(SWMS) SAFE WORK METHOD STATEMENT
— OPERATIONS —

RYMAN HEALTHCARE

Work Activity:			
Village Name:		**Responsible Supervisor:**	
Prepared By:		**Date Developed/Reviewal Date:**	

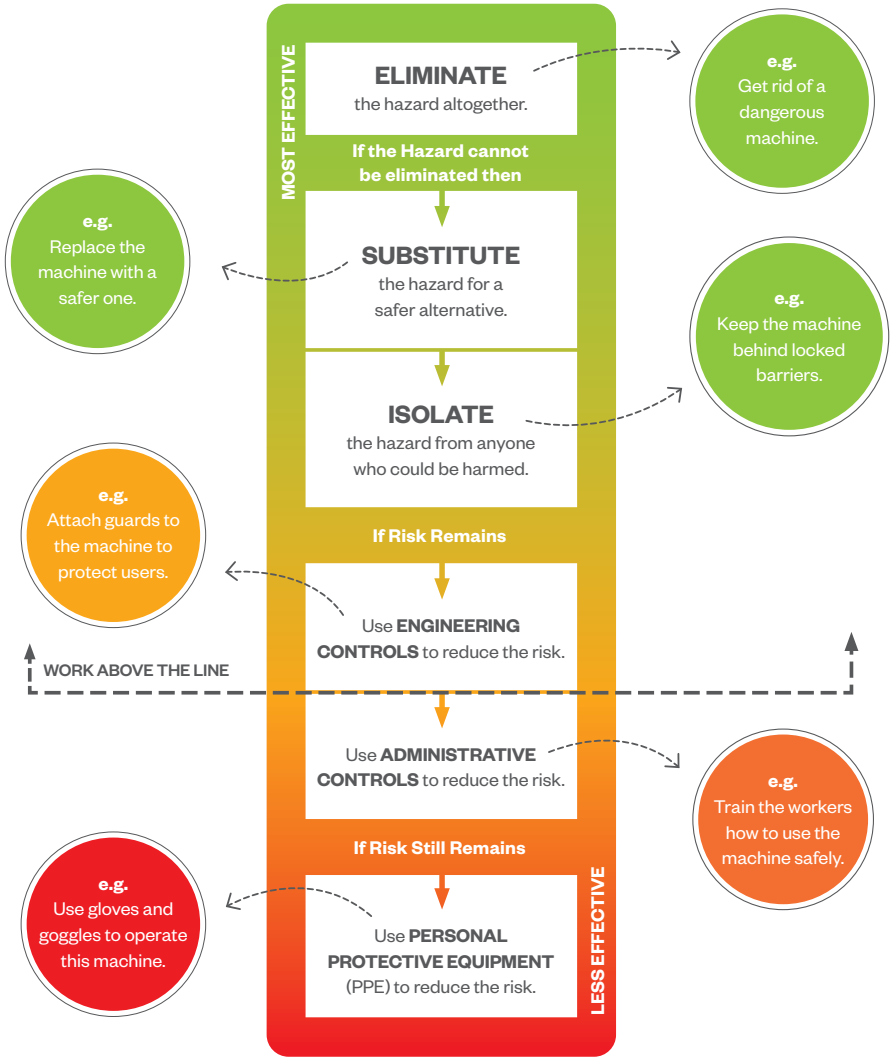
What critical risks are involved with your work?
TICK which risks are applicable to the task at hand. This is not a complete list of all possible critical risks. You can list more under 'Other'.

○  Cranes, hoists or other lifting activities	○  Confined space work	○  Demolition	○  Energized electrical installations/services	○  Environmental hazards (dust/excessive noise)	○  Excavations and trenches	○  Hazardous substances
○  Hot work	○  Mobile plant	○  Power tools	○  Structural engineering that requires temporary support (e.g) Acrow Propping	○  Underground and overhead services	○  Working at height, dropped objects or temporary work platforms	○ Other (please specify):

What are you doing?
Describe the activity and how it will be carried out

What PPE do you need?	What equipment are you using?	Do you need any permits?
 Hi-Vis, Safety Boots, Hard Hat, Hearing Protection, Respiratory Protection, Safety Harness, Eye Protection, Gloves Other:	E.g. Ladder, grinder, blow torch, scaffold, hammer	○  Hot work ○  Confined space ○  Electrical ○  Permit to dig ○  Work at height

HIERARCHY OF CONTROLS



The hierarchy of control is a system for controlling risks in the workplace. The hierarchy of control is a step-by-step approach to eliminating or reducing risks and it ranks risk controls from the highest level (elimination) of protection and reliability through to the lowest and least reliable protection (PPE)

CALCULATING THE RISK

1

Assess the consequence

How bad could it be? What is the realistic worst-case scenario?

2

Assess the likelihood

How likely is it that the worst-case scenario could happen?

2. LIKELIHOOD	1. CONSEQUENCE: INSIGNIFICANT Discomfort or first aid injuries	MINOR Medical treatment (registered practitioner)	MODERATE Restricted duties or LTI/illness	MAJOR Serious harm or permanent disability	CATASTROPHIC One or more fatalities
ALMOST CERTAIN Often occurs	MODERATE[8]	HIGH[15]	HIGH[17]	EXTREME[22]	EXTREME[25]
LIKELY Could easily happen	MODERATE[7]	MODERATE[10]	HIGH[16]	EXTREME[21]	EXTREME[24]
POSSIBLE Has happened and could happen again	LOW[3]	MODERATE[9]	MODERATE[12]	HIGH[18]	EXTREME[23]
UNLIKELY Could have happened but unlikely to happen again	LOW[2]	LOW[5]	MODERATE[11]	HIGH[14]	HIGH[20]
RARE Conceivable but only in extreme circumstances	LOW[1]	LOW[4]	LOW[6]	MODERATE[13]	HIGH[19]

Rate the risk by cross-referencing the consequence and likelihood to find the risk rating and score. For every hazard an initial risk score and residual risk score will be documented in the risk register. The risk score allows us to prioritise the risks that we need to manage.

The **red band** signifies those risks with catastrophic consequences on the Risk Matrix, which are referred to as critical risks.

SAFE WORK METHOD STATEMENT (SWMS)

Sequence of the task Describe each step in the activity	**What could go wrong?** Describe the key hazards and risks for each step	**Initial Risk** What would the risk level be without controls? Refer to the matrix. List the score and the level.	**How will you control this?** E.g. How will help stop something going wrong? Refer to the hierarchy of controls for guidance	**Is a Critical Risk Present?**	**Residual risk** What is the risk level after controls are in place? Refer to the matrix. List the score and the level.	**Who will oversee these controls?**

ACTION AND APPROVAL

REFER TO YOUR RESIDUAL RISK RATINGS ON THE PREVIOUS PAGES AND TAKE THE CORRESPONDING ACTION.

Residual Risk Level	Action	What must happen next?
EXTREME	STOP	**TASK MUST STOP** The task CANNOT proceed. Further controls must be implemented to reduce risk. Consult Health and Safety for support.
HIGH	CHECK	**The Project Manager or Site Manager, and site Health and Safety Team** must review controls and ensure they are appropriate and effective before the task can start.
MODERATE	CHECK	**The Foreman or other member of site management** must review controls and ensure they are appropriate and effective before the task can start. Continually review controls are in place and working effectively.
LOW	CHECK	**The Foreman or other member of site management** must review controls and ensure they are appropriate and effective before the task can start. Continually review controls are in place and working effectively.

SIGN-ON SHEET

EVERYONE INVOLVED IN THE WORK MUST READ AND UNDERSTAND SIGN ON TO THE SWMS BEFORE THEY START WORK.

Name:	Signature:	Date:	Name:	Signature:	Date:
			Works Supervisors Name:	Works Supervisors Signature:	Date: