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| **NOTE:** Work must be performed in accordance with this SWMS. This SWMS must be kept and be available for inspection until the high-risk construction work to which this SWMS relates is completed. If the SWMS is revised, all versions should be kept. If a notifiable incident occurs in relation to the high-risk construction work in this SWMS, the SWMS must be kept for at least 2 years from the date of the notifiable incident. | | | | | | | |
| (**PCBU Name, ABN, Office Address and Phone)** | | | **Principal Contractor (PC)** | | (Name, ABN, Office Address) | | |
| **Works Manager:**  Contact phone: |  | | **Date SWMS provided to PC:** | |  | | |
| **Work activity:** | **Asbestos removal** | | **Workplace location:** | |  | | |
| **High risk construction work:** | ⬜ Risk of a person falling more than 2 metres | ⬜ Work on a telecommunication tower | | | | ⬜ Demolition of load-bearing structure | |
| **X** Likely to involve disturbing asbestos | ⬜ Temporary load-bearing support for structural alterations or repairs | | | | ⬜ Work in or near a confined space | |
| ⬜ Work in or near a shaft or trench deeper than 1.5 m or a tunnel | ⬜ Use of explosives | | | | ⬜ Work on or near pressurised gas mains or piping | |
| ⬜ Work on or near chemical, fuel or refrigerant lines | ⬜ Work on or near energised electrical installations or services | | | | ⬜ Work in an area that may have a contaminated or flammable atmosphere | |
| ⬜ Tilt-up or precast concrete elements | ⬜ Work on, in or adjacent to a road, railway, shipping lane or other traffic corridor in use by traffic other than pedestrians | | | | ⬜ Work in an area with movement of powered mobile plant | |
| ⬜ Work in areas with artificial extremes of temperature | ⬜ Work in or near water or other liquid that involves a risk of drowning | | | | ⬜ Diving work | |
| **Have workers been consulted about the SWMS?**  **Note: Consultation with Health and Safety Representatives (HSRs) should be undertaken where there is an HSR at a workplace** | | ⬜ YES ⬜ NO | | | | | |
| **Person/s responsible for ensuring compliance with SWMS:** | |  | | **Date SWMS received:** | | |  |
| **What measures are in place to ensure compliance with the SWMS?** | |  | | | | | |
| **Person responsible for reviewing SWMS control measures:** | |  | | **Date SWMS received by reviewer:** | | |  |
| **How will the SWMS control measures be reviewed?** | |  | | | | | |
| **Review date:** | |  | | **Reviewer’s signature:** | | |  |

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| **What are the tasks involved?** | **What are the hazards and risks?** | **What are the control measures?** |
| **List the work tasks in a logical order.** | **Identify the hazards and risks that may cause harm to workers or the public.** | **Describe what will be done to control the risk. What will you do to make the activity as safe as possible?** |
| **Asbestos awareness** | Chemical hazard | This SWMS must be read in conjunction with the attached procedure that provided workers and affected persons with asbestos awareness. |
| **Assessing the non-friable asbestos (ACM) clearance task** | Chemical hazard | Site Manager to assess that the suspected ACM is less than 10m2 in volume and will take less than 1 hour to complete the task |
| **Allocation of clearance task Asbestos -awareness/consultation** | Chemical hazard | Site Manager to ensure that person conducting the collection of any suspected ACM material has read and complies with the ACM removal procedure |
| **Preparing to remove the suspected ACM from the location** | Chemical hazard | Prior to removing the suspected ACM, the worker must ensure that they have all required resources to complete the task. |
| **Removal items list** | Chemical hazard | * P2 mask (worker to be clean shaven) * Nitrile or latex gloves * Bag for containing suspected ACM material that has “ASBESTOS” clearly marked * Water spray bottle or other method to douse material with water |
| **Approaching the area where suspected ACM is located** | Chemical hazard | Worker to ensure that there is no other worker in the vicinity of the location of where the suspected ACM – exclusion area to be at least 10m if practicable |
| **Removing the suspected ACM** | Chemical hazard | Worker to:   * Fit and check all PPE required for task * Douse material with water * Pick up material and place into bag * Seal bag with gloves and mask included |
| **Securing the suspected ACM** | Chemical hazard | Worker to take bag containing suspected ACM and used PPE (gloves and mask) into the container identified as the storage container for “ASBESTOS” material. |
| **Completing the removal register** | Regulatory requirement - no physical hazard | Worker to complete the ACM removal register completing all sections in full |
| **Ensuring disposal of suspected ACM** | Chemical hazard | Site management to arrange removal from site for the suspected ACM by an approved and licensed class B asbestos removalist. |

| **Name of Worker/s** | | **Worker signature/s** |
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| **Date SWMS received by workers** |  | |

PLEASE NOTE: *It may be necessary to use more than one page to complete an adequate safe work method statement (SWMS).*

**Procedure for the removal of “Asbestos Containing Material” (ACM) <10m2**

**1 PURPOSE**

The purpose of this procedure is to provide information and guidance for managing asbestos containing material of non-friable (class B) type in the workplace. Where friable asbestos is present a class A licensed asbestos removalist is required and is not covered by this procedure.

**2 SCOPE**

This procedure applies to:

(a) Non friable (Class B) type material, including fragments, that is in stable condition

(b) Is no greater than 10m2 for any single removal; and

(c) Will take no more than 1 hour of removal collection time required in any 7-day period

**3 DEFINITIONS**

**Word / Term Definition**

**ACM - Asbestos Containing Materials**

Any material suspected of containing any form or amount of asbestos

**4 Management of suspected ACM**

**4.1 Discovery of any suspected non friable ACM**

Any \*suspect material found has not been assessed as ACM, however, to ensure safety, any material found will be treated as potential ACM. If a contractor that has been inducted into this procedure discovers any suspect material, they are instructed:

not to touch or disturb the material, and to Immediately inform site management

**4.2 Removal of potential Non-Friable ACM**

All suspect material will be treated as potential ACM and follow the following procedure:

Assess if the material is non friable – if friable material is suspected then Site Manager is to secure the area and contact a class A asbestos removalist for immediate action and clearance.

Non friable suspected ACM removal procedure:

(i) fit a new P2 dust mask (worker must be clean shaven) and gloves,

(ii) Using a water spray bottle spray the material liberally with water,

(ii) pick up the material ensuring that it is not further broken and place into the approved disposal bag,

(iii) log the material into the ACM register

All sections of the ACM register must be completed upon each removal by the person removing the sheet material.

**5. Storage, security and removal of suspected ACM:**

Once suspect material has been secured in the appropriate bag the Site Manager is to:

Ensure that the bag has “ASBESTOS” label or marking

Secure the material in a lockable container located in the shipping container in the site office compound (or other secure area) – the container in the shipping container and/or the secure location must have a clearly readable marking of “ASBESTOS”

Contact Pace class B asbestos removalists for pick up and disposal (ideally this should be within one week)

**6. Consultation**

If any worker has any concerns, they should discuss those concerns with their supervisor or site management so that any concern can be addressed.

Any dispute on any aspect of this procedure should be referred to Issue resolution procedure.

**References:**

Part 4 Occupational Health and Safety Regulations 2017

WorkSafe Compliance Code for Removing asbestos in workplaces, Edition 1, October 2018

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| **ACM - removal log** | | | |
| **Time taken to remove ACM** | **Mask** | **Gloves** | **Name of person removing ACM** |
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