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| **Principal Contractor (PC) Details** |
| **Project:** |  |
| **Company Name:** |  |
| **Company Owner/ Director:** |  |
| **Business Address:** |  |
| **Title of Plan:** |  |
| **Date Received:** |  | **Date Reviewed:** |  |
| **Safety Management Plan** |
| **Checklist Item** | **PC Review** | **Location in Plan (pg. #)** | **Vicinity Review** |
| **General** |
| 1 | Is the plan authorised, dated, and signed by an authorised and responsible manager from the company | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 2 | Is there a detailed description of the scope of work, including identification of high-risk activities? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 3 | Lists the key legislation, codes of practice, and standards applicable to the Scope of Works? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 4 | Is there an established procedure in place for managing sub-subcontractors, including the collection and review of SWMS, Management Plans, and SOPs prior to the start of work? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Roles & Responsibilities** |
| 5 | Includes the roles and responsibilities of any person on the project that has designated WHS roles and responsibilities? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 6 | Is a company organisational structure included? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Communication and Consultation** |
| 7 | Details how the contents of the WHS Plan, including the processes and procedures outlined within, are communicated to each person performing construction work (on or near the site), including any updates or changes? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 8 | Details the arrangements in place for consultation, cooperation, and coordination between all relevant parties regarding activities to be performed as part of the project? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 9 | Details the site-specific WHS rules for the project and the arrangements in place to ensure that all persons are informed of and comply with these rules? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Induction/ Training/ Competency** |
| 10 | Does the plan detail the process for induction, training & competency? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 11 | Where applicable, is there a documented process for the evaluation of sub-subcontractors training and competencies? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Risk Management and Inspections** |
| 12 | Outlines the ongoing approach to managing WHS risks, including the processes for hazard identification, risk assessment, implementation of controls, and regular review? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 13 | Is there a formal process in place to address safety in design, detailing how health and safety risks associated with the design during construction are identified and eliminated? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 14 | Details the arrangements for preparing, collecting, assessing, reviewing, and monitoring Safe Work Method Statements? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 15 | Outlines the process for conducting workplace inspections, including the responsible parties, documentation requirements, inspection frequency, and management of corrective actions? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Incident Management and Emergency Response** |
| 16 | Details the process for managing health and safety incidents, including reporting, scene preservation, emergency response, investigations, and corrective actions? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Hazardous Substances/ Dangerous Goods** |
| 17 | Details the documented process for managing hazardous substances and dangerous goods, including the maintenance of up-to-date Safety Data Sheets (SDSs). | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Plant and Equipment**  |
| 18 | Does the plan describe how plant and equipment is procured, managed, and maintained (including subcontractors)? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Injury Management** |
| 19 | Details the arrangements in place to ensure the provision of on-site first aid services? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| 20 | Details the injury management and return-to-work processes, including a documented procedure for managing workers' compensation and handling injury-related cases? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Fitness for Work** |
| 21 | Details the documented process for managing fitness for work, including policies on drugs, alcohol, and fatigue? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Electrical**  |
| 22 | Details the documented electrical process for tenancy energisation and outlines the inspection, tagging, and maintenance requirements for electrical tools, equipment, RCDs, and other related items? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Chain of Responsibility**  |
| 23 | Is there a documented process for managing Chain of Responsibility (CoR) obligations relating to speed, fatigue, mass and dimension, load restraint, loading and unloading, and vehicle maintenance? | Yes [ ]  No [ ]  |  | Yes [ ]  No [ ]  |
| **Comments** |
|  |
| **Vicinity Review Completed by:** |  |
| **Signature:** |  |
| **Date:** |  |
| [ ]  Accepted [ ]  Re-submission Required |