


W F O'Brien Pty Ltd
 36/2 Bishop St, St Peters NSW 2044
 Ph. 02 9516 2477
 Fax 02 9516 1345
 ABN: 84 001 030 333



SAFE WORK METHOD STATEMENT

SWMS No: Auto Nat
001.001.012
Rev No: 2
Date:

1. PROJECT INFORMATION & RESOURCES

| | | |
|-------------------------------------|---|--|
| Project: | | Job No: |
| Work Activity / Tasks: | | This SWMS has been developed in consultation with the undersigned employees and accepted: Reviewed by: Matt Hancock |
| Service Manager/ Contact: | Bruce Hancock (02) 9516 2477 | Position: WHSE Manager |
| Personnel Involved in tasks: | <input type="checkbox"/> Tradespersons <input type="checkbox"/> Supervisors | Signature:  Date: |

2. HAZARD IDENTIFICATION, RISK ASSESSMENT & CONTROL (HIRAC)

Any high risk hazards identified during the works which are not covered in this SWMS should be addressed in Section 10

| Item | Procedure List the activities to carry out the task (in steps) | Possible Hazards Identify the hazards associated with each activity (i.e. what can cause the incident) | Class of Risk | Control Measures For High (Class 1) or Medium (Class 2) Risks, identify control measure(s) to eliminate the risk or reduce to Low (Class 3) using the Hierarchy of Controls: 1. Elimination 2. Substitution 3. Isolate people from hazard 4. Engineered controls. 5. Administrative Controls 6. PPE | Residual Risk | Person Responsible |
|------|---|---|---------------|---|---------------|--------------------------|
| 1 | Arrival on site | Unfamiliar site Site rules unknown Emergency Procedures | 2 2 1 | Report to Site Contact for site specific induction to be made aware of site rules and Emergency Procedures. | 3 3 2 | Supervisor Technician |
| 2 | Induction of employees into WMS & MSDS | Untrained personnel | 2 | All personnel to be trained and inducted into this WMS and MSDS before commencing this activity by supervisor. All employees are issued and trained in the proper use of PPE including hard hat, safety glasses, steel capped footwear, gloves, high visibility clothing, hearing protection, dusk mask and sunscreen. Note: Training via Toolbox meeting. | 3 | Supervisor Technician |
| 3 | Revision of MSDS | Hazardous substance | 2 | MSDS to be provided when purchasing product to be used, Copy of MSDS to be provided to the principle contractor | 3 | Supervisor Technician |



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|-------------|--|--|----------------------|---|----------------------|---------------------------|
| 4 | Unload Tools and Equipment on site | Site Conditions Manual Handling | 1 1 | Bring work vehicles as close as possible to work area Eliminate carrying equipment over long distances Park vehicle where it will not block off access points for other plant or trades Remove tools and equipment from vehicle and return vehicle to car park area | 2 3 | Supervisor Technician |
| 4 | Unload Tools and Equipment on site (cont.) | | | Check with Site Contact that the timing of the work is suitable. Use Platform Ladders only. Safe lifting practices – keep back straight, bend knees. Team lifting for heavy and awkward objects. Ensure all electrical tools and equipment have current safety tags and are safe to use | | Supervisor Technician |
| 5 | Work on Fire Doors | Asbestos | 1 2 | Before work commences, check site Asbestos audit Report/register to identify areas where asbestos may be present Performance to be recorded and documented as per Australian Standard AS1851-2005 | 3 3 | Supervisor Technician |
| 6 | Aluminium and Glass Doors | Back injury Eye damage Cuts and Abrasions | 1 1 2 1 | Setup barricades or barriers Use glass sucker on glass doors or de-glazed windows Place glass on soft, non-slip material Identify approximate weight of the door and utilise two or more people to aid in lifting | 3 3 3 3 | Supervisor Technician |
| 7 | Fit Electric locking or closing device | Eye damage Electrocution Falling objects overhead | 1 1 1 | Identify areas of risk to public safety and setup barricades or barriers Use appropriate personnel protective equipment at all times Secure ladder correctly on flat, clean even ground | 3 3 3 | Supervisor Technician |
| 8 | Inspect the work area | Incorrect area | 1 | If any work is over 2 metres in height. A separate risk assessment must | 3 | Supervisor |



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| | | Working at heights Slip/Trip/Fall Other trades | 1 1 1 | raised and new control measures identified. Pre start inspection of ladders to ensure they are in good condition and used in accordance with safe work practice. Only trained and competent operators who are fit to perform the work will use platform ladders. Visually inspect floor area – stable, level and clean. Erect barricades and signs to keep other trades/pedestrians out of work area | 3 3 3 | Technician |
| 9 | Installation of components | Falling objects | 1 | Objects falling from a height can cause serious injury. Barricade and signpost work area to alert that overhead work is taking place and that access to the area is restricted. | 3 | Supervisor Technician |
| 10 | Safety and performance testing | Moving parts of operator – crush or laceration injury. Failure or malfunction of door – falling door or exploding glass panel | 1 1 | Barricade and signpost work area to alert that testing is taking place and that access to the area is restricted. Before testing commences, contractors must stand well clear, removing all self from all works area and moving parts. Performance to be recorded and documented as per Australian Standard AS5007-2007 | 3 3 | Supervisor Technician |
| 11 | Clean up | Environment | 1 | Remove all rubbish from job area and place in bins provided. Do not allow rubbish to blow into the environment. Only general purpose, commercially available household cleaning agents will be used for clean up. Inspect work area for any swarf ,dust or debris | 3 | Supervisor Technician |
| 12 | Sign off Job/ debrief | Client is unaware of completion. Client unaware of contractor has left site. Emergency Services may search a site if | 1 1 1 | Contractor must conduct a check inspect of work area and report to Site Contact when work is completed, that that door is operational and available for access or egress or provide progress report if job can not be completed on that day/night. <ul style="list-style-type: none"> Advise Supervisor if any doors require extra work so doors meet standards. Discuss with maintenance for approval with on spot replacement or | 3 3 3 | Supervisor Technician |

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|------|---|---|---------------|--|---------------|--------------------|
| | | they are unaware that contractors have left site. | | repairs. Site supervisor must be made aware that contractors are leaving the site. | | |
| 13 | Emergency Response and Environment | Injured Workers | 1 | Follow Emergency Response procedures as discussed during induction Assess area before entering. Do not put yourself or others in danger Stop work if area working in is hazardous and notify immediately Notify Spotless/School Representative of any safety issues. Phone 000 if required All rubbish to be disposed of into rubbish bins on site daily | 3 | All personnel |



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3. HAZARD IDENTIFICATION & RISK ASSESSMENT CALCULATOR

| Likelihood | RISK SCORE CALCULATOR | Consequence | | | | | Consequence / Impact | Description of Consequence / Impact | Risk Class |
|-------------------|-----------------------|-------------|-------|----------|-------|---------------|---|-------------------------------------|------------|
| | | Significant | Major | Moderate | Minor | Insignificant | | | |
| Very Likely | | 1 | 1 | 1 | 2 | 2 | Potential Death, Permanent Disability, or Major Structural Damage. Off-site release not contained, major remediation required with outside assistance, significant detrimental environmental impact. | 1 | |
| Likely | | 1 | 1 | 2 | 2 | 2 | Potential temporary disability/ serious injury or Minor Structural Damage. On site release contained, minor remediation required with outside assistance; short-term detrimental environmental impacts. | 2 | |
| Possible | | 1 | 2 | 2 | 2 | 3 | Potential incident that may cause persons to require first aid. On-site release immediately contained; minor level clean up with no short-term environmental impacts. | 3 | |
| Remotely Possible | | 2 | 2 | 2 | 3 | 3 | | | |
| Very Unlikely | | 2 | 2 | 3 | 3 | 3 | | | |

