

OHS FORM 005 SAFE WORK METHOD STATEMENT (SWMS) – also known as Job Safety Analysis (JSA)

Company Name:	<i>This SWMS has been developed and authorised by:</i>			
	Name:			
	Position:		Date:	
	Signature:		Phone:	
			Mobile:	

DESCRIPTION OF WORK ACTIVITY: Bricklaying

Trades involved with undertaking this Work Activity:

This SWMS is submitted to: (principle contractor)

COMPANY:	
CONTACT NAME:	PHONE NUMBER:
SITE ADDRESS:	PROJECT DESCRIPTION:

This SWMS was review by: (principle contractor)

NAME:	POSITION:
SIGNATURE:	DATE:
PHONE NUMBER:	MOBILE NUMBER:

Person responsible for OHS on the contractor's behalf:

NAME:	POSITION:
SIGNATURE:	DATE:
PHONE NUMBER:	MOBILE NUMBER:

List plant, equipment and tools to be used	List Hazardous Substances to be used or handled	MSDS available? (Tick)	List PPE to be worn (Tick)	List Hazards to consider (Tick)
eg. Electric generator	eg. Unleaded petrol		Hard Hat	Fall from ladder
			Safety Boots	Fall from heights
			High-visy clothing	Fall from scaffold
			Gloves	Contact with electricity
			Hearing Protection	Falling objects
			Safety Glasses	Collapse
			30+ Sunscreen	Slips, trips and falls
			Dust Masks	Manual handling
			Other (specify):	Exposure to noise
				Struck by moving plant
				Inhalation of dust or fumes
				Cuts
				Other (specify):

Health Risks and Likelihood of Damage	How LIKELY is it to be that bad? Note: If a hazard is rated 1, 2 or 3, action <u>must</u> be taken immediately.				
	What damage could it cause?	VERY LIKELY <i>Could happen anytime</i>	LIKELY <i>Could happen sometimes</i>	UNLIKELY <i>Could happen, but only rarely</i>	VERY UNLIKELY <i>Could happen, but probably never will</i>
	Death or permanent disability	1	1	2	3
	Long term illness or serious injury	1	2	3	4
	Medical attention or several days off work	2	3	4	5
First Aid needed	3	4	5	6	

How to complete the following form

1. List the step-by-step sequence of tasks required to carry out the work activity from start to finish.
2. Listing of potential hazards associated with each step, and the related OHS risks.
3. Using the risk table, rating the identified risks.
4. List what controls you will implement to reduce the risks to the lowest possible level.
5. Rate the level of risk once those controls have been implemented (must be 4-6 before you can start work).
6. List the names or positions of the persons responsible for ensuring the controls are implemented.

STEP	Job Step	Hazard Identification	Initial Risk Rating (1-6)	Controls Implemented	Revised Risk Rating (1-6)	Person Responsible
	Break the job down into steps. List the steps in this column.	Identify any potential hazards associated with each step – and any related risks. Detail the hazards and risks in this column, and enter the risk rating in the next column.		Decide what controls to use to eliminate or minimise the risks. Detail the controls in this column, and enter the revised risk rating in the next column. Note: If the risk rating is still 1-3, do not begin work.		
1.	Plan the Job (prior to arriving on site).	Poor preparation.		Review Principal contractors Site Safety Plan and Emergency Procedures.		
		Lack of Competence		Ensure all staff are adequately trained and competent to undertake the work.		
2.	Conduct a Risk Assessment (on site).	Exposure to unsafe acts, substances and conditions.		Undertake a Site Induction prior to entering the site to conduct the Risk Assessment.		
3.	Erection of scaffold (if required).	Back injuries.		All staff to be trained in correct Manual handling techniques. Team lifting to be used for any items above 16kg.		
		Fall from heights.		Guard rail to be in place for all platforms above 1.8m.		
		Scaffold collapse.		Scaffold over 4m to be erected by certified persons. Ensure working deck has AS planks x 5 wide. Maximum safe working load is to be observed at all times.		
4.	Locate Mixer and Saw	Back injuries.		At least two persons to be used when moving mixer. Locate mixer close to area that wall is to be constructed.		
		Noise		Ear muffs to be worn whilst operating saw. Saw to be isolated from work area where possible.		

STEP	Job Step	Hazard Identification	Initial Risk Rating (1-6)	Controls Implemented	Revised Risk Rating (1-6)	Person Responsible
5.	Locate Bricks and other materials.	Back Injuries.		<p>Decide what controls to use to eliminate or minimise the risks. Detail the controls in this column, and enter the revised risk rating in the next column.</p> <p>Note: If the risk rating is still 1-3, do not begin work.</p> <p>Certified forklift operator or crane operator to be used to remove brick pallets from delivery truck.</p> <p>Bricks to be located as close as possible to work site.</p> <p>All staff to be trained in correct Manual handling techniques. Wheelbarrow and hoist to be used to move bricks around site.</p> <p>20kg bags to be used where possible. All bags to be team lifted by two persons or moved via a wheelbarrow.</p>		
		Falling Bricks.		<p>If a crane is used to move bricks, a competent person is to check the quality of the pallets prior to craning.</p> <p>Brickguards to be in place on all working platforms.</p> <p>Gap between building and scaffold to be no greater than 225mm.</p>		
		Structural collapse of scaffold.		<p>Ensure working deck has AS planks x 5 wide. Maximum safe working load is to be observed at all times.</p> <p>Handover certificate to be obtained from Scaffolder.</p>		

