

To Whom It May Concern,

PROJECT: Lot 70 The Strand - Townsville

RE: SUBCONTRACTOR REQUIREMENTS PRIOR TO COMMENCING WORK ON A CONSTRUCTION SITE WHERE RCQ IS THE PRINCIPAL CONTRACTOR

RCQ as the Principal Contractor has to ensure that all requirements for quality, health and safety, environmental and any additional contractual requirements as specified by RCQ and our Client are strictly adhered to by all who work on our sites.

Attached to this form are a number of documents that are required to be completed and submitted to RCQ prior to commencing work on site.

INSURANCES

RCQ is obligated to only use subcontractors who have supplied us with proof that they have appropriate insurance cover for their business.

Appropriate proof would be a copy of the acceptance letter from the insurance company showing the policy number, date of commencement, date of expiration and amount of cover provided. The associated insurance cover required includes:

- Public Liability Insurance;
- Products / all risk insurance;
- Work cover; and
- Professional Indemnity Insurance (for design & construct based contracts).

QUALITY REQUIREMENTS

RCQ has developed and implemented a Quality Management System, which complies with International Standard 9001.

To ensure that we maintain the highest standards for quality we have developed a set of task specific Inspection and Test Plans (ITPs) to ensure that the work delivered meets the customer needs and that rework is minimised.

As a subcontractor we will ask you to assist in the completion of the appropriate ITPs using your specialist trade knowledge and skills.

Each ITP documents specific hold points where work ceases until such time that a trade's person signs off as accepting the quality of the work **or** signs off stating that the work for which they had been engaged is complete. An example of this would be electricians and plumbers signing off that they have installed all services as per the plan, prior to a block wall being filled.

Another quality requirement that RCQ must comply with is to ensure that the project is delivered in line with the detailed program. This will ensure that the date for Practical Completion as agreed with our Client is met.

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CONSTRUCTION PROGRAM

As our subcontractor you should read through the program and identify those areas where you will be involved in the project.

If for any reason you find yourself unable to deliver the required outcomes in line with the program you must inform RCQ as soon as practical so that the program can be modified and delays can be averted/minimised.

HEALTH AND SAFETY REQUIREMENTS

RCQ has developed and implemented a Health and Safety Management System, which complies with the requirements as stated in Australian Standard 4801 and the Australian Government Building and Construction OHS Accreditation Scheme (FSC). The system sets the minimum standards of compliance that must be met by all who undertake work for our organisation including any Subcontractors engaged to deliver site works.

Specifically, the system states that all subcontractors shall:

- Not commence work on a site without first contacting the Site Supervisor / Foreman.
- Not commence work on a site without first completing the Site Specific Induction. Note: at the induction each employee will be asked to provide evidence of their having completed a General Induction (White Card), the details of which will be recorded on site.
- Prior to commencement on-site, submit all documents as detailed on the Subcontractor Documentation Checklist.
 - Evidence of competency (tickets) for those who will be using plant/equipment as required. (photocopies of tickets held)
 - Safe Work Methods for all activities. Subcontractors are not to commence work until their Safe Work Method has been submitted, reviewed and approved by the Site Supervisor. To be acceptable each Safe Work Methods should document all of the requirements.
 - A list of all substances that they will be bringing on site with appropriate Safety Data Sheets for each and where a substance is identified as being hazardous they shall provide a safe work method for its use including the provision of appropriate PPE for each worker as may be required to ensure their safety where PPE is identified as their proposed control method in their safe work method.
- Ensure that all works are conducted in a safe manner and shall not interfere with other works undertaken on the site without the prior approval of the Site Supervisor / Foreman.
- Provide test and tag evidence of all mains electrical equipment, extension leads, and Residual Current Devices (RCD). Additional to this requirement is the continued inspection and testing of equipment every three months while on site.

MOBILE PLANT

RCQ has developed specific requirements for the control of mobile plant with subcontractor's obligations to meet these documented in the relevant attachments.

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ENVIRONMENTAL REQUIREMENTS

RCQ has developed and implemented an Environmental Management System which aligns to the International Standard 14001.

RCQ will have implemented a range of operational control measures to ensure that harm or potential for harm to the environment is minimised. Subcontractors will be required to cooperate with these measures and liaise with RCQ personnel in the event that any issues are identified.

Specific requirements include but are not limited to ensuring that all chemicals brought on site must have a SDS and where identified as being harmful to the environment, have a safe work method that specifies how any spillages are to be cleaned up, how any residual product or empty containers are to be disposed of and any other specified requirements adhered to.

COMPLIANCE WITH THESE REQUIREMENTS

RCQ's project Direct Managers / Supervisors has been advised that they are to ensure that all subcontractors commencing work on their site have fulfilled the above stated requirements.

Failure to meet any of the above-specified requirements will delay subcontractors commencing works on site. Any subcontractor found to be in breach of these requirements may, at the discretion of the project Direct Manager / Supervisor be asked to leave the site.

ADDITIONAL INFORMATION

Should you require any additional information in regards to this process please do not hesitate to contact the person under signed.

Please forward all completed documentation to:

Yours truly,

Daniel Ogden
Senior Contracts Administrator
PH: (07) 4771 3077
EMAIL: dogden@rcq.net.au

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DOCUMENTATION CHECKLIST FORM



INSTRUCTIONS: This Form is to be completed as part of your submission of required documentation as requested in your subcontractor letter. These documents are required to ensure that not only we reduce the amount of time taken on site to induct you but also to ensure that all of our safety and contractual obligations are met as the Principal Contractor.

1 SUBCONTRACTOR DETAILS

SUBCONTRACTOR NAME:			
ABN:		ACN:	
SCOPE OF WORKS ON SITE:			
TRADES:			

PROPOSED NO. OF WORKERS ON SITE:	
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2 DOCUMENTATION CHECKLIST

DOCUMENTATION	SUPPLIED	COMMENTS
Safe Work Method Statement	YES ☐ NO ☐ N/A ☐	
Public Liability Insurance	YES ☐ NO ☐ N/A ☐	
Professional Indemnity	YES ☐ NO ☐ N/A ☐	
Current Work Cover Certificate	YES ☐ NO ☐ N/A ☐	
Contractor Works Insurance	YES ☐ NO ☐ N/A ☐	
Hazardous Substance Register	YES ☐ NO ☐ N/A ☐	
Electrical Equipment Register	YES ☐ NO ☐ N/A ☐	
Plant Inspection Report	YES ☐ NO ☐ N/A ☐	
Plant Operator Competency	YES ☐ NO ☐ N/A ☐	
Plant Risk Assessment	YES ☐ NO ☐ N/A ☐	
Copies of all competencies / tickets of proposed workers on site	YES ☐ NO ☐ N/A ☐	

3 DECLARATION

I have submitted all the required documentation and I have read and understand the requirements of the Contract and Work Health and Safety Management Plan and will abide by the site safety rules.

I will ensure that all of our staff and subcontractors will abide by the Work Health and Safety Management Plan and will abide by the site safety rules.