4. LEGISLATION, CODES OF PRACTICE & STANDARDS (Relevant to the Activities)

| Legislation | Codes of Practice | Standards & Guides |
|---|--|---|
| <ul style="list-style-type: none"> NSW WH&S Act 1995 NSW WH&S Regulations 2008 NSW WH&S Act 2011 | <ul style="list-style-type: none"> NOHSC 2005: Manual Handling 1990 NOHSC 2007: Prevention of Musculoskeletal Disorders Caused From Performing Manual Tasks NOHSC 2009: Noise Management & Protection of Hearing at Work NOHSC 2014: NCOP for Storage & Handling of Dangerous Goods 2001 | <ul style="list-style-type: none"> National Standard for Manual Tasks 2007 NOHSC 1016: National Standard for Construction Work NOHSC 1010: National Standard for Plant AS/NZS 1892: Portable Ladders AS/ANZ 1269: Occupational Noise Management AS/ANZ 5007 – 2007: Powered doors for pedestrian access and egress. AS 1851 – 2005: Maintenance of fire protection systems and equipment BCA Class 2 – 9: Part C 1: Fire resistance and stability BCA Class 2 – 9: Part E 4.5 Exit signs, Part 4.7 (Class 2 and 3 buildings and class 4 parts: exemptions) |

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5. TRAINING & COMPETENCY

| Employee Name | Tasks & duties on this project | Skills, Competencies & Experience (Tickets, qualifications, trade, years experience) | Competency / Ticket No | Date of Issue |
|---------------|--------------------------------|--|------------------------|---------------|
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6. PLANT & EQUIPMENT TO BE USED

| Plant Safety Verification Completed | Service Records Provided | Lifting Equipment Certification | |
|-------------------------------------|--------------------------|---------------------------------|-----|
| Electrical Tools | Jan 2011 | Test and Tag Records | n/a |

7. HAZARDOUS MATERIALS TO BE USED

| Product Name | Application | Product labelled (Y/N) | MSDS Supplied (Y/N) | Risk Class 1, 2 or 3 | Classified as hazardous in MSDS (Y/N) |
|--------------|-------------|------------------------|---------------------|----------------------|---------------------------------------|
| Nil | | | | | |
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IF YES: the risk & control measures associated with the product/ substance & the precautions for its use are outlined in the SWMS

Class 1: High Risk Does the substance and its associated hazards have the potential to kill or cause permanent disability? (e.g. lung disease)
Class 2: Medium Risk Does the substance and its associated hazards have the potential to cause a serious injury, illness which will temporarily disable (e.g. dermatitis)
Class 3: Low risk Does the substance and its associated hazards have the potential to cause a minor injury which would not disable (e.g. mild skin rash)

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| 8. PERSONAL PROTECTIVE EQUIPMENT (PPE) TO BE USED | Supplied by Employer | Training Provided | Training Records | Fall Arrest Device Inspection Report |
|---|----------------------|---------------------|------------------|--------------------------------------|
| Hard hat | Y | via Toolbox Meeting | | N/A |
| High visibility clothing or vest | Y | via Toolbox Meeting | | N/A |
| Steel capped safety boots | Y | via Toolbox Meeting | | N/A |
| Eye protection | Y | via Toolbox Meeting | | N/A |
| Hearing protection (where applicable) | Y | via Toolbox Meeting | | N/A |
| Respirators | Y | via Toolbox Meeting | | N/A |
| Gloves | Y | via Toolbox Meeting | | N/A |

9. EMPLOYEE CONSULTATION & SIGN OFF

This SWMS has been developed following a risk assessment of the tasks through consultation with our employees and has been read, understood and signed by all employees undertaking the task. Training has been provided in the work activities described in this Work Method Statement.

| Name | Employer | Signature | Date |
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Supervisor Sign-off: Confirmation that I have checked all qualifications/ licences tendered and verify they are applicable and current. I have ensured that consultation and induction into this SWMS has taken place and that all the plant and equipment listed is properly maintained and safe to use.

Name: _____ Position: _____

10. SWMS REVISION: (Use this section to revise/ add new tasks in the SWMS)

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|------|---|--|---------------|---|--------------------|---------------|
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SWMS REVISION – EMPLOYEE CONSULTATION & SIGN-OFF

This SWMS has been revised following a risk assessment of the tasks described above through consultation with our employees and has been read, understood and signed by all employees undertaking the tasks. Training has been provided in the revised work activities described in this SWMS review.

| Name | Employer | Signature | Date |
|------|----------|-----------|------|
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Supervisor Sign-off: Confirmation that I have checked all qualifications/ licences tendered and verify they are applicable and current. I have ensured that consultation and induction into the revised SWMS has taken place and that all the plant and equipment listed is properly maintained and safe to use.

| | | |
|--|-----------|------|
| Name: : Bruce Hancock Position: Service Manager | Signature | Date |
|--|-----------|------|