STEP	Job Step	Hazard Identification	Initial Risk Rating (1-6)	Controls Implemented	Revised Risk Rating (1-6)	Person Responsible
	Break the job down into steps. List the steps in this column.	Identify any potential hazards associated with each step – and any related risks. Detail the hazards and risks in this column, and enter the risk rating in the next column.		Decide what controls to use to eliminate or minimise the risks. Detail the controls in this column, and enter the revised risk rating in the next column. Note: If the risk rating is still 1-3, do not begin work.		
	Locate Bricks and other materials (continued)	Hoist failure.		Hoist handover certificate to be issued on erection. Ensure only ticketed/log book operators to use hoist. The hoists SWL is to be clearly displayed at all times. Hoist to be maintained as per manufacturer's requirements.		
6.	Mixing cement.	Dust.		Dust masks to be worn whilst opening cement bags and mixing cement		
7.	Cutting Bricks.	Hand, eye and ear injuries.		Only trained persons are to operate the saw with the use of goggles and earmuffs. Saw (and guard) to be inspected at least weekly.		
		Dust.		Dust mask to be worn whilst operating saw.		
		Excessive Noise.		Ear muffs to be worn whilst operating saw. Saw to be isolated from work area where possible.		
8.	Laying Bricks.	Falling Bricks.		Brickguards to be in place on all working platforms. Overhead protection to be in place for all edge work bordering public thoroughfares.		

STEP	Job Step	Hazard Identification	Initial Risk Rating (1-6)	Controls Implemented	Revised Risk Rating (1-6)	Person Responsible
	Break the job down into steps. List the steps in this column.	Identify any potential hazards associated with each step – and any related risks. Detail the hazards and risks in this column, and enter the risk rating in the next column.		Decide what controls to use to eliminate or minimise the risks. Detail the controls in this column, and enter the revised risk rating in the next column. Note: If the risk rating is still 1-3, do not begin work.		
		Wall collapse.		Green walls are not to exceed 1.5m or six times its thickness (whichever is greater) in height. An individual risk analysis will be undertaken on all green walls that may be exposed to inclement weather.		
		Falling from heights.		Guard rail to be in place for all platforms above 1.8m. Overhand work is not to take place unless adequate scaffolding is erected on both sides of the wall.		
9.	Using Power tools.	Electrocution.		All power tool leads to be checked and tagged monthly. Power leads to be suspended in the air to prevent damage.		
		Eye injuries.		Goggles to be worn when operating power tools.		
10.	Using Explosive Power tools.	Puncture wounds.		Only a certified person to operate, with area affected to be barricaded off and signs displayed.		
11.	Working with hazardous substances.	Burns, blindness and illness.		Appropriate PPE to be worn and staff familiarised with relevant MSDS.		
12.	Cleaning Bricks.	Burns from Hydrochloric acid		All brick cleaning will incorporate water and hydrochloric acid. Area affected will be isolated and signs erected. PPE will be provided during cleaning activities.		
13.	Work site cleanup.	Back injures.		A wheelbarrow will be used to remove debris.		

STEP	Job Step Break the job down into steps. List the steps in this column.	Hazard Identification Identify any potential hazards associated with each step – and any related risks. Detail the hazards and risks in this column, and enter the risk rating in the next column.	Initial Risk Rating (1-6)	Controls Implemented Decide what controls to use to eliminate or minimise the risks. Detail the controls in this column, and enter the revised risk rating in the next column. Note: If the risk rating is still 1-3, do not begin work.	Revised Risk Rating (1-6)	Person Responsible
		Trips, Falls on debris.		Site cleanup will be undertaken daily to prevent debris build-up.		
14.						
15.						

THESE ARE STANDARD SWMS, THEY MUST BE MODIFIED TO SUIT YOUR WORKERS, YOUR EQUIPMENT AND YOUR SITE.

CHECKLIST OF ITEMS THAT MAY BE REQUIRED FOR THIS WORK ACTIVITY

QUALIFICATIONS

TRAINING

**CODES OF PRACTICE OR AS/NZS
STANDARDS TO BE COMPLIED WITH**

Codes of Practice

OHS Consultation

OHS Induction Training for Construction

Amenities for Construction Work

Electrical Practices for Construction Work

WorkCover Identification tool – Identification Tool for Bricklaying – Hazard profile

Declaration by contractors & workers:

1. I have been **consulted** and assisted in the development of this SWMS.
2. I have been given the opportunity to comment on the content of this SWMS.
3. I have **read** and **understand** how I am to carry out the activities listed in this SWMS.
4. I have been supplied with the **personal protective equipment** identified on this SWMS and I have been given **training** in the safe use of this equipment.
5. I have **read and understand** the requirements set out in the **material safety data sheets** for the **hazardous substances** identified in this SWMS.

NAME:	SIGNATURE:	DATE: