













Precision Installations ABN 17155740551 Suite 41 / 124 - 130 Auburn Street, Wollongong, NSW, 2500		Revision #1	Job Date: 26th August 2022
		Created: 26th August 2022	Last Update: 26th August 2022
Authorised Representative:	Glen Fitzgerald - Ph:0420995605	This SWMS has been developed by: Glen Fitzgerald With consultation from onsite personnel and the responsible person for SWMS implementation, monitoring and review: Glen Fitzgerald	
WHS Representative:	Glen Fitzgerald - Ph:0420995605		
Work Activity / Task: Confined Spaces			
Location: 50-52 Phillip Street, Sydney			
Description: Work operations in and around Confined Spaces			
Review of Control Measures	The control measures for high risk work will be implemented by the workers undertaking the work who have had the opportunity to have input into the control measures and have been trained in the SWMS. The supervisor of the workers will periodically check that the control measures are being followed and determine if a review of the controls is required. A review may also be initiated at the request of an elected Health and Safety Representative. The implementation of the control measures may also be monitored by the completion of the Site Safety Checklist. Any non compliance at this stage will also initiate a review of the controls.		
Relevant WHS Act:		Work Health and Safety Act 2011	
Relevant WHS Regulations:		Work Health and Safety Regulation 2017	

Task / Job Requirements:

PPE Requirements											
 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒	 ☒
Permit To Work Requirements											
Confined Spaces Work Permit								Con126780			
Equipment Requirements											
Equipment used on this Job / Task has been verified to be in good working order and is authorised for use on the job site at 50-52 Phillip Street, Sydney . Compliance documentation and pre start checks can be obtained through the responsible person Glen Fitzgerald .											
Training Requirements											
Personnel Responsibilities	All workers must read and adhere to all safety procedures and Codes of Conduct in place for this site. All staff are to be pro-active regarding safety and report any near misses or safety risks to a Precision Installations Supervisor. In addition workers must read and understand the site safety rules as well as the requirements and processes outlined in this Safe Work Method Statement.										

High Risk Works Check List:

Risk of a person falling more than 2 metres	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Likely to involve disturbing asbestos	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Working on or near shaft or trench deeper than 1.5m or a tunnel	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on or near chemical, fuel or refrigerant lines	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Tilt-up or precast concrete elements	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work in areas with artificial extremes of temperature	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on telecommunications tower	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Temporary load bearing support for structural alteration or repairs	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Use of explosives	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on or near energised electrical installations or services	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on/in/adjacent to roadway, railway, shipping line or other traffic corridor in use by traffic other than pedestrians	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work in or near water or other liquid that involves a risk of drowning	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Demolition of load bearing structure	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on or near a confined space	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work on or near pressurised gas mains or piping	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work in an area that may have contaminated or flammable atmosphere	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Diving Work	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Work in an area with movement of powered mobile plant	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>

Job Breakdown:

HIERARCHY OF CONTROLS					
Most Effective					Least Effective
Item	Step Description	Potential Hazards	Risk Class	Controls	Residual Risk
1	Arrange permit for confined space entry	<ul style="list-style-type: none"> - Personal Injury - Unauthorised practices 	18	<ul style="list-style-type: none"> - Confined Space Permit Required prior to entry - Only accredited persons permitted to enter confined space - Inductions are required to perform work - PPE, hard hats, steel cap boots, eye protection, Hearing protection, confined space entry equipment, disposable overalls & mask if required to be worn at all times 	4
2	Rescue plan review & consultation	<ul style="list-style-type: none"> - Rescue plan not implemented 	18	<ul style="list-style-type: none"> - Confined Space Rescue Plan to be developed and attached to SWMS. - All personnel to be trained in the plan 	4
3	Inspect equipment	<ul style="list-style-type: none"> - Personal injuries - Equipment Failure - Falls 	18	<ul style="list-style-type: none"> - Ensure leads are tagged and tested and current - Ensure harnesses are inspected and tagged 6 monthly - Fall protection equipment to be visually checked prior to entry into confined space, i.e., inertia reels, harnesses, retrieval equipment – ensure all retrieval equipment is tagged and in date - Gas detector to be current in calibration and tested prior to use 	4
4	Secure confined space area	<ul style="list-style-type: none"> - Personal Injury - Injury to pedestrians 	18	<ul style="list-style-type: none"> - Signage indicating confined space to be posted - Barricade immediate area of occupancy 	3

5	Enter confined space and perform tasks	<ul style="list-style-type: none"> - Suffocation - Inhalation - Slips, trips and falls - Unstable Gas levels - Public access - Failure to retrieve worker - Hot Work 	18	<ul style="list-style-type: none"> - Use gas detector and record results/readings before entering confined space - Only competent worker to be used as spotter and must stay within audible reach - Ensure rescue plan is communicated between confined space entrant and competent spotter <ul style="list-style-type: none"> - Ensure safety equipment & PPE is worn at all times. - Assess surrounding area for slip & trip hazards - Ensure public cannot access area around confined space <ul style="list-style-type: none"> - Evacuate immediately if gas detector sounds - Hot work permit to be filled in - Ensure area is well ventilated - PPE to be worn including face shield, gloves, hearing protection <ul style="list-style-type: none"> - Ensure constant monitor 	4
6	Exit and secure confined space	<ul style="list-style-type: none"> - Public & personal injury 	13	<ul style="list-style-type: none"> - Signing off all employees on completion of works. Site to be left in clean and safe condition - Remove barricades and signage - File Confined Space Permit in company records upon completion 	1

