

HEALTH AND SAFETY STANDARD












Safe Work Method Statement – TP228a			
ACTIVITY:		SWMS No.: TP-	
Client / Contractor Details		Project Details:	
Company Name:		Work Location:	
Company Address:		<div style="background-color: red; color: white; text-align: center; padding: 5px;">High Risk Work</div>	<input type="checkbox"/> Confined Spaces <input type="checkbox"/> Excavation work <input type="checkbox"/> Heavy Lifting <input type="checkbox"/> Hot work <input type="checkbox"/> Work at Height
Supervisor Name:			
Supervisor Contact Phone:			
Site Contact Name:			
SWMS completed by:	e.g. Terrence Hill, Bud Spencer		
Approved by:			
Title	Name	Signature	Date
Supervisor of the work			
OHS Representative			
Client/Contractor Contact			
Other			

Hazard Identification

Risk Table		Probability (Pr) (Likelihood of hazard occurring)					High Risks (those with a result of greater than 12) – You must consider suspending the operation until adequate controls are introduced Medium Risks (those with a result of more than 6 but no more than 12) – Reduce the risk, consider the cost of prevention against the likelihood of the event Low Risks (scores 6 and below) Measured against the current controls, implement further controls to manage the risk
	Severity	Almost Never (<5%)	Unlikely (5-20%)	Possible (20-50%)	Likely (50-90%)	Almost Certain (>90%)	
	Se	1	2	3	4	5	
Fatality, permanent disability	5	L (5)	M (10)	H (15)	H (20)	H (25)	
Major injury or illness. Serious Loss	4	L (4)	M (8)	H (12)	H (16)	H (20)	
Lost time accident	3	L (3)	M (6)	M (9)	H (12)	H (15)	
Minor injury or illness	2	L (2)	L (4)	M (6)	M (8)	M (10)	
Trivial illness or loss	1	L (1)	L (2)	L (3)	L (4)	L (5)	
5. CONTROL MEASURE DEFINITIONS							
Hierarchy of safety measures to consider when identifying control measures							
1	Eliminate	Switch off or remove process or substance					
2	Reduce or substitute	A safer product or substance / reduce					
3	Isolate	Segregate, guard, enclose, remote operation					
4	Control	Engineer, design, job design exposure					
5	Discipline	Company procedures, rules, signs, posters					
6	Personal Protective Equipment	Last resort, temporary measure, emergency					

Plant, Tools and Equipment to be used:

Formal Training, licences required for work task:

Foot Protection	Hearing Protection	High Visibility	Head Protection	Eye Protection	Face Protection	Hand Protection	Protective Clothing	Breathing Protection	Sun Protection
									Broad brimmed hat, UV rated clothing, SPF 30+ sunscreen, tinted safety glasses with adequate UV protection)

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No.	Phase	Activity & Exposure	Hazard	Current control measures	S	L	Risk	Additional Preventative measures	RR Rating	Responsibility for additional measures
e.g.	Moving & positioning	Unloading equipment from transport and placing in final position in the factor	Falling of large heavy machinery and objects	All lifting to be carried out by competent contractors producing a hoisting plan of the work if needed.	2	5	M (10)	Check all lifting plans and equipment certificates prior to starting activity	LOW	Work Supervisor OHS Representative
1										
2										
3										
4										
5										
6										
7										
8										

Sign off and Review

This SWMS has been developed in consultation and cooperation with *employee/workers* and relevant *Employer/Persons Conducting Business or Undertaking (PCBU)*. I have read the above SWMS and I understand its contents. I confirm that I have the skills and training, including relevant certification to conduct the task as described. I agree to comply with safety requirements within this SWMS including risk control measures, safe work instructions and Personal Protective Equipment described.

Worker Name	Signature	Date

Reviewed By	Review Type	Date	Signed