<input type="checkbox"/>	Work on, in or adjacent to road, rail shipping or other major traffic corridor	<input type="checkbox"/>	Work in an area with movement of powered mobile plant
	<input type="checkbox"/>	Work in or areas with artificial extremes of temperature	<input type="checkbox"/>	Work in or near a drowning risk	<input type="checkbox"/>	Diving work
	<input type="checkbox"/>	Other [please specify] _____				
Has the SWMS been developed based on a site-specific risk assessment?	[Note: A WorkSafe inspector may ask to sight evidence of this risk assessment]  <input type="checkbox"/> YES  <input type="checkbox"/> NO		Have relevant workers and their HSR[s] been consulted about the SWMS?	Workers: <input type="checkbox"/> YES  <input type="checkbox"/> NO	HSRs: <input type="checkbox"/> YES  <input type="checkbox"/> NO  <input type="checkbox"/> NA	
Name[s] of workers consulted			Date received:			
Worker signature[s]			Contractor signature			

Identify each task in order	Specify the hazards you have identified	Inherent risk rating [before controls]	Describe your control measures, list as many as possible [refer hierarchy of controls]	Residual risk rating [after controls]	Who is responsible for implementing and monitoring the controls?
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	
		Very Low (1)		Very Low (1)	
		Low (2)		Low (2)	
		Moderate (3)		Moderate (3)	
		High (4)		High (4)	
		Extreme (5)		Extreme (5)	

**This SWMS has been developed in consultation and has been read, understood and signed by all workers undertaking the scope of works**

Print names:

Signatures:

Dates:

Work health & safety risk management hierarchy of controls	
When considering how to control the risk, you need to use the hierarchy of controls as far as is reasonably practicable.	
The hierarchy of controls are as follows:	
1, Elimination	eg. remove the need to do the activity, remove the need to use a particular piece of equipment etc.
2, Substitution	eg. the equipment, process, substance, object or activity for a less risky one
3, Isolation	eg. distance or enclosure
4, Engineering controls	eg. guarding, isolators, mechanical ventilation
5, Administrative controls	eg. supervision, training, staff rotation, policy and procedures
6, Personal protective equipement	eg. ear muffs, safety glasses, clothing, gloves, harness
Note: Provision of personal protective equipment should always be the <b><i>last</i></b> control option considered	

Step 1 - Likelihood		
How likely is it that a hazardous event or situation will occur?		
Level	Descriptor	Examples of description
1	Rare: 5 yearly or less often	The event may occur only in exceptional circumstances; rare exposure to risk; very low probability of damage; injury 5 yearly or less often
2	Unlikely: yearly to 5 yearly	The event could occur at some time; infrequent exposure to risk; low probability of damage; little or no history at this site; yearly to 5 yearly injury
3	Possible: monthly to yearly	The event should occur at some time; regular or occasional exposure to risk; moderate probability of damage; monthly to yearly injury
4	Likely: weekly to monthly	The event will probably occur in most circumstances; frequent exposure to risk; substantial probability of damage; some history of occurrence; weekly to monthly injury
5	Almost certain: weekly or more often	The event is expected to occur in most circumstances; constant exposure to risk; high probability of damage; clear history of occurrence; injury weekly or more often

Step 2 - Consequence		
What might be the consequence of a hazardous event or situation?		
Level	Descriptor	Examples of description
1	Insignificant	Minimal or no injury; or very low financial loss
2	Minor	First aid treatment; minor medical treatment but no lost time; or minor financial loss
3	Moderate	Medical treatment required; lost time injury; less than four weeks off work
4	Major	Extensive injuries; major back, neck, arm, leg, face or internal injury; extended absence of one or more employees; external investigation by WST; lost time over one month
5	Catastrophic	Death; or permanent or severe health effects for one or more employees; public/media outrage; potential for huge financial loss

Step 3 - Risk table							Legend	
Calculate the risk from the risk table							L =	LOW risk; acceptable risk, manage by routine procedures
Likelihood		Consequences					M =	MODERATE risk; attend to in medium term, allocate management responsibility
		Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)		
Rare	1	1 L	2 L	3 M	4 S	5 S	S =	SIGNIFICANT risk; attend to in short term
Unlikley	2	2 L	4 L	6 M	8 S	10 H		
Possible	3	3 L	6 M	9 S	12 H	15 H		
Likely	4	4 M	8 S	12 S	16 H	20 H	H =	HIGH risk; do not proceed, immediate action, detailed research and management planning
Almost Certain	5	5 S	10 S	15 H	20 H	25 H		

ASSESSMENT QUESTIONS			
Number		Yes	No
1	Is the SWMS Project Specific? (Relevant and in reference to proposed work)		
2	Are legislative and other requirements documented? (eg. Codes of practice, Australian standards and correct legislation?)		
3	Does the SWMS identify the High Risk Construction Work involved in the task?		
4	Are the details of the task or processes being assessed recorded step by step and relative to their scope of works? (Ensure that tasks / activities are aligned to scope of works eg. If no crane used it cannot include a crane)		
5	Have hazards specific to the project site been identified / incorporated in their SWMS? (Ensure that any hazards which may occur due to other work activities are included in SWMS)		
6	Where the works impact on Public Safety, have the hazards been identified and suitable control measures identified?		
7	Have all tasks been assigned a risk rating base on the risks identified? (Potential hazards reflecting likelihood and consequence, eg. Any work that are high risk construction tasks (1 of 18) need to have inherent risk as high or extreme)		
8	Are the control measures selected the most practical in accordance with the hierarchy of control? (eg. Starting from elimination, substitution, isolation, engineering, admin and PPE)		
9	Does the SWMS detail any isolation and how this will be controlled and communicated?		
10	Does it identify responsible persons?		
11	Has it been signed off by those planning to complete the work? (Name and signature)		
12	Have licenses and competencies for the high risk work been provided and verified? (W@H, scaffold, EWP, crane, boom, confined space etc?)		
- Note: If answered <u>NO</u> then the SWMS needs to be changed / modified -			

Comments:

Approval: .....