SAMPLE

SWMS Acknowledgement:

This SWMS has been developed through consultation with our workers and has been read and signed by all workers involved with this activity

Name	Role	Signature	Date
Glen Fitzgerald	Worker		26th August 2022
Luke One	Worker		26th August 2022

Appendices: Risk Matrix

	Minor	Serious	Severe	Major	Catastrophic
Almost Certain	Class: 10 Moderate	Class: 16 High	Class: 20 Extreme	Class: 23 Extreme	Class: 25 Extreme
Likely	Class: 7 Moderate	Class: 12 Serious	Class: 17 High	Class: 21 Extreme	Class: 24 Extreme
Possible	Class: 5 Moderate	Class: 6 Moderate	Class: 13 Serious	Class: 18 High	Class: 22 Extreme
Unlikely	Class: 2 Low	Class: 4 Low	Class: 9 Moderate	Class: 14 Serious	Class: 19 High
Rare	Class: 1 Low	Class: 3 Low	Class: 8 Moderate	Class: 11 Moderate	Class: 15 Serious

Likelihood			Consequence		
Value	Classification	Description	Value	Classification	Description
1	Rare	Unlikely to occur (less than 5% chance)	1	Minor	First Aid Injury (FAI). Minimal impact on health & safety which can be resolved by daily procedures & pre-start.
2	Unlikely	Could occur (5-25% chance)	2	Serious	Medical Treated Injury (MTI). Treatment required by physician or medical personnel (not a First-aider).
3	Possible	May occur at some time (25-50% chance)	3	Severe	Lost Time Injury (LTI). Injury sustained to employee who is unable to work following day or perform usual duties.
4	Likely	Will probably occur (50-75% chance)	4	Major	Single fatality or hospitalisation. Permanent disability or long term illness/injury.

5	Almost Certain	Very likely to happen (over 75% chance)	5	Catastrophic	Multiple fatalities or permanent debilitating injuries
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SAMPLE

Appendices: Hazard Identification

Step 4
Secure confined space area

CONFINED SPACE ENTRY PERMIT

Date Issued: _____
Expires: _____

NOTE: THIS ENTRY PERMIT IS VALID ONLY IF THE WORK IS COMPLETED IN ACCORDANCE WITH THE PERMIT. CHANGE, STOP WORK IMMEDIATELY AND NOTIFY THE SAFETY OFFICER.

PART 1 - HAZARD ASSESSMENT: To be filled out by the Entry Supervisor.

Confined space identification Number: _____ Location of confined space: _____
Description of work to be done: _____

Materials or objects which could be brought into the confined space (IDENTIFY ALL to be placed): _____
Assignment located on the drawing (to be brought into the confined space): _____

CHECK ALL POTENTIAL HAZARDS: Control of treatment and control of incoming materials/ substances

Hazard	Frequency	Severity	Risk
Asphyxiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overhead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (List):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 2 - HAZARD CONTROL: To be filled out by Entry Supervisor.

Yes No Not Is it technological equipment?

Yes No Not Is the Area LOTO's required on all electrical permits?

Yes No Not Is the equipment ground equipment required?

Yes No Not Is the equipment grounded?

Yes No Not Is the communication equipment required?

Yes No Not Is the equipment or 2-way radio for emergency rescue available?

Yes No Not Is the equipment required emergency equipment?

Yes No Not Is the equipment required for the confined space (to be brought into the confined space) identified?

Yes No Not Is there any other safety and security personnel issues raised?

Yes No Not Has the safety permit been submitted for review continuously permit outside the confined space?

Blanket entry and/or work procedures? _____

Use Restricted Personal Protective Equipment _____

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Step 4
Secure confined space area



Step 5
Enter confined space and perform tasks

CONFINED SPACE ENTRY PERMIT

NOTE: IN THE EVENT OF AN EMERGENCY, CALL 911
IF THE CONDITIONS CHANGE, IMMEDIATELY AND NOTIFY THE SAFETY OFFICER

PARTY HAZARD ASSESSMENT (To be filled out by the Entry Supervisor)

Confined space identification number: _____ Location of confined space: _____

Description of confined space: _____

Identification of work to be undertaken: _____

Hazards or atmospheric hazards and the controls to be brought into the confined space (MUST be filled for permit): _____

Equipment located on site to be brought into the confined space: _____

CHECK ALL POTENTIAL HAZARDS Check all relevant and required approvals

ATMOSPHERIC HAZARDS	HAZARD	CONTROL
Flammable	Explosive	Asphyxiant
Toxic	Corrosive	Other
Other		

PHYSICAL HAZARDS

Overhead	Slips, Trips and Falls	Struck by	Struck against
Confined	Electrocution	Entrapment	Other
Other			

HAZARD CONTROLS (To be filled out by Entry Supervisor)

Yes No Is biological required? **Lift restriction points**

Yes No Are LOTO's required on all relevant permit?

Yes No Is equipment proof equipment required?

Yes No Are barriers required?

Yes No Is communication equipment required?

Yes No Is equipment in 3-step state for emergency rescue possible?

Yes No Is required emergency equipment:

Rescue team (RT) _____

Safety harness _____

Yes No Use Manual Line _____

Yes No Are MSD's for all materials in the confined space to be brought into the confined space included?

Yes No Are the SDS and safety data sheets for all materials brought into the confined space included?

Rescue entry and rescue procedures? _____

Use required Personal Protective Equipment _____

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