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|  | ***WHS Management Plan Checklist*** |

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| **Part 1 – Details** | | | | |
| Project name: | |  | | |
| Company name: | |  | | |
| SWMS Title(s): | |  | | |
| **Part 2 – Safe Work Method Statement Requirements** | | | | |
|  | | | Y/N/NA | Comments |
| Governance | | |  |  |
|  | Organisational details are current | |  |  |
|  | Change register and distribution list completed | |  |  |
|  | WHS Plan signed and dated by Director/Manager | |  |  |
|  | Roles and responsibilities outlined | |  |  |
| Risk | | |  |  |
|  | Risk Management system discussed including incident and hazard reporting procedures | |  |  |
|  | Controls for high risk activities documented including Safe Work Method Statement (SWMS) | |  |  |
| Registers included | | |  |  |
|  | SWMS/Management Plan induction | |  |  |
|  | Training and/or competency | |  |  |
|  | Personal Protective Equipment | |  |  |
|  | Plant equipment | |  |  |
|  | Hazardous substances/Dangerous goods | |  |  |
|  | Electrical equipment | |  |  |
| Document templates included | | |  |  |
|  | Workplace Inspection Checklists template | |  |  |
|  | Incident Investigation Reports template | |  |  |
|  | Hazard Reports template | |  |  |
| Injury management | | |  |  |
|  | Return-to-Work program provided | |  |  |
|  | Workers Compensation Policy included | |  |  |
| Other | | |  |  |
| **Part 3 – Issues and recommendations** | | | | |
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