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| --- | --- | --- | --- |
| **Project Name:** |  | **Dewpoint Supervisor:** |  |
| **Subcontractor:** |  | **Works Supervisor:** |  |
| **SWMS Title:** |  |
| **SWMS No:** |  | **RevisionNo:** |  | **Review Date:** |  |
|  |  |  |  |  |  |
| **SUBCONTRACTOR SECTIONThis checklist must accompany the SWMS and be completed, signed and submitted to Dewpoint** |
| **Item** |  **Checklist Criteria** | **Complies** |
| **MANDATORY** |
|  | The SWMS includes the organisation’s name ABN, address and **contact person details**? | [ ]  Y [ ]  N |
|  | The SWMS includes the name of the Principal Contractor and the **address where the work will be carried out?**  | [ ]  Y [ ]  N |
|  | The SWMS includes the date the SWMS was **prepared** and provided to the Principal Contractor, the date the SWMS was **last reviewed** and the date the SWMS will **next be reviewed**?  | [ ]  Y [ ]  N |
|  | The SWMS **identifies and states** the work that is high risk construction work as defined in the WHS Regulations 2011?  | [ ]  Y [ ]  N |
|  | Does the SWMS set out a logical step-by-step process of all work activities to be undertaken applicable to the specific project and work location? | [ ]  Y [ ]  N |
|  | Does the SWMS describe how the activity will be carried out? | [ ]  Y [ ]  N |
|  | Has the SWMS been developed in consultation with workers/nominated HSR’s (names and positions) and **dates of this consultation** provided? | [ ]  Y [ ]  N |
|  | Does the SWMS incorporate controls that conform to relevant standards, codes of practice and legislation and the Project Risk Register? (Is the legislation codes and standards referenced?)  | [ ]  Y [ ]  N |
|  | Does the SWMS consider other trades, plant, equipment and the public in the vicinity where the activities are to be undertaken?  | [ ]  Y [ ]  N |
|  | Does the SWMS identify health and safety hazards that may arise through each step/tasks associated with the work? Do these hazards have sufficient controls allocated.  | [ ]  Y [ ]  N |
|  | Does the SWMS clearly document a risk assessment and the specific controls for each hazard identified in accordance with hierarchy of control? **(In the body of the SWMS)** | [ ]  Y [ ]  N |
|  | Does the SWMS describe all plant, equipment, hazardous chemicals that will be used? | [ ]  Y [ ]  N |
|  | Does the SWMS identify any pre-start and in-process certifications/ authorisations/ permits/ meetings?  | [ ]  Y [ ]  N |
|  | Does the SWMS reflect the risk controls stated in the plant risk assessment, hazardous goods assessment and project risk register?  | [ ]  Y [ ]  N |
|  | Has responsibility for **implementing, monitoring and compliance** with the SWMS been allocated to a specific person? | [ ]  Y [ ]  N |
|  | Does the SWMS provide for **emergency procedures** including rescue requirements (training, equipment, etc)?  | [ ]  Y [ ]  N |
|  | Does the SWMS identify specific licensing, trade certificates, qualifications and competencies required by workers for specific tasks? | [ ]  Y [ ]  N |
|  | Does the SWMS specify supervision, training and/or trialling required to enable the work to be done safely? | [ ]  Y [ ]  N |
|  | Does the SWMS describe how and when the SWMS will be implemented, monitored and reviewed in consultation with work groups during the project duration?  | [ ]  Y [ ]  N |
| **AS APPLICABLE**  |
|  | Does the SWMS effectively communicate and stipulate controls for any high risk activities which may affect interfacing trades? | [ ]  Y [ ]  N [ ]  NA |
|  | Does the SWMS specify that step ladders, extension ladders and single ladders **will not** be used as a working platform? - ***Note:*** *If step ladders, extension ladders and single ladders are the only access device that can be used for the task, they must be approved by Dewpoint and accompanied by a risk assessment.*  | [ ]  Y [ ]  N [ ]  NA |
|  | Does the SWMS specify that harnesses **will not** be used for primary fall control? ***Note:*** *If harnesses are the only fall protection control measure that can be used, their use must be approved by Dewpoint management.* | [ ]  Y [ ]  N [ ]  NA |
| **PROJECT SPECIFIC *(add extra lines as applicable)*** |
| 23. | Where PPE has been identified as a control method or a mandatory requirement, has the **specific type** of PPE been stipulated and clearly communicated for example; Safety glasses with medium impact lenses, face shield with a high impact visor, respiratory protection with a P2 rating, gloves with EN rating 4131.  | [ ]  Y [ ]  N |
| 24. |  | [ ]  Y [ ]  N |
| Checked by: | *(Name)* |  | *(Signature)* |  | Date:  |

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| **TO BE SIGNED BY THE SUBCONTRACTOR’S MANAGEMENT REPRESENTATIVE SUBMITTING THE SWMS PRIOR TO THE REVIEW BY DEWPOINT** |
| **DEWPOINT AIR REVIEW AND COMMENTS** |
| [ ]  | SWMS has been reviewed/verified – no comments |
| [ ]  | SWMS has been reviewed – issues shown below have been raised with Subcontractor, please tick and specify in summary. |
|  | [ ]  Legislative (Acts, Regs, Codes, standards) | [ ]  Project Risk Register/PMP |
|  | [ ]  Project Safety Management Plan | [ ]  Engineering/client approvals  |
|  | [ ]  Manufacturer/suppliers recommendations | [ ]  Plant/Equipment |
|  | [ ]  Environmental Management Plan[ ]  SWMS criteria not met\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  MSDS [ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| [ ]  | Is the use of step ladders, extension ladders and /or single ladders appropriate for this specific task?  |  [ ] Y [ ]  N[ ] N/A |
| [ ]  | Has the use of step ladders, extension ladders and /or single ladders been approved by Dewpoint management?  |  [ ] Y [ ]  N[ ] N/A |
| [ ]  | Has the use of harness systems as primary fall protection been approved by Construction or OHS Manager? |  [ ] Y [ ]  N[ ] N/A |
| **Summary of issues/discussions/follow-up:** |
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|  |
| **Checked by Dewpoint Site Manager/Project Safety Advisor**: |
|  | *(Name):* |  | *(Signature):* |  | Date:  |
|  |