

Business Name:

Business Address:

ABN/NZBN:

BUILDING MAINTENANCE SAFE WORK METHOD STATEMENT (SWMS)

| | | | |
|--|----------|----------------------------|---------------------------|
| Business Contact: | Phone #: | Principal Contractor (PC): | |
| Responsible person (for monitoring SWMS and work): | | PC Address: | |
| Signature: | Date: | PC Phone #: | Date SWMS provided to PC: |
| Contact Phone #: | | Job Site Address: | |

THIS WORK ACTIVITY INVOLVES THE FOLLOWING HAZARDOUS WORK AND ENVIRONMENTAL IMPACTS

- | | | | | |
|---|---|--|--|--|
| <input checked="" type="checkbox"/> Electrical equipment | <input checked="" type="checkbox"/> Elevated levels | <input checked="" type="checkbox"/> Slips, trips and falls | <input checked="" type="checkbox"/> Hazardous substances | <input type="checkbox"/> Silica dust |
| <input type="checkbox"/> Hot Work | <input checked="" type="checkbox"/> Hazardous manual tasks | <input type="checkbox"/> Outdoor work | <input type="checkbox"/> Remotely &/or isolated work | <input type="checkbox"/> ? |
| <input checked="" type="checkbox"/> Noise and vibration | <input checked="" type="checkbox"/> Native vegetation & weeds | <input checked="" type="checkbox"/> Air quality | <input checked="" type="checkbox"/> Waste | <input checked="" type="checkbox"/> Vehicle movement |
| <input checked="" type="checkbox"/> Fuels, oils & chemicals | <input checked="" type="checkbox"/> Terrestrial fauna | <input checked="" type="checkbox"/> Waterways & soils | <input type="checkbox"/> Cultural heritage | <input type="checkbox"/> ? |

THIS WORK ACTIVITY INVOLVES THE FOLLOWING "HIGH-RISK CONSTRUCTION WORK" (HRCW - IDENTIFIED IN THE JOB TASK COLUMN)

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Confined spaces | <input checked="" type="checkbox"/> Mobile plant movement | <input type="checkbox"/> Demolition of a load-bearing structure | <input type="checkbox"/> Asbestos disturbance |
| <input type="checkbox"/> Using explosives | <input type="checkbox"/> Diving work | <input type="checkbox"/> Artificial extremes of temperature | <input type="checkbox"/> Tilt-up or pre-cast concrete |
| <input type="checkbox"/> Pressurised gas distribution mains or piping chemical, fuel or refrigerant lines energised electrical installations or services | | | |
| <input type="checkbox"/> Structures or buildings involving structural alterations or repairs that require temporary support to prevent collapse | | | |
| <input type="checkbox"/> Involves a risk of a person falling from 2m or more, including work on telecommunications towers | | | |
| <input type="checkbox"/> Working at depths greater than 1.5 Metres, including tunnels or mines | <input checked="" type="checkbox"/> Work in an area that may have a contaminated or flammable atmosphere | | |
| <input type="checkbox"/> Work carried out adjacent to a road, railway or shipping lane, traffic corridor | <input type="checkbox"/> In or near water or other liquid that involves the risk of drowning | | |

| | | | | | | | | | | | |
|---|---|---|---|---|--|---|---|---|---|---|---|
| FOOT PROTECTION | HEARING PROTECTION | HIGH VISIBILITY | HEAD PROTECTION | EYE PROTECTION | FACE PROTECTION | HAND PROTECTION | PROTECTIVE CLOTHING | BREATHING PROTECTION | SUN PROTECTION | SAFETY HARNESS | Do not wear rings, watches or jewellery that may become entangled. Long and loose hair must be tied back. |
|  |  |  |  |  |  |  |  |  |  |  | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| LIKELIHOOD | INSIGNIFICANT | MINOR | MODERATE | MAJOR | CATASTROPHIC | SCORE | ACTION |
|----------------|---------------|--------------|--------------|-----------|--------------|---------------|--------------------------------|
| ALMOST CERTAIN | 3 - HIGH | 3 - HIGH | 4 - ACUTE | 4 - ACUTE | 4 - ACUTE | | |
| LIKELY | 2 - MODERATE | 3 - HIGH | 3 - HIGH | 4 - ACUTE | 4 - ACUTE | 4A - ACUTE | DO NOT PROCEED. |
| POSSIBLE | 1 - Low | 2 - MODERATE | 3 - HIGH | 4 - ACUTE | 4 - ACUTE | 3H - HIGH | Review before commencing work. |
| UNLIKELY | 1 - Low | 1 - Low | 2 - MODERATE | 3 - HIGH | 4 - ACUTE | 2M - MODERATE | Maintain control measures. |
| RARE | 1 - Low | 1 - Low | 2 - MODERATE | 3 - HIGH | 3 - HIGH | 1L - Low | Record and monitor. |

