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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Activity/Task:** | | |  | | | | | | **Dates:** | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Prepared By:** | | |  | | | **Workplace Location:** | | | Various | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **SWMS Approved By:** | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Skills Required:** | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Plant/Equipment Required:** | | |  | | | | | | **Version No:** | | | | 01 | **Creation Date:** | | |  | |
| **2. High Risk Work**  **□** Risk of a person falling more than 3 metres  **□** Likely to involve disturbing asbestos  **□** Diving work  **□** Use of explosives  **□** Tilt-up or precast concrete elements  **□** Work on a telecommunication tower | | | **□** Demolition of load-bearing structure  **□** Temporary load-bearing support for structural alterations or repairs  **□** Work in an area with movement of powered mobile plant  **□** Work on or near energised electrical installations or services  **□** Work on or near chemical, fuel or refrigerant lines  **□** Work in or near water or other liquid that involves a risk of drowning | | | | | | **□** Work on, in or adjacent to a road or other traffic corridor in use by traffic  **□** Work in or near a confined space  **□** Work in an area that may have a contaminated or flammable atmosphere  **□** Work in areas with artificial extremes of temperature  **□** Work on or near pressurised gas mains or piping  **□** Work in or near a shaft or trench deeper than 1.5m or a tunnel | | | | | | | | | |
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| **3. Potential Hazards Associated with the Activity/Task**  **(Identify each of the general Hazards associated with the Activity/Task by placing a x next to the potential Hazard, and ensuring the hazard is adequately addressed within the SWMS)** | | | | | | | | | | | | | | | | | | |
| **Work Environment** | | **Energy** | | | **Work Process** | | | **Chemicals** | | | **Plant/Equipment** | | | | | **People** | | |
| Entry/Exit |  | Gas L/P | |  | Working at Height | |  | Dangerous Goods | |  | Bobcat | | | |  | Communication | |  |
| Weather Temp. Extremes |  | Gas M/P | |  | Falling Objects | |  | Toxic Substances | |  | Backhoe | | | |  | Fatigue | |  |
| Confined Space |  | Gas H/P | |  | Sharp Materials | |  | Inhalation | |  | Chipper | | | |  | Stress | |  |
| Trench Collapse |  | Gas Transmission | |  | High Noise Levels | |  | Contact With | |  | Grader & roller | | | |  | Working alone | |  |
| Oxygen Atmospheric Level |  | Water | |  | Ladders | |  | Dust | |  | Sweeper | | | |  | Personnel Threat | |  |
| Remote Site |  | Electricity H/V | |  | Manual Handling | |  | Bacteria | |  | Plant Movement | | | |  |  | |  |
| Difficult Rescue |  | Electricity L/V | |  | Procedural Failure | |  | Oils | |  | Front Deck Mower | | | |  |  | |  |
| Poor Lighting |  | Hydraulic Pressure | |  | Height Access | |  | Contaminated Fluids | |  | Suspended Loads | | | |  |  | |  |
| Trip/Slip Hazards |  | Kinetic | |  | Spills | |  | Fuels | |  | Tractor | | | |  |  | |  |
| Poor Visibility |  |  | |  | Switching | |  | Drilling Muds | |  | Loader | | | |  |  | |  |
| Vehicles / Pedestrians |  |  | |  |  | |  |  | |  | Trucks/Utilities | | | |  |  | |  |
| Erosion |  |  | |  |  | |  |  | |  |  | | | |  |  | |  |
| Flora/Fauna |  |  | |  |  | |  |  | |  |  | | | |  |  | |  |

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| **4. Risk Matrix - (Align Likelihood x Consequence = Risk)** | | | | | |  | **Consequence - Definition** | | |
| **Likelihood – Definition** | **Consequence**  **Where the post control Risk Rating exceeds Significant, expert advice must be sought.** | | | | |  | **Environmental impacts** | **Health and Safety issues** |
| **Minor** | **Serious** | **Severe** | **Major** | **Catastrophic** | **Minor** | Onsite minor leak contained without impact. | First Aid, No Medical Treatment |
| **Almost Certain-** Will almost certainly occur once (or more) every couple of years. (Expected to happen, happens frequently). | Moderate | High | Extreme | Extreme | Extreme | **Serious** | On/offsite release with minimal impact. | LTI / Medical Treatment |
| **Likely-** Will probably (>50%) occur once (or more) in 20 years. Could occur within business unit or similar sites. | Moderate | Significant | High | Extreme | Extreme | **Severe** | Offsite release, damage to flora/ fauna & short term effects to soil, water, air. | Temporary or partial permanent disability / LTI |
| **Possible-** Could occur, but not probable | Moderate | Moderate | Significant | High | Extreme | **Major** | Major offsite release of pollutants with significant ongoing impact to flora/fauna | Single Fatality or total permanent disability |
| **Unlikely-** Not expected to occur. Has not occurred at Remo Contractors , but has occurred within the industry within Australia. | Low | Low | Moderate | Significant | High | **Catastrophic** | Widespread toxic release offsite with long term/substantial effects to flora/fauna, soil/water | Multiple Fatalities or total permanent disabilities |
| **Rare-** May occur only in exceptional circumstances. Has occurred in known history worldwide or is conceptually possible. | Low | Low | Moderate | Moderate | Significant |

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| **5. PPE to be Utilised:** | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Uniform** | **Footwear** | **High Vis’** | **Hard Hat** | **Eyewear** | **Fall Arrest** | **Gloves** | **Hearing** | **Dust Mask** | **Other** |  | |  |  |  |  |  |  |  |  |  |  |  | |

| 6. Sequential Work Process Steps | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Step No.** | Sequential Steps  List the basic task steps in a sequential order. | **Hazards and Impacts**  Identify the health and safety or environmental Hazards and Impacts associated with each step, and examine each to determine the Risk Rating. | **Risk Rating**  Rate the risk prior to controls being in place.  (Consequence x Likelihood) | Safety Controls  Determine what actions are required to eliminate or minimise all hazards that could lead to an accident. Indicate who is to perform the action where applicable against each action | **Risk Rating**  Re-rate the risk with controls in place. (Consequence x Likelihood) | **Owner**  Control action owner |
| **1** |  |  |  |  |  |  |
| **2.** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |
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| 7. TEAM ACKNOWLEDGEMENT (signatures):- Ask crew, “Are there any questions?” (Ensure all issues are addressed)  If you are not satisfied with the safety control measures do not proceed and contact your immediate supervisor.  **To be signed by all workers e.g. employees, sub-contractors.**  **To be signed by supervisor, Officer of the business.** | | | |
| **Date & Name** | **Signature** | **Date & Name** | **Signature** |
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| **Jointing Work** | | **Induction Training for General Construction Work (White Card)** | |
| **Drivers** | | **Current Drivers Licences** | |
| **Plant Operators** | | **Accredited & Current Operators Ticket** | |
| **General Construction Site Work** | | **White Card** | |
| **Personal Protective Equipment (PPE)** | | **Personal Protective Equipment (PPE)** | |
| **Hard Hats** | | **Hearing Protection, e.g. Ear plugs etc. if required by work activity** | |
| **High Visibility Safety Vests** | | **Safety Glasses, etc. if required by work activity** | |
| **Disposable Clinical Overalls/approved respirator if required** | | **Long sleeve shirts & long pants** | |
| **Safety Boots** | | **Sun Screen** | |
| **Gloves, if required by work activity** | | **Full face shield if grinding or power cutting** | |