

Business Name:

Business Address:

ABN/NZBN:

FLOORING (FLOATING FLOOR LAYING) SAFE WORK METHOD STATEMENT (SWMS)












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

THIS WORK ACTIVITY INVOLVES THE FOLLOWING HAZARDOUS WORK AND ENVIRONMENTAL IMPACTS

- | | | | | |
|---|--|--|---|---|
| <input checked="" type="checkbox"/> Electrical equipment | <input type="checkbox"/> Elevated levels | <input checked="" type="checkbox"/> Slips, trips and falls | <input checked="" type="checkbox"/> Hazardous substances | <input checked="" type="checkbox"/> Silica dust |
| <input type="checkbox"/> Hot Work | <input checked="" type="checkbox"/> Hazardous manual tasks | <input type="checkbox"/> Outdoor work | <input checked="" type="checkbox"/> Remotely &/or isolated work | <input checked="" type="checkbox"/> Out-of-hours / night work |
| <input checked="" type="checkbox"/> Noise and vibration | <input 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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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. Out-of-hours / night work	Fatigue Unauthorised access	3H	<ul style="list-style-type: none"> Allow adequate meal breaks for workers; particularly if they have worked during part of the day, Allow time to rest & recover sufficiently to work safely into the evening/night Do not schedule full double shifts for workers as worker fatigue increases the risk of incidents 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 Safe area for parking/unloading equipment – protected from rain Additional security personnel on-site to ensure no unauthorised access by the general public while work is being performed Ensure that adequate lighting is available ⚠️ <i>No worker should work alone on the site at night.</i> 	Supervisor
2. Working alone	Emergency	3H	<ul style="list-style-type: none"> Avoid people working alone, use a buddy system to provide immediate support Have a reliable communication system in place and test regularly All workers trained in communication protocol: <ul style="list-style-type: none"> Mobile phones are to be kept on the worker at all times and switched on Workers to call supervisor upon arrival and departure and make regular call-ins Call-in times must be agreed with relevant worker and supervisor and based on the risk level expected at the site Supervisor must have address details, expected arrival/departure & visit duration times Supervisors have details of the worker's vehicle (registration, colour make, model) Workers to only attend the site as directed by their supervisor Emergency procedures in place if call-ins are not received, or communication lost with the worker. 	Supervisor

JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON
			<ul style="list-style-type: none"> ○ Use damaged or blunt blades ○ Cross arms while cutting ○ Use excessive force, let the tool do the work for you ○ Reach around the blade ○ Make freehand cuts. Holding the workpiece by hand is dangerous ○ Attempt to remove waste materials, off-cuts during operation ○ Place hands under the workpiece being cut. 	aware of any issues
11. Laying floating floor	Cuts & lacerations	3H	<ul style="list-style-type: none"> • Power saw - cutting planks: <ul style="list-style-type: none"> ○ Use tools as per Safe Operating Procedures and/or operators' manual ○ Ensure instruction manual accessible and read by all persons operating equipment ○ Always ensure that the power tool is switched off and power isolated before a pre-start check, adjusting, changing set-ups or repairing • Ensure the switch is in the "off" position before plugging it in to avoid accidental starting • Allow the blade to reach full speed before cutting, do not force the blade and always start the cut gently ⚠ Do not operate the saw with the retractable guard tied back or the trigger tied on ⚠ Do not place hands under the workpiece being cut • Ensure: <ul style="list-style-type: none"> ○ The blade has fully stopped turning before placing the saw down ○ The lower guard has retracted to the closed position ○ NOTE: Large off-cuts can be unstable, can affect the cut and result in operator injury Ensure large off-cuts are supported and removed safely • Stay alert – concentrate on what you are doing at all times and be aware of kickback • You must keep your off hand out of the path of the saw in any case NOTE: Always turn off the saw when not in use. 	<p>Supervisors to check all controls in place and followed</p> <p>Workers to follow controls and make supervisor aware of any issues</p>
	Dust	3H	<ul style="list-style-type: none"> • Consult SDS for the flooring product • Follow directions of use for (<i>specify the substances/chemicals</i>) • Use PPE as per the SDS - <i>specify</i> • Use with adequate ventilation • Provide mechanical extraction for dust control as needed • Ensure the dust bag attached securely on the power saw, no holes • Wear a P1/P2 face mask and eye protection. 	
	<ul style="list-style-type: none"> • MSD injuries • Knee injury 	3H	<ul style="list-style-type: none"> • Do not over-reach • Do not work in awkward postures for more than 30 minutes at a time or 2 hours over the entire 	

JOB TASK	HAZARDS	RISK	CONTROL MEASURES	RESPONSIBLE PERSON
			<ul style="list-style-type: none"> Remove coveralls, shoes and any other PPE Remove respirator after clean-up and PPE removal 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. 	
14. 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. Refer to your SWMS implementing instructions for further specific emergency responses. 	Supervisors and workers ensure controls followed
OVERALL RISK RATING AFTER CONTROLS <input type="checkbox"/> 1 - Low <input checked="" type="checkbox"/> 2 - MODERATE <input type="checkbox"/> 3 - High <input type="checkbox"/> 4 - ACUTE				
PERMITS <input type="checkbox"/> Not applicable <input type="checkbox"/> Hot Work <input type="checkbox"/> Confined Space <input type="checkbox"/> Local council <input type="checkbox"/> ?				
SITE MANAGEMENT PLAN		Is the work associated with a Construction Project? <input type="checkbox"/> Yes <input type="checkbox"/> 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 on-site.</i> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.		<input type="checkbox"/> Audits
<input type="checkbox"/> Hand tools - Meet AS/NZS	Regular visual inspection			<input type="checkbox"/> Spot Checks
<input type="checkbox"/> Ladders - Meet AS/NZS	Inspected and tagged out if damaged			<input type="checkbox"/> Reporting systems
<input type="checkbox"/> Mobile plant- <i>specify</i>	Inspected and tagged out if damaged			<input type="checkbox"/> Suitably qualified supervisors for job
<input type="checkbox"/> ?				<input type="checkbox"/> Direct on-site supervision
<input type="checkbox"/> ?				<input type="checkbox"/> Remote site: communication systems/schedule
<input type="checkbox"/> ?				