DECLARED BY SUBCONTRACTOR'S REPRESENTATIVE

NAME:		SIGNATURE:	
POSITION:		DATE:	

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Contractor Works Insurance	YES ☐ NO ☐ N/A ☐	
Hazardous Substance Register	YES ☐ NO ☐ N/A ☐	
Electrical Equipment Register	YES ☐ NO ☐ N/A ☐	
Plant Inspection Report	YES ☐ NO ☐ N/A ☐	
Plant Operator Competency	YES ☐ NO ☐ N/A ☐	
Plant Risk Assessment	YES ☐ NO ☐ N/A ☐	
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DECLARED BY SUBCONTRACTOR'S REPRESENTATIVE

NAME:		SIGNATURE:	
POSITION:		DATE:	

SITE SUBSTANCE REGISTER FORM



COMPANY:	
SUPERVISOR:	

MANUFACTURER	NAME	LOCATION	SDS SUPPLIED	RISK ASSESSMENT	CLASSIFIED AS HAZARDOUS	DANGEROUS GOOD
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
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			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

ELECTRICAL TOOLS REGISTER FORM



COMPANY:	
SUPERVISOR:	

TOOL MAKE	TYPE	NAME OF USER (PRINT)	SIGNATURE	TAG DATE	DATE IN	DATE OUT	SITE SUPERVISOR (SIGN IN)

PLANT PRESTART INSPECTION FORM

INSTRUCTIONS FOR USE: Where an operator is not able to provide a pre-start checklist / record that details the mandatory requirements as detailed below, each plant operator is to complete this form and submit it to the Site Supervisor prior to commencing operations with plant each day. These items listed below are mandatory requirements for all plant operating on site.

SITE DETAILS

SITE:		SITE ADDRESS:	
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OPERATOR DETAILS

NAME OF OPERATOR:		DATE:		TIME:	
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PLANT AND EQUIPMENT DETAILS

MAKE:		MODEL NO.	
SERIAL NUMBER:		MACHINE HOURS	

CHECKLIST

☐	ALL CHECKS IN ACCORDANCE WITH OPERATORS MANUAL HAVE BEEN COMPLETED
☐	R.O.P.S. CANOPY
☐	F.O.P.S. CANOPY
☐	ALL SAFETY GUARDS FITTED
☐	SEATBELTS FITTED AND IN GOOD ORDER
☐	REVERSE ALARM OPERATION
☐	FIRE EXTINGUISHER FITTED AND FULLY CHARGED
☐	AMBER FLASHING LIGHTS OPERATING
☐	TWO WAY RADIO (ONLY REQUIRED WHERE SPECIFIED)

HAZARDOUS CHEMICALS RISK ASSESSMENT FORM



SECTION A: PRELIMINARY ASSESSMENT INFORMATION

DATE OF ASSESSMENT:		DATE OF NEXT REVIEW:	
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ASSESSED BY

NAME:		SIGNATURE:	
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PRODUCT DETAILS

MAKER / MANUFACTURER			
PRODUCT NAME		PRODUCT CODE	

SECTION B: BASIC RISK ASSESSMENT

BASIC RISK ASSESSMENT			
A REVIEW OF THE LABEL AND SDS OF THE HAZARDOUS CHEMICAL HAS BEEN UNDERTAKEN AND THE FOLLOWING APPLIES:			
▪ The risks associated with using the hazardous chemical have been acknowledged and, where applicable, are as described on the label and in the SDS in consideration of hazardous chemical storage, handling and use.	☐ YES	☐ NO	
▪ Work activity involving the hazardous chemical has been observed and will be / is stored, handled and used in accordance with the instructions on the hazardous chemical container label and information contained in the SDS.	☐ YES	☐ NO	
▪ The risks arising from the hazardous chemical are ☐ not significant / ☒ are significant but controlled	☐ YES	☐ NO	
▪ The control measures to manage hazardous chemical's assessed risk have been communicated effectively to all parties concerned.	☐ YES	☐ NO	
IF 'NO' TO ANY OF THE ABOVE IT IS DETERMINED FROM THE BASIC RISK ASSESSMENT THAN A DETAILED RISK ASSESSMENT IS TO BE CONDUCTED IN THE FOLLOWING SECTIONS.			

SECTION C: DETAILED RISK ASSESSMENT

DETAILED RISK ASSESSMENT		
Does the company have the competence to carry out a detailed hazardous chemical risk assessment? If 'NO', seek an accredited external provider for hazardous chemical risk assessment.	☐ YES	☐ NO
Has information about the hazardous chemicals been gathered? (refer to labels, SDS, placards and relevant Australian Standards for the type of hazardous chemical)	☐ YES	☐ NO
Evidence / Notes:		

Check other records associated with the hazardous chemical? (Consider previous assessments, monitoring records, injury or incident records, induction training, task-specific training)	☐ YES	☐ NO
If 'YES', are there any hazardous chemical previously assessed as high or as significant risk? Specify the risk rating using the Risk Matrix Form QSE05-FORM-19:	☐ YES	☐ NO
Evidence / Notes:		

HAZARDOUS CHEMICALS RISK ASSESSMENT FORM

RCQ

HEALTH/ ENVIRONMENT HAZARDS

Does the chemical have health or environmental hazards? Assess taking into consideration below. (consider potential acute / chronic health effects and likely route of entry)		☐ YES	☐ NO
HEALTH / ENVIRONMENT			
☐ Potential acute health effect	☐ Potential chronic health effect		
☐ Inhalation / breath	☐ Minor contamination / spill		
☐ Skin / absorption	☐ Major contamination / spill		
☐ Eyes	☐ Marine / environment		
☐ Ingestion/ swallowing	☐ Flammable		
☐ Injection / puncture	☐ Other		
Evidence / Notes:			

PHYSICOCHEMICAL HAZARDS

Does the hazardous chemical have physicochemical hazards? Assess taking into consideration below. (Refer to relevant Standards and Legislation)		☐ YES	☐ NO
Does the hazardous chemical have an exposure standard? Assess taking into consideration below. (Refer to the Workplace Exposure Standards for Airborne Contaminants)		☐ YES	☐ NO
PHYSICOCHEMICAL / EXPOSURE			
☐ Toxic	☐ Sensitiser (may cause allergic- type skin or respiratory reaction)		
☐ Corrosive	☐ Carcinogenic (may cause cancer)		
☐ Harmful	☐ Mutagenic (may cause mutations/ genetic change)		
☐ Irritant	☐ Teratogenic (may cause birth defects)		
☐ Other hazard/s (Identify):			
Evidence / Notes:			

HEALTH MONITORING

Do workers using the hazardous chemical require health monitoring? (Refer to relevant Standards and Legislation). If 'YES', air monitoring may be required. Assess taking into consideration below.		☐ YES	☐ NO
Are workers, or can workers be potentially, exposed to hazardous chemicals at the workplace, including by-products and waste? For each hazardous chemical or group of hazardous chemicals in the work unit, find out: - Is the substance released or emitted into the work area? - Are persons exposed to the chemical? - How much are the persons exposed to and for how long? (Air monitoring may be required to determine exposure) - Are there any risks associated with the storage and transport of the chemical Assess taking into consideration below.		☐ YES	☐ NO
FREQUENCY OF USE	DURATION IN HOURS	QUANTITY PER EACH USE	
☐ Daily	☐ Less than an hour per shift	☐ Less than 500ml	
☐ Weekly	☐ An hour to four hours per shift	☐ Less than 1000ml / 1kg	

HAZARDOUS CHEMICALS RISK ASSESSMENT FORM

RCQ

☐ Fortnightly	☐ More than 4 hours per shift	☐ Up to 50 litres / 50 kg
☐ Monthly	☐ Less than three times per week	☐ Up to 1000 litres / 1000 kg
☐ Intermittently	☐ Intermittent during month	☐ Over a tonne
STORAGE		
☐ Well ventilated	☐ No smoking, naked lights, heat or ignition source	
☐ Cool, dry	☐ Away from incompatible materials / substances	
☐ Removed from direct sunlight	☐ Bunding / containment area	
☐ Correct signage on storage area	☐ Other (Please Identify):	
DANGEROUS GOODS CLASS		
☐ 1 Explosives	☐ 2.1 Flammable Gas	☐ 2.2 Non Flammable Gas
☐ 3 Flammable Liquid	☐ 4 Flammable Solid	☐ 5 Oxidizing
☐ 6 Toxic	☐ 7 Radioactive	☐ 8 Corrosive
☐ 9 Miscellaneous	☐ Other (Please Identify):	
Evidence / Notes:		

CONTROL MEASURES

Are control measures currently in the workplace well maintained and effective in controlling the hazards? If 'NO' take appropriate action. Assess taking into consideration below.		☐ YES	☐ NO
CONTROL MEASURES			
☐ Substance eliminated from process	☐ Substituted for non-hazardous chemical	☐ Automated transfer system for chemical	
☐ Ventilation system	☐ Exhaust system	☐ Restricted area	
☐ Gas cylinders tested every 5 years (if applicable)	☐ Ignition sources removed or minimised and monitored	☐ Monitoring of air quality or materials (as required)	
☐ Product used in recommended dilutions	☐ Barriers (assessed structurally sound, fire resistant)	☐ Confined space / hot work permit (as required)	
☐ Transport signage correct	☐ Secured in transport	☐ Equipment well maintained	
☐ Shut off valve / emergency stop	☐ Spill containment available	☐ Housekeeping (area free of combustibles)	
☐ Signage in place	☐ Segregated from food	☐ Label easily visible and readable	
☐ Shower / eye wash facility	☐ Other (Please Identify):		
PPE			
☐ Safety boots	☐ Coveralls	☐ Long sleeve shirt and trousers	
☐ Face shield	☐ Safety glasses	☐ Chemical goggles	
☐ Chemical apron	☐	☐ Other (Please Identify):	
Respirator type: ☐ P1 ☐ P2 ☐ P3 ☐ Acid ☐ Other (Please Identify):			
Glove type: ☐ Neoprene ☐ Rubber ☐ Other (Please Identify):			
Evidence / Notes:			

SECTION D: ASSESSMENT FINALISATION

CONCLUDE RISK ASSESSMENT

What are the conclusions about risk? Only answer 'YES' to one conclusion

1. Risks are not significant

☐ YES☐ NO

2. Risks are significant but effectively controlled

☐ YES☐ NO

If you answer 'YES' to conclusion 1 or 2, go to FINAL

3. Risks are significant and not adequately controlled

☐ YES☐ NO

4. Uncertain about risks

☐ YES☐ NO

If you answer 'YES' to conclusion 3 or 4, go to next question.

Have actions resulting from conclusion about risks been identified and added to continual improvement register?

- Seek expert advice
- Requires appropriate control measure
- Requires induction training
- Requires on-going monitoring
- Requires health monitoring
- Requires emergency procedures and first aid

☐ YES☐ NO**Evidence / Notes:****DETAILED RISK ASSESSMENT APPROVAL****APPROVED BY***(Refer Delegations Register - Where risks are significant and not adequately controlled, Senior Management approval may be required):***NAME:****SIGNATURE:****DATE:**

PLANT RISK ASSESSMENT FORM

RCQ

1 PLANT DETAILS

TYPE OF PLANT:		MAKE / MODEL:		REGO NO.		PLANT NO.:	
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IMAGE OF PLANT	TECHNICAL DRAWING/S

2 TASK DETAILS

Brief description of task / activity plant undertaking			
Is the task within the design envelope of the item of plant?	☐ YES ☐ NO	Are competent operators and maintainers available for the duration of this task?	☐ YES ☐ NO
Is the operating environment conducive to using this item of plant?	☐ YES ☐ NO	Is there competent supervision available for the duration of this task?	☐ YES ☐ NO

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3 IDENTIFICATION OF HAZARDS AND RISK CONTROLS

Research indicates that the following hazards are the most likely from which unacceptable risk may arise in regard to using this item of plant. In regard to this item of plant and its operation, indicate (by placing a cross in the box) which hazards apply and select the risk controls / barriers to be used to eliminate or reduce the risk to an acceptable level. In this assessment the term 'approved standard' means a standard that accords with good practice and includes a standard detailed in legislation, code of practice published by the Statutory Authority and manufacturer's specifications. In this assessment the term 'competence' means a person having the skills, knowledge and experience to do something (the specified thing) within acceptable / tolerable risk.

HAZARD	RISK CONTROL		
☐ There is the potential for the plant to mechanically, structurally or operationally fail because it is not used in accordance with the approved standard including person / s using the plant in an application for which it has not been designed.	☐ Plant is used in accordance with the approved standard. ☐ Plant is operated by a person who has the skills and knowledge to do so in accordance with the approved standard. ☐ The operator is physically and psychologically fit to operate the plant: ☐ The operator is not under the influence of alcohol or any substance or drug, including prescription and non-prescription drugs, which may adversely affect their ability to operate the plant in accordance with the approved standard. ☐ The operator is not fatigued. ☐ The operator is not under undue stress including stress provoked by unrealistic timelines or production targets. ☐ Adequate quality supervision is provided. ☐ There are no unauthorised alterations to the plant including a removal of guards or by-passing of warning devices, emergency stop devices etc. ☐ Other :		
INTRINSIC RISK RATING (Prior to risk controls)		RESIDUAL RISK RATING (After risk controls)	

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ There is the potential for the plant to mechanically or structurally fail or partially fail because it is not maintained, serviced or repaired in accordance with the approved standard.	☐ Plant is maintained, serviced and repaired in accordance with the approved standard. Plant is maintained and serviced at the frequency detailed in the approved standard. ☐ Plant is inspected before each use by a competent person. ☐ Plant is maintained, serviced and repaired by a person who has the skills and knowledge to do so in accordance with the approved standard. ☐ Plant is maintained by a person who is physically and psychologically fit to do so. ☐ Unserviceable plant is withdrawn from use. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☐ There is the potential for the operator to be ejected from the operator's position and be struck by the plant if the plant becomes unstable and / or rolls over.	☐ Plant is used in accordance with the approved standard and in a way in which it cannot become unstable or roll over. ☐ Plant is fitted with ROP. ☐ Plant is fitted with seat belts and they are used. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ There is the potential for unplanned interaction between the mobile plant and other plant / workers / other persons / structures.	☐ Principal Contractor to Develop Traffic Management Plan. ☐ Persons are isolated from the mobile plant by means of fencing, barriers, barricades, temporary warning or control signs (operated manually or electronically), or a combination of these. ☐ Spotters/safety observers are used to control mobile plant movement: ☐ When operating in close proximity to each other ☐ When reversing ☐ Where the plant interacts with workers and others ☐ The operator is under direction to: ☐ Stop when the spotter or others working within the working zone cannot be seen ☐ Operate the plant at a slow speed ☐ Operate the plant with the operator facing in the direction of travel ☐ Operate the plant in a forward direction wherever possible ☐ The operator is physically and psychologically fit to operate the plant providing the best possible way of being situationally aware ☐ Plant is painted in a distinctive bright colour ☐ Interacting workers and others wear high visibility clothing ☐ Audible reversing alarms are used ☐ Persons do not approach within 30 metres or the swing distance plus five metres (whichever is greater) of plant in which an operator is at the controls (whether the plant is in motion or not) unless authorised to do so by the operator. The operator leaves the controls of the plant whilst the person is within working distances (such as swing distances) of the plant unless the person is within the working distance for the purposes of undertaking a task that is subject to a risk assessment and compiled work method statement in which such interaction has been considered and approved.		
	☐ Other :		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ There is the potential for unplanned interaction with overhead power lines.	☐ Power lines are switched off by the local electricity distributor.		
	☐ Temporary protection, for example 'tiger tail' covers, are fitted (low voltage power lines only).		
	☐ Ground barriers are provided (exclusion zones are applied).		
	☐ Plant does not approach overhead power lines any closer than the following unless appropriate approvals have been obtained from the relevant Statutory Authority:		
	☐ Power lines with voltages up to 132 000 volts	3m	
	☐ Between 132 000 – 333 000 volts	6m	
	☐ More than 333 000 volts	8m	
	☐ Where plant operates in close proximity to overhead power lines (not just specifically closer than the minimum approach distances), a safety observer is deployed to observe the approach of the plant and to warn the operator in sufficient time to ensure all clearances are maintained. The safety observer is not required to observe more than one piece of plant at any one time or carry out any other duties during the period of observance.		
	☐ An effective limiting device has been set to prevent any component of the plant approaching closer than the minimum approach distances		
	☐ No-one remains in contact with the plant and the ground or earthed situation during the period in which the plant is operating in close proximity to the power lines.		
	☐ Other :		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ There is the potential for unplanned interaction with underground / concealed services.	☐ There has been an assumption that underground services exist until proven otherwise. ☐ A complete record search of existing services has been undertaken prior to work starting. ☐ Validation of records has taken place prior to work starting. This has been achieved by the use of pipe and cable locating devices and careful spot excavation. ☐ All digging to locate services is along the line of the service. ☐ Once located, all services are correctly identified. ☐ Unserviceable plant is withdrawn from use. ☐ Where there is doubt about the identity of an exposed service, it is treated as an electricity cable or gas pipe until proven otherwise. ☐ All services have been assumed to be live until disconnected and proven safe at the point of work. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ There is the potential for the base on which the plant operates to become unstable (i.e. subject to slippage, subsidence or collapse).	☐ The interaction between the plant and its base is approved as a result of geotechnical analysis undertaken by a competent person. ☐ A complete record search of existing services has been undertaken prior to work starting. ☐ The base is re- examined by a competent person at regular intervals to ensure that it is stable and intact. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☐ There is the potential for unplanned interaction with hardware components that cut, crush, bend, shear, pinch, wrap, pull, or puncture.	☐ Plant is used in accordance with the approved standard. ☐ Plant is maintained, serviced and repaired in accordance with the approved standard. ☐ Plant is used and maintained by a person who is physically and psychologically fit to do providing the best possible way of being situationally aware. ☐ Plant has had no unauthorised alterations to it and guards have not been removed or made inoperative. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ General	☐ High pressure hydraulic systems used to lift/lower and angle blade system. ☐ Sheer point exists between blade and chassis. ☐ Operator's vision is impaired to the rear of the grader due to length and height of engine compartment. ☐ Capable of high speeds. Maintain an exclusion zone around work area. ☐ All persons to wear high visibility clothing. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)		RESIDUAL RISK RATING (After risk controls)	

4 IDENTIFICATION OF HAZARDS AND RISK CONTROLS (DISCRETIONARY)

HAZARD	RISK CONTROL
☐ All - Risk controls in this part are <u>in addition</u> to the following:	☐ Plant is used, maintained, serviced and repaired by a person / s who has the competence to do so in accordance with the approved standard. ☐ The operator / other person who maintains, services and repairs the plant is physically and psychologically fit to do so: ☐ They are not under the influence of alcohol or any substance or drug, including prescription and non-prescription drugs, which may adversely affect their ability to operate the plant in accordance with the approved standard. ☐ They are not fatigued. ☐ They are not under undue stress including stress provoked by unrealistic timelines or production targets. ☐ Adequate quality supervision is provided. ☐ There are no unauthorised alterations to the plant. ☐ Plant is inspected before each use by a competent person. ☐ Unserviceable plant is withdrawn from use. ☐ Personal protective equipment that is capable of providing protection (to a prescribed degree) for the person wearing it against a planned or unplanned interaction with a hazardous energy source is wearing it in circumstances where wearing it is in accordance with the approved standard. ☐ Other:
INTRINSIC RISK RATING (Prior to risk controls)	RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM

RCQ

HAZARD	RISK CONTROL		
☐ Kinetic energy (impact) – there is the potential for unplanned movement of the plant i.e. without the operator at the controls.	☐ Access to the plant is confined to authorised persons only. ☐ Plant is 'parked up' in accordance with the approved standard. ☐ Plant wheels are 'choked' when the plant is stationary. ☐ Vehicle disabling systems are used. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ Kinetic energy (impact) – there is the potential for the load to become unstable and detach from the plant, interacting with the operator, maintainer or other person.	☐ The potential for an unstable load/s is recognised. ☐ Loads restraint methods are in accordance with the approved standard. ☐ Load positioning is in accordance with the approved standard. ☐ Dunnage is used in accordance with an approved standard. ☐ Tie down methods are in accordance with an approved standard. ☐ Direct restraint methods are in accordance with an approved standard. ☐ Vehicle and load restraint equipment is approved. ☐ Tensioners are serviceable. ☐ Plant is designed to accommodate the specified load. ☐ The load is covered. ☐ Periodic visual checking at specified intervals is undertaken. ☐ There is a nominated exclusion zone in which the object could fall and in which a person will not enter. ☐ The plant is fitted with overhead protection (FOPS). ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ Stored energy – there is the potential for the operator, maintainer or other persons to interact with things (including liquids and gases) under pressure, tension, compression at a level that is unacceptable / intolerable.	☐ Isolation, dissipation or restraint of the energy source is carried out through the application of a positive isolation process and in accordance with the approved standard. ☐ Hazardous chemicals are used, stored and transported in accordance with the approved standard (subject to a separate Hazardous Chemical Risk Assessment). ☐ All hydraulic systems will be returned to non-pressurised position on shutdown. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☐ Substance – there is the potential for the operator, maintainer or other persons to interact with chemicals that are intrinsic to the plant or form part of a load.	☐ Hazardous chemicals are used, stored and transported in accordance with the approved standard (subject to a separate Hazardous Chemical Risk Assessment). ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ Physical stressors – there is the potential for the operator, maintainer or other persons to adopt awkward postures i.e. operator / operator position ergonomics is less than adequate.	☐ Awkward postures are not combined with:		
	☐ The exertion of muscular force, particularly with the joint in an extreme position.		
	☐ Another awkward posture.		
	☐ Repetitive actions.		
	☐ Maintenance of a static posture for a prolonged period.		
	☐ Prolonged standing without movement is avoided.		
	☐ Prolonged sitting is avoided.		
	☐ When sitting, twisting or bending the back is avoided.		
	☐ When sitting, the seat fully supports the body.		
	☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☐ Gravity – there is the potential for the operator, maintainer or other persons to fall from height i.e. gaining access or egressing from the operator position.	☐ When accessing a / egressing from a working platform at height (including an operators position associated with plant) the person will have at least three limbs in contact with a surface intrinsic to the plant designed to support the limb (step, handle, handrail or ladder).		
	☐ When accessing a / egressing from a working platform at height (including an operators position associated with plant) the person will proceed in a manner in accordance with the approved standard i.e. they will descend from height facing the plant unless stated otherwise.		
	☐ A person will not jump from height when egressing from a working platform at height (including an operators position associated with plant).		
	☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ Gravity – there is the potential for a person to slip, trip or fall (same level) in vicinity of the plant	☐ There is appropriate, safe and clear entry to and exit from the location of the plant. ☐ There is a safe system for collecting, storing and disposing of excess or waste materials. ☐ There is enough area allocated to safely store materials or the plant. ☐ An orderly workplace environment is established and maintained. ☐ General safety signs are erected and kept in good condition. ☐ Protruding objects are made safe. ☐ Spills are immediately cleaned. ☐ Working surfaces are free of debris. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)		RESIDUAL RISK RATING (After risk controls)	

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL
☐ Acoustic – there is the potential for the operator, maintainer or other persons to interact with noise generated by the plant or other plant in the operating vicinity at a level that is unacceptable / intolerable	Engineering treatment of the source is used as the preferred method of permanently removing the problem of noise exposure due to machinery or processes at the workplace: ☐ The plant's noise emissions comply with statutory requirements. ☐ Plant is used, maintained, serviced and repaired in accordance with the approved standard. ☐ Plant is maintained and serviced at the frequency detailed in the approved standard. ☐ Plant is inspected before each use by a competent person. ☐ Unserviceable plant is withdrawn from use. ☐ Specific machine elements causing the noise are corrected by a local source approach, rather than by consideration of the entire plant as a noise source. ☐ Exhaust systems are in good order. ☐ Exhaust and compression braking is limited. ☐ Horns are only used for collision avoidance or as detailed in the project traffic rules. ☐ Pod-type air cleaners, vented to atmosphere waste gates or blow-off valves are not be fitted to engines. ☐ Excessive acceleration of vehicles is avoided. ☐ Vehicle sound systems are used at a volume that does not impose the sound on another person outside the cabin of the vehicle. If engineering treatment of the source is not practicable, engineering treatment of the noise transmission path is considered: ☐ Distance is placed between the noise source and the target. ☐ Noise barriers are erected between the noise source and the target. ☐ Acoustical silencers for intake and exhaust systems are used.

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PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
Acoustic – Continued	Administrative / PPE risk controls: ☐ Nuisance noise is reduced by limiting the times of the operation of noisy plant vehicles and operations. ☐ Noisy construction activity is scheduled to coincide with high background noise levels where practicable. ☐ Job rotation, job redesign or rosters are used to reduce exposure to the target. ☐ Areas where persons may be exposed to noise levels exceeding those set by the statutory authority are sign-posted as 'hearing protection areas'. ☐ A person wears personal hearing protection of a type that reduces sound pressure level to below an 8 hour equivalent continuous A-weighted sound pressure level of 85dB(A), referenced to 20μPa or a C-weighted peak sound pressure level of 140dB(C), referenced to 20μPa determined at the person's ear. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☒ Radiant – there is the potential for the operator, maintainer or other persons to interact with short wavelength energy – ultra violet (sun).	☐ Plant operator is enclosed in a cabin. ☐ Open to air operator positions are fitted with overhead protection. ☐ Wide brimmed hats and loose, lightweight, light coloured cotton clothing which provides best air circulation and cooling from the heat while allowing a balance for protection from the sun is worn. ☐ High protection factor sunscreen (30+ or greater) is applied to exposed parts of the body. ☐ Where practicable, work is undertaken in the shade. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



HAZARD	RISK CONTROL		
☐ Atmospheric – there is the potential for the operator, maintainer or other persons to interact with a dusty atmosphere at a level that is unacceptable / intolerable.	☐ Dust suppression measures are implemented. ☐ Plant operator is positioned in an air-conditioned cabin. ☐ The correct particulate filter is used in accordance with AS/NZS 1716 (P1). ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

HAZARD	RISK CONTROL		
☐ Visual - there is the potential for the operator, maintainer or other persons to interact poor lighting conditions at a level that is unacceptable / intolerable.	☐ Illumination levels, including both natural and artificial light, adhere to the approved standard and take account of the following: ☐ Transition of natural light over the day. ☐ Glare. ☐ Contrast and shadow. ☐ Reflections. ☐ Other:		
INTRINSIC RISK RATING (Prior to risk controls)			RESIDUAL RISK RATING (After risk controls)

PLANT RISK ASSESSMENT FORM



1. RISK MATRIX

Perform a risk assessment for each hazard identified by:

- (i) Determining the consequences (refer Table 1)
- (ii) Determining the likelihood of the consequence occurring (refer Table 2)
- (iii) Apply the values obtained from Tables 1 and 2 to the Qualitative Risk Matrix (Table 3) to obtain the resultant Risk Score and Level
- (iv) Apply priorities for the implementation of control measures in accordance with the Priority Matrix.

TABLE 1 – CONSEQUENCE	
LEVEL	DESCRIPTOR
INSIGNIFICANT	No illness or injuries
MINOR	First aid treatment
MODERATE	Medical treatment required
MAJOR	Serious Injury/illness
CATASTROPHIC	Death

TABLE 2 - LIKELIHOOD	
LEVEL	DESCRIPTOR
ALMOST CERTAIN	Occurs regularly
LIKELY	Expected to occur
POSSIBLE	Has occurred in the last two years
UNLIKELY	Has occurred only once or twice during the preceding 5 years
RARE	Has not occurred during the preceding 5 years

TABLE 3 – RISK LEVEL / PRIORITY					
LIKELIHOOD	CONSEQUENCE				
	INSIGNIFICANT - 1	MINOR - 6	MODERATE - 11	MAJOR - 16	CATASTROPHIC - 21
ALMOST CERTAIN – 9	L 10	M 15	H 20	VH 25	VH 30
LIKELY – 7	L 8	M 13	M 18	H 23	VH 28
POSSIBLE – 5	L 6	M 11	M 16	H 21	VH 26
UNLIKELY – 3	L 4	L 9	M 14	M 19	H 24
RARE - 1	L 2	L 7	M 12	M 17	H 22

RISK LEVEL	PRIORITY		
VERY HIGH	The Activity MUST NOT COMMENCE. If started STOP IMMEDIATELY. Activity MUST NOT START until controls are implemented to reduce risk.		
HIGH	Implement controls within a reasonable timeframe to reduce the risk to as low as reasonably practical.		
MEDIUM	Implement controls within a reasonable timeframe to reduce the risk to as low as reasonably practical.		
LOW	Implement controls as considered necessary to further reduce the risk to as low as reasonably practical.		