| HIERARCHY OF CONTROLS | MOST EFFECTIVE | Elimination | Substitution | Isolation | Engineering | Administrative | PPE | LEAST EFFECTIVE |
|-----------------------|----------------|-------------|--------------|-----------|-------------|----------------|-----|-----------------|
|-----------------------|----------------|-------------|--------------|-----------|-------------|----------------|-----|-----------------|

| JOB TASK | HAZARDS | RISK | CONTROL MEASURES | RESPONSIBLE PERSON |
|-------------|--|------|---|--|
| 1. Training | Exposure to asbestos | 4A | <ul style="list-style-type: none"> Ensure the worker is competent to identify if asbestos is present If the presence of asbestos is identified ensure there is a separate, dedicated SWMS and that all workers have relevant training and licensing. | Supervisor |
| | Exposure to respirable crystalline silica (RCS) – dust inhalation | 3H | <ul style="list-style-type: none"> Training and Information provided to workers on RCS should include: <ul style="list-style-type: none"> Information on the health effects associated with respirable crystalline silica dust (Provide workers with a copy of 'Health Monitoring for Exposure to Hazardous Chemicals - Guide for workers': Safe Work Australia) Identification of RCS dust through Safety Datasheet (SDS) or labels Dust exposure prevention Checking controls are working and using them When and how to use any respiratory protective equipment provided and what to do if something goes wrong (Including worker respirator fit and check processes). | |
| 2. Planning | <ul style="list-style-type: none"> Out-of-hours / night work Fatigue | 3H | <ul style="list-style-type: none"> Allow adequate meal breaks for workers Do not schedule full double shifts for workers as worker fatigue increases the risk of incidents Commercial premises: <ul style="list-style-type: none"> Additional Security personnel on-site to ensure no unauthorised access by the general public while work is being performed Workers have access to: <ul style="list-style-type: none"> Suitable amenities (toilets/wash facilities/drinking water) Sufficient lighting including parking areas Air conditioning and heating Mechanical ventilation if required Emergency exits lit and unblocked Safe area for parking/unloading equipment – protected from the rain. | Supervisor to undertake all planning processes |

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| JOB TASK | HAZARDS | RISK | CONTROL MEASURES | RESPONSIBLE PERSON | |
|------------------------|--|------|--|--|--|
| | | | <ul style="list-style-type: none"> Use, maintain and store any respiratory protective equipment provided following instructions. Wash face and hands with soapy water. Pay attention to under the fingernails. | | |
| | Security breach | 3H | <ul style="list-style-type: none"> All personnel sign-out on Site Register. | | |
| | Vehicle/people impact | 4A | <ul style="list-style-type: none"> Stay to designated access and egress routes Maintain awareness of surroundings at all times. | | |
| 18. Emergency response | <ul style="list-style-type: none"> Injury Fatality Environmental damage | 4A | <ul style="list-style-type: none"> For police, fire or ambulance call '000.' Follow site emergency and evacuation procedures A communication system is available, e.g. a mobile phone or radio Check for dangers to self before helping others Maintain control of the area and stabilise the situation Apply first aid to the injured worker Complete an incident report. | <ul style="list-style-type: none"> Refer to your SWMS implementing instructions for further specific emergency responses. | Supervisors and workers ensure controls followed |

OVERALL RISK RATING AFTER CONTROLS

1 - Low
 2 - MODERATE
 3 - High
 4 - ACUTE

PERMITS Not applicable Hot Work Confined Space Local council ? ?

SITE MANAGEMENT PLAN Is the work associated with a Construction Project? Yes No *If yes – This SWMS must align with requirements of the Site Management Plan in place for the Construction Project.*

| PLANT & EQUIPMENT | | HAZARDOUS SUBSTANCES | SUPERVISORY ARRANGEMENTS |
|---|-------------------------------------|--|---|
| <input type="checkbox"/> Electrical tools and leads | Tested and tagged quarterly | <i>List hazardous substances taken on-site and have the SDS onsite.</i> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. | <input type="checkbox"/> Audits <input type="checkbox"/> Spot Checks <input type="checkbox"/> Reporting systems <input type="checkbox"/> Suitably qualified supervisors for job <input type="checkbox"/> Direct on-site supervision <input type="checkbox"/> Remote site: communication systems/schedule |
| <input type="checkbox"/> Hand tools - Meet AS/NZS | Regular visual inspection | | |
| <input type="checkbox"/> Ladders - Meet AS/NZS | Inspected and tagged out if damaged | | |
| <input type="checkbox"/> Mobile plant-specify | Inspected and tagged out if damaged | | |
| <input type="checkbox"/> ? | | | |
| <input type="checkbox"/> ? | | | |
| <input type="checkbox"/> ? | | | |
| <input type="checkbox"/> ? | | | |
| <input type="checkbox"/> ? | | | |
| <input type="checkbox"/> ? | | | |