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| **SAFE WORK METHOD STATEMENT (SWMS)** |
| **PROJECT DETAILS:** |
| Project: | Area: |
| Job Address: |
| Job Description: |
| **WORK ACTIVITY:**  |  Glass Cutter - Vertical |
| **Consult relevant workers during development, approval and communication of this SWMS** | SWMS Approved by: |  Page 1 of 8 |
| Name: (Include names of workers who were consulted in relation to this SWMS) | Signature: | Job Title: | Date: | Name: |
| Signature: |
| Date: |
| Personnel responsible for monitoring and managing activity: | Overall Risk Rating After Controls | **4 A**cute | **3 H**igh |
| **2 M**oderate | **1 L**ow |
| **COMMUNICATE THIS SWMS TO ALL PERSONS INVOLVED IN TASK PRIOR TO WORK COMMENCING*** \_\_\_\_\_\_\_\_\_\_\_\_will conduct regular inspections and observations to ensure SWMS is being complied with.
* Hold Daily Tool Box Talks to identify, control and communicate additional site hazards.
* Cease work immediately if incident or near miss occurs. Amend the SWMS in consultation with relevant persons.
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_ will approve and communicate amendment to all affected workers before work resumes.
* As required by WHS legislation, make the SWMS available for inspection or review.
* As required by WHS legislation, keep record of SWMS (until job is complete or for 2 years if involved in a notifiable incident).
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| **IMPORTANT NOTES:** |
| Check local government standards, codes of practice, regulations and legislation for any training requirements before use.Apprentices and Trainee Personnel are usually permitted to operate certain machinery and equipment provided they are guided and supervised by an experienced and qualified person, while also recording the hours of use in an approved logbook.WorkCover National Certificates of Competency are nationally recognised and these specific certificates do not have to be changed over to work interstate. 1. Glass cutters must be operated only by authorised persons, who are instructed in their safe use.2. Cut glass of thickness less than or equal to what the cutter was designed to cut. |

| **Task Steps** | **Potential Hazards/Risks of Each Step** | **RB** | **Control Measures - Steps To Follow Safety Checks & PPE** | **RA** | **Responsible Officer** |
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| **NOTE: RB** = Risk Rating **before** controls implemented - **RA** = Risk Rating **after** controls are implemented. |
| 1. General precautions | StabilityAccessibilitySlips and falls |  | Before using the unit, make sure it is stable and securely mounted.Be careful while setting up to avoid warping or twisting of frame.Make sure there is adequate free space for placing or removing glass on the cutter.Make arrangements for preventing breakages and scrap from falling and spreading on the floor.Do not use the unit unless it is immobilised and secured against falling.Working areas must be kept clear.Wearing enclosed footwear is recommended. |  |  |
| 2. Operation | LoadingCutting glass sheet |  | Make sure the channel on the horizontal rail is free and clear of chips and debris.Place the glass sheet to be cut, carefully on the channel and lay it back on the stand.Slide the glass sheet through the cutter, until it reaches the cutting position.Raise the cutter wheel by depressing the lever on the right, and slice the carriage on to the top.When in position, release the thumb lever, and score the sheet by sliding the carriage down steadily.After the glass is fully scored, depress the lever to the left for pushing the rollers against the sheet and to snap the glass.Before smoking drinking or eating, wash both hands very thoroughly.Use a moist cloth or a soft fine brush to sweep and clean.For large and heavy glass sheets, obtain assistance.For handling sheets, wearing gloves is recommended.When cutting glass, wearing eye protection is necessary. |  |  |
| 3. Maintenance | Cleaning |  | Sweep powder and glass chips from the channel and carriage parts with a brush or a similar item.For removing powder and glass chips clogging the moving parts, use a non-stick lubricant.For replacing user-serviceable parts, follow the instructions in the operator’s manual.Do not clean with compressed air.Never use grease or mineral oil.Never use any parts that are incompatible. |  |  |

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| PERSONAL PROTECTIVE EQUIPMENT |
| Personal Protective Equipment Requirements |
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| **Foot Protection** | **Hearing Protection** | **Protective Clothing** | **Head Protection** | **Eye Protection** | **Hand Protection** | **Sun Protection** | **Safety Harness** |
| C:\Users\Virtual\Desktop\Safety PPE Signs\Boots.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Ear Goggles.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Apron.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Hard Hat.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Eye Goggles.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Gloves.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Sun Protection.png | C:\Users\Virtual\Desktop\Safety PPE Signs\Safety Harness1.jpg |

**PPE Notes:**The above PPE Requirements are the minimum requirements for all personnel involved in this task. Be sure to conduct a Risk Assessment for other factors that may influence the work environment such as Temperatures – Hot/Cold, Working in the Sun, Night Work etc. Be sure that all PPE used is approved by Australian Standards. |
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| References: |  |
| **AS/NZS 4667:2000****AS/NZS 4668:2000****AS 4024****AS/NZS 3760** | Quality requirements for cut-to-size and processed glassGlossary of terms used in the glass and glazing industrySafety of machineryIn service safety inspection and testing of electrical equipment |

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| **SIGN OFF** |
| Workers and relevant Persons Conducting Business or Undertaking (PCBU) were consulted for developing this SWMS. I have read the above SWMS and I understand its contents. I confirm that I have the necessary training and skills, including any relevant certifications to undertake the related tasks contained in this SWMS. I agree to comply with any safety guidelines, requirements and recommendations as set forth by the responsible officer within this SWMS including safety instructions and use of recommended Personal Protective Equipment. |

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| **Name** | **Qualifications** | **Signature** | **Date** | **Time** | **Employer** |
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| **RISK ASSESSMENT** |
| References: Risk Management Code of Practice 2007, AS/NZS 31000 -2009 Risk Management Principles and guidelines |

**Step 1 Determine Likelihood –** What is the possibility that the effect will occur? **Step 2 Determine Consequence –** Expected Consequences

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|  | **Likelihood** | **Definition** |
|  **Almost certain** | Expected to happen in most circumstances. | A common and very possible result |
|  **Likely** | Will probably occur in most circumstances. | Known to have occurred and has happened before |
| **Possible** | Might occur at some time | Could occur and is likely it has happened before |
| **Unlikely** | Could occur at some time | Not likely to occur |
| **Rare** | May occur only in exceptional circumstances | Very unlikely |

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| **Level of Consequence** | **Examples** |
| **Insignificant/Acceptable** | No consequence – so minor that the consequence is manageable |
| **Minor** | First aid treatment only; manageable and contained. |
| **Moderate** | Medical treatment; manageable with 3rd party assistance. |
| **Major** | Serious injuries; Down time and loss of productivity |
| **Catastrophic** | Death; Very serious consequences |

**Step 3 Determine the risk score Step 4 Record risk score** (**Note** – Risk scores are only estimated and should not be

Solely relied upon)

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|  | **CONSEQUENCE** |
| **LIKELIHOOD** | **Insignificant** | **Minor** | **Moderate** | **Major** | **Catastrophic** |
|  **Almost certai**n | 3 High | 3 High | 4 Acute | 4 Acute | 4 Acute |
| **Likely** | 2 Medium | 3 High | 3 High | 4 Acute | 4 Acute |
| **Possible** | 1 Low | 2 Medium | 3 High | 4 Acute | 4 Acute |
| **Unlikely** | 1 Low | 1 Low | 2 Medium | 3 High | 4 Acute |
| **Rare** | 1 Low | 1 Low | 2 Medium | 3 High | 3 High |

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| **Score**  | **Action**  |
| **4** **A: Acute**  | URGENT – Act on and lower the risks immediately. Demands immediate attention.  |
| **3** **H: High**  | Decisions required urgently by Management.  |
| **2** **M: Moderate**  | Follow instructions given by management.  |
| **1** **L: Low**  | Manageable. Review regularly, and if any conditions of work change.  |

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BlueSafe Australia Pty Ltd supplies a generic template system of word documents that helps the employer to get a head start by providing them with a foundation to build a Work Health & Safety system for their business. BlueSafe Australia Pty Ltd templates are generic in nature and are not designed to be relied solely upon without the customisation of specific tasks.

Acquiring or creating & implementing an WHS System can greatly reduce the risks which are associated with your business, however having a complete WHS System does not 100% insulate a business from accidents or injuries in a workplace, and it does not guarantee that a Compensation Claim won’t be filed, however it significantly reduces the probability or likelihood by creating, adjusting and refining your systems as much as possible and ensuring that staff follow them.

The documents provided by BlueSafe Australia Pty Ltd are designed to help the employers’ awareness to safety in the workplace, and helping them with the first step to meeting their legislative obligations as an employer. Not only this, but it also creates an awareness for the employee in helping them be aware of their legislative obligations in the workplace, by taking responsibility for their actions, be ‘Safety Minded’ and helping the employer to create and maintain a safe workplace which also significantly reduces the possibilities and risks of an injury while at work.

The obligation rests with the employer to ensure that all systems in the workplace are applicable, practical and safe for their employees while ate work.

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