HEIRARCHY OF CONTROL	
1. Eliminate	4. Engineer
2. Substitute	5. Admin
3. Isolate	6. PPE

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5 RISK ASSESSMENT SUPPORTING DOCUMENTS

- ☐ Manufacturer's or supplier's instructions and specifications
- ☐ Transport, storage and installation
- ☐ Operation
- ☐ Monitoring
- ☐ Servicing and maintenance
- ☐ Dismantling
- ☐ Its design envelope, including limits for its normal and abnormal use and life
- ☐ Its condition and performance limits
- ☐ Hazards associated with the plant and its materials
- ☐ Its failure modes
- ☐ Its safeguards and protective systems
- ☐ SWMS approved by RCQ
- ☐ Registration with the Statutory Authority
- ☐ Use (including daily log book record)
- ☐ Servicing and maintenance
- ☐ Repair and modification
- ☐ Inspection, testing and monitoring, and any action taken as a result of the inspection, testing and monitoring
- ☐ Incidents, damage and operation happening outside the plant's design envelope
- ☐ A record of the operator / s current competence including any applicable licence required by the Statutory Authority
- ☐ A record of the current competence of the organisation / person responsible for the plants maintenance, servicing and / or repair
- ☐ A record of the current competence

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PLANT RISK ASSESSMENT FORM



6 RISK ASSESSMENT PREPARATION DETAILS

RISK ASSESSMENT PREPARED BY:

NAME:		SIGNATURE:		DATE:	
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RISK ASSESSMENT REVIEWED BY (NOTE: Where Residual Risk is rated as High or Very High, authorised by an approved person is required):

NAME:		SIGNATURE:		DATE:	
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RISK ASSESSMENT ACCEPTED BY (IF APPLICABLE - WHERE SUBMITTED BY ORGANISATION TO PRINCIPAL CONTRACTOR FOR REVIEW):

NAME:		SIGNATURE:		DATE:	
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SAFE WORK METHOD STATEMENT – TEMPLATE



GENERAL DETAILS

ACTIVITY/ TASK			
SWMS REF NO.		SWMS VERSION NO.	DATE OF VERSION
PROJECT TITLE:			
PROJECT ADDRESS:			

CONTRACTOR DETAILS

CONTRACTOR		CONTRACTORS ABN	
CONTRACTOR ADDRESS			
SUPERVISOR NAME		POSITION / TITLE	
CONTACT TEL NO.		SIGNATURE	

SENIOR MANAGEMENT / DIRECT MANAGER APPROVAL - Refer Delegations (Where Residual Risk remains as High or Very High after Control Measures identified)

NAME		POSITION / TITLE	
DATE		SIGNATURE	

PERSON CONDUCTING THE BUSINESS OR UNDERTAKING (PCBU) PRINCIPAL CONTRACTOR / CUSTOMER DETAILS (IF APPLICABLE)

PRINCIPAL CONTRACTOR		NAME OF REPRESENTATIVE	
DATE SWMS ACCEPTED		SIGNATURE	

IDENTIFICATION OF HIGH RISK CONSTRUCTION ACTIVITY

Involves a risk of a person falling more than 2 m	☐	Is carried out on a telecommunication tower	☐	Is carried out in an area in which there are artificial extremes of temperature	☐	Involves, or is likely to involve, the disturbance of asbestos	☐
Involves structural alterations or repairs that require temporary support to prevent collapse.	☐	Is carried out in an area at a workplace in which there is any movement of powered mobile plant	☐	Is carried out on, in or adjacent to a road, railway, shipping lane or other traffic corridor that is in use by traffic other than pedestrians	☐	Involves demolition of an element of a structure that is load-bearing or otherwise related to the physical integrity of the structure	☐
Is carried out in or near water or other liquid that involves a risk of drowning	☐	Is carried out on or near pressurised gas distribution mains or piping	☐	Is carried out on or near chemical, fuel or refrigerant lines	☐	Is carried out on or near energised electrical installations or services	☐
Is carried out in an area that may have a contaminated or flammable atmosphere	☐	Is carried out in or near a shaft or trench with an excavated depth greater than 1.5 m	☐	Involves the use of explosives	☐	Is carried out in or near a tunnel	☐
Is carried out in or near a confined space	☐	Involves tilt-up or precast concrete	☐	Involves diving work	☐		

SAFE WORK METHOD STATEMENT – TEMPLATE



PPE TO BE WORN BY ALL PERSONS UNDERTAKING THIS TASK

High Visibility	Head Protection	Foot Protection	Hearing Protection	Eye Protection	Face Protection	Hand Protection	Protective Clothing	Breathing Protection	Other
 ☐	 ☐	 ☐	 ☐	 ☐	 ☐	 ☐	 ☐	 ☐	☐ If other list:

PLANT AND EQUIPMENT

- Where relevant, plant is registered with the statutory authority, and where relevant, the plant's design is registered with the statutory authority.
- Plant is fit for purpose, inspected, maintained, serviced, and repaired in accordance with manufacturer's / supplier's instructions or other specified standard representing good practice.
- Plant is accompanied by manufacturer's / supplier's instructions or other specified standard representing good practice and is available to the operator / user.
- Where relevant, the operator of the plant is licenced by the statutory authority.

PLANT REGISTER REFERENCE NO.	PLANT / EQUIPMENT REQUIRED TO UNDERTAKE THE TASK	USED ON PROJECT	REGISTRATION NO	CERTIFICATE NO	PLANT RISK ASSESSMENT COMPLETED	PRE-DELIVERY INSPECTION COMPLETED
		☐			☐	☐
		☐			☐	☐
		☐			☐	☐
		☐			☐	☐

HAZARDOUS CHEMICALS

- Hazardous chemicals to be used during the activity shall have a Hazardous Chemicals Risk Assessment completed prior to use.
- The materials shall be registered on the Hazardous Chemicals Register.

HAZARDOUS CHEMICALS REQUIRED TO UNDERTAKE THE TASK:	USED ON PROJECT	UN NUMBERS	DG NUMBERS	RISK ASSESSMENT COMPLETED	SDS PROVIDED
	☐			☐	☐
	☐			☐	☐
	☐			☐	☐
	☐			☐	☐
	☐			☐	☐

SAFE WORK METHOD STATEMENT – TEMPLATE

PERMITS

- The following Permits to Work are implemented by the Organisation (Principal Contractor) in managing high risk activities.
- The following Permits are to be completed prior to undertaking this activity and these are to be submitted for approval prior to undertaking these activities.

NAME	REQUIRED	NAME	REQUIRED
Hot Works (Grinding / Welding etc.)	☐	Excavation	☐
Work at Heights	☐	Work In, Over or Adjacent to Water	☐
Confined Space	☐	Ladders (Where Not Used for Access Purposes Only)	☐
Other	☐	If Other, identify:	

TRAINING AND COMPETENCIES

- The following training and competencies are required to be completed by personnel in order to undertake this activity.

NAME	COURSE CODE (IF APPLICABLE)
Work Safely in the Construction Industry (Construction White / Blue Card)	CPCCOHS1001A
Induction into the SWMS (Refer SWMS Training, Development and Acknowledgement)	N/A

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STANDARDS OF GOOD PRACTICE

LEGISLATION APPLICABLE TO THIS WORK	Work Health & Safety Act 2011 Work Health & Safety Regulations 2011
CODES OR OTHER STANDARDS APPLICABLE TO THIS WORK	Risk Management ISO 31000:2009 COP - Construction Work 2011 COP - First Aid 2014 COP - Hazardous Manual Tasks 2011 COP - How to Manage Work Health and Safety Risks 2011 COP - Work Health and Safety Consultation, Co-operation and Co-ordination 2011

SAFE WORK METHOD STATEMENT – TEMPLATE



HAZARD IDENTIFICATION, RISK ASSESSMENT AND CONTROL OF ACTIVITY (HIRAC)

ACTIVITY/ TASK/ JOB STEP	HAZARD / RISK	INTRINSIC RISK			HAZARD CONTROLS		RESIDUAL RISK			RESPONSIBLE PERSON (WHO IMPLEMENTS)
		L	C	R	25-30 VERY HIGH - STOP WORK	20-24 HIGH - SENIOR MGMT APPROVAL REQ	L	C	R	
					11-19 ACCEPTABLE – MAINTAIN CONTROLS	0-10 LOW - MONITOR CONTROLS				
					▪					
					▪					
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					▪					
					▪					
					▪					
					▪					
					▪					

NOTE: Where residual risk is High or Very High, Senior Management or Direct Manager / Supervisor (as per Delegations) approval is required prior to commencing work.

RISK MATRIX

Perform a risk assessment for each hazard identified by:

- Determining the consequences (refer Table 1)
- Determining the likelihood of the consequence occurring (refer Table 2)
- Apply the values obtained from Tables 1 and 2 to the Qualitative Risk Matrix (Table 3) to obtain the resultant Risk Score and Level
- Apply priorities for the implementation of control measures in accordance with the Priority Matrix.

TABLE 1 – CONSEQUENCE	
LEVEL	DESCRIPTOR
INSIGNIFICANT	No illness or injuries
MINOR	First aid treatment
MODERATE	Medical treatment required
MAJOR	Serious Injury/illness
CATASTROPHIC	Death

TABLE 2 - LIKELIHOOD	
LEVEL	DESCRIPTOR
ALMOST CERTAIN	Occurs regularly
LIKELY	Expected to occur
POSSIBLE	Has occurred in the last two years
UNLIKELY	Has occurred only once or twice during the preceding 5 years
RARE	Has not occurred during the preceding 5 years

TABLE 3 – RISK LEVEL / PRIORITY					
LIKELIHOOD	CONSEQUENCE				
	INSIGNIFICANT - 1	MINOR - 6	MODERATE - 11	MAJOR - 16	CATASTROPHIC - 21
ALMOST CERTAIN – 9	L 10	M 15	H 20	VH 25	VH 30
LIKELY – 7	L 8	M 13	M 18	H 23	VH 28
POSSIBLE – 5	L 6	M 11	M 16	H 21	VH 26
UNLIKELY – 3	L 4	L 9	M 14	M 19	H 24
RARE - 1	L 2	L 7	M 12	M 17	H 22

RISK LEVEL	PRIORITY
VH VERY HIGH	The Activity MUST NOT COMMENCE. If started STOP IMMEDIATELY. Activity MUST NOT START until controls are implemented to reduce risk. 1
H HIGH	Implement controls within a reasonable timeframe to reduce the risk to as low as reasonably practical. 2
M MEDIUM	Implement controls within a reasonable timeframe to reduce the risk to as low as reasonably practical. 3
L LOW	Implement controls as considered necessary to further reduce the risk to as low as reasonably practical. 4

HIERARCHY OF CONTROL	
1. Eliminate	4. Engineer
2. Substitute	5. Admin
3. Isolate	6. PPE

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EMERGENCY PREPAREDNESS AND RESPONSE

Emergency preparedness and response preparations specific to the hazards identified within this SWMS are to be implemented as follows:

- Where the organisation is a Principal Contractor (PC), emergency preparedness will be undertaken and site specific response procedures will be prepared (refer Emergency Response process).
- Where the organisation is undertaking work on behalf of a PC (appointed as a Subcontractor), the organisation will work in accordance with the emergency provisions/ emergency response plan put in place by the PC. For this project the PC is Watpac as stated on page 1 of this SWMS.
- Where the organisation is undertaking works on behalf of a Client (not appointed as Principal Contractor) where the Client is in control of the workplace, the organisation will consult and communicate with the Client to determine emergency preparedness and response requirements.
- Where the organisation is in control of the workplace or is requested by the Principal Contractor, the organisation will undertake emergency preparedness and prepare specific emergency response procedures (refer Flowcharts for Emergency Response).

MONITORING AND REVIEW

- Use Task Observation form in undertaking formal monitoring and review in accordance with adopted schedule.

OBSERVATION LOG	01	02	03	04	05	06
INITIAL						
DATE						

SWMS REVIEW AND AMENDMENT

This Safe Work Method Statement will be reviewed in consultation with those workers executing the work in response to the following:

- Any change to the standards of 'good practice' including any statutory requirement
- Any change in design
- Any change in the work environment
- Any change in the personnel performing the work
- Any change in the plant, substances, materials and structures
- After a task observation or inspection has been carried out and additional hazards have been identified
- Near miss, injury or illness results from exposure to a hazard / risk to which the Safe Work Method Statement includes
- Formal review of SWMS in accordance with adopted monitoring and review schedule.
- At a minimum, 12 monthly

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RECORD OF AMENDMENT

DATE OF REVIEW	ACTIVITY / TASK / JOB STEP REVIEWED	PERSON UNDERTAKING REVIEW	REVIEW RECOMMENDATIONS / AMENDMENT

SWMS DEVELOPMENT, TRAINING AND ACKNOWLEDGEMENT

A person performing work otherwise interacting with the work associated with this Work Method Statement must sign this Work Method Statement before commencing the activity / task or interacting with it. By signing the Work Method Statement the person is stating:

- They were involved in the compilation of the Work Method Statement including any associated risk assessment
- If they were not involved in the original compilation of the Work Method Statement including any associated risk assessment, they have been given the opportunity to comment on the statement
- They have read or been read the Work Method Statement
- They have received training and education in the work methodology expressed in the Work Method Statement
- They understand the Work Method Statement
- They have the skills and knowledge to perform the work as described in the Work Method Statement and as allocated to them
- They have the plant, materials, substances and structures to perform the work as described in this Work Method Statement and as allocated to them and that such plant, materials, substances and structures are 'safe' if they are used properly
- They understand they must comply with the content of the Work Method Statement.
- They have been issued and instructed in the correct use of the PPE required to fully undertake their role in accordance with this Work Method Statement.

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SAFE WORK METHOD STATEMENT – TEMPLATE



CONSULTATION – Evidence of consultation with the workforce *(Note: only a selection of the workgroup is required to sign off on the consultation section, all persons working under this SWMS must sign off on the induction section)*

DATE OF CONSULTATION	WORKER'S FULL NAME	ROLE	WORKERS SIGNATURE

INDUCTION

DATE OF INDUCTION / ACTIVITY	WORKER'S FULL NAME	COMPANY	WORKERS SIGNATURE

RCQ

COPY AND ATTACH ADDITIONAL PAGES IF REQUIRED

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SWMS REVIEW FORM

RCQ

PROJECT		PROJECT / JOB NO.	
SITE ADDRESS			
SUBCONTRACTOR		SWMS REFERENCE NO.	

REVIEW COMPLETED BY

NAME		POSITION	
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ACTIVITY COVERED BY SWMS

ITEM	REQUIREMENT/S	COMPLIANT	
		REVIEW 1	REVIEW 2
1	EMPLOYER		
1.1	Include full details about the employer such as organisation's name, ABN number, address, contact person.	☐ YES ☐ NO	☐ YES ☐ NO
2	WORK ACTIVITY		
2.1	Include a description of the activity / work being addressed by the SWMS etc.	☐ YES ☐ NO	☐ YES ☐ NO
2.2	Consider project details and the principal contractor requirements for whom the SWMS has been developed and where applicable the location / area of work etc.	☐ YES ☐ NO	☐ YES ☐ NO
2.3	Review the site hazard and risk register to identify any design related issues and hazards. If possible look at alternate solutions that could be incorporated into a design change request.	☐ YES ☐ NO	☐ YES ☐ NO
3	PLANT AND EQUIPMENT		
3.1	Include details of any plant and equipment that will be required to undertake the task	☐ YES ☐ NO	☐ YES ☐ NO
3.2	This step will help ensure this equipment is considered when developing safety control measures	☐ YES ☐ NO	☐ YES ☐ NO
3.3	It is also beneficial to consider including details of plant and equipment servicing, maintenance, inspection and cleaning activities that will be associated with the use of the plant and equipment although this could be addressed by other documentation. All servicing should be in accordance with the manufacturers requirements	☐ YES ☐ NO	☐ YES ☐ NO
4	COMPETENCIES AND QUALIFICATIONS		
4.1	Include details of specific competencies and training required to undertake the activity (or specific aspects of the activity) including licenses, qualifications, trade certificates etc.	☐ YES ☐ NO	☐ YES ☐ NO
4.2	It is also beneficial to consider recording the individuals' license / certificate numbers etc. associated with the specific competencies and training required on the SWMS, although this could be addressed by other documentation.	☐ YES ☐ NO	☐ YES ☐ NO
5	HEALTH AND SAFETY LEGISLATION		
5.1	The SWMS must incorporate controls that conform with the requirements of the specific health and safety legislation, codes, standards, that are relevant to the activity.	☐ YES ☐ NO	☐ YES ☐ NO
5.2	To assist with this task, an allocated area on the SWMS should list the names of health and safety legislation, standards and codes etc. that are relevant to the activity. This process can help ensure that relevant documents are considered when developing specific control measures and be used as a reference when updating SWMS following release of updated H&S legislation, standards and codes etc.	☐ YES ☐ NO	☐ YES ☐ NO

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ITEM	REQUIREMENT/S	COMPLIANT	
		REVIEW 1	REVIEW 2
6	CONSULTATION DURING DEVELOPMENT		
6.1	Workers or their nominated safety representatives must be involved in the development of site safety procedures including SWMS.	☐ YES ☐ NO	☐ YES ☐ NO
6.2	To ensure records of the relevant consultation are maintained many organisations include details on the SWMS of the consultation that occurred during the development including the names and positions of those involved. This could however be addressed by other documentation maintained with the SWMS rather than within the document itself.	☐ YES ☐ NO	☐ YES ☐ NO
7	STEP BY STEP SEQUENCE		
7.1	The activity must be broken up into a sequence of steps / tasks required to complete the work activity.	☐ YES ☐ NO	☐ YES ☐ NO
8	HAZARDS		
8.1	For each step / task associated with the overall activity the individual hazards must be identified.	☐ YES ☐ NO	☐ YES ☐ NO
9	RISK		
9.1	Each hazard must be risk assessed.	☐ YES ☐ NO	☐ YES ☐ NO
9.2	Risks for each identified hazard must be assessed having regard to the likelihood and consequence of it occurring and available information on the hazard including any records of incidents, illness and disease.	☐ YES ☐ NO	☐ YES ☐ NO
9.3	To assist in the development of the SWMS the risk assessment process and a defined risk rating system should be included.	☐ YES ☐ NO	☐ YES ☐ NO
9.4	Risk control priorities, having regard to the identified levels of risk must be determined.	☐ YES ☐ NO	☐ YES ☐ NO
10	CONTROLS		
10.1	Appropriate control measures must be established for all identified hazards, in accordance with the hierarchy of controls.	☐ YES ☐ NO	☐ YES ☐ NO
10.2	The SWMS must incorporate controls that conform to the relevant requirements including, but not limited to: the specific health and safety legislation; codes; standards; and principal contractor's project risk assessment controls chosen for the project.	☐ YES ☐ NO	☐ YES ☐ NO
10.3	Details should be recorded to demonstrate that responsibility for implementing the controls has been allocated.	☐ YES ☐ NO	☐ YES ☐ NO
10.4	Some organisations find it beneficial to incorporate a record of chosen hierarchy of controls to help ensure it is considered when developing the controls. This is not however the only way of demonstrating that the hierarchy of controls has been used.	☐ YES ☐ NO	☐ YES ☐ NO
11	EVALUATION AND REVIEW		
11.1	The hazard identification, risk assessment and risk control process needs to be subject to an evaluation of the effectiveness of the process.	☐ YES ☐ NO	☐ YES ☐ NO
11.2	As part of this process it is not uncommon for organisations to record residual risk; however this is not the only way of demonstrating the effectiveness of controls is assessed. For example, onsite task observations are also a means for assessing control effectiveness.	☐ YES ☐ NO	☐ YES ☐ NO
11.3	SWMS must be formally reviewed & updated whenever: ▪ A significant change to task or activity is identified ▪ An incident occurs relating to the task or activity ▪ A significant hazard is identified relating to the task or activity or ▪ Periodically as required.	☐ YES ☐ NO	☐ YES ☐ NO
11.4	As part of this process some organizations find it beneficial for review and inspection details to be determined and recorded within an allocated area on	☐ YES ☐ NO	☐ YES ☐ NO

SWMS REVIEW FORM

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ITEM	REQUIREMENT/S	COMPLIANT	
		REVIEW 1	REVIEW 2
	the SWMS.		
12	EMERGENCY RESPONSE		
	In some situations the process of ensuring worker safety while undertaking the activity will necessitate that specific emergency procedures have been developed and are included within the SWMS.	☐ YES ☐ NO	☐ YES ☐ NO
13	TRAINING INTO SWMS		
13.1	The names and signatures of the workers trained to undertake the activities outlined in the SWMS should be recorded on the SWMS, along with details associated with the training. For example, the trainer/person conducting the SWMS induction and date of training.	☐ YES ☐ NO	☐ YES ☐ NO
13.2	Outcomes of any consultation that occurred during the training and any agreements made regarding the implementation of the SWMS etc. should be documented and attached.	☐ YES ☐ NO	☐ YES ☐ NO
13.3	Records of any re-training of all relevant workers after changes have been made to the SWMS should be attached.	☐ YES ☐ NO	☐ YES ☐ NO
14	SUPERVISION		
14.1	The names and positions of personnel assigned supervising responsibilities should be recorded on the SWMS.	☐ YES ☐ NO	☐ YES ☐ NO
15	PERMITS		
	Ensure SWMS acknowledges our organisation's permit system. - Confined Space Entry. - Work at Height. - Ladder Use. - Excavation. - Hot Works.	☐ YES ☐ NO	☐ YES ☐ NO

COMMENTS / DEFICIENCIES

WMS REVIEW / APPROVAL

NOTE: If high risk activity approval from Senior Management position required. Refer Delegations register.

	SITE SAFETY ADVISOR (WHERE APPOINTED)		SITE MANAGER		PROJECT MANAGER	
REVIEW 1	Review Date Signed		Review Date Signed		Review Date Signed	
REVIEW 2	Review Date Signed		Review Date Signed		Review Date Signed	
APPROVAL	Approval Date Signed		Approval Date Signed		Approval Date Signed	