

General Safety Program & Responsibilities – Form 1 New Employee Safety Training Checklist

NEW EMPLOYEE SAFETY TRAINING CHECKLIST

(To be completed by supervisor/manager and kept on file in department for 3 years)

EMPLOYEE NAME (print): _____

DATE TRAINED: _____ CAMPUS/CENTER: _____

DEPARTMENT: _____

SUPERVISOR/MANAGER NAME: _____

ORIENTATION ELEMENTS		NOTES (N/A = Not Applicable)		Employee Initials
1. GENERAL SAFETY AND HEALTH TOPICS: https://www.pcc.edu/facilities-management/services/environmental-health-and-safety/				
a.	Environmental Health & Safety website; personnel contact information			
b.	Reporting <i>Hazardous Safety Conditions (H&SM Ch 1)</i>			
c.	Process for requesting services/work from FMS Service Request Center (SRC)			
d.	Work-related injury, illness, near miss and property damage reporting and investigation (<i>H&SM Ch 2</i>)			
e.	Employee medical and exposure record access			
f.	Emergency Procedures and Medical Plan			
g.	<i>Hazard Communication Plan (H&SM Ch 8)</i>			
h.	Confined Space restrictions (<i>H&SM Ch 5</i>)			
2. RISK SERVICES TOPICS: https://s443-intranet-pcc-edu.view.pcc.edu/departments/finance/safety/				
a.	Risk Services website; personnel contact information			
b.	<i>Driving Policy</i> for operating PCC owned, rented or leased vehicles; training requirement and forms			
c.	<i>Driving Policy</i> for operating personally owned vehicles for PCC business; insurance requirements and forms			
d.	<i>Office Ergonomics Self-Assessment</i>			
e.	<i>Return to Work Policy</i>			
f.	<i>Workers' Compensation</i> process			
3. PUBLIC SAFETY TOPICS: https://www.pcc.edu/public-safety/				
a.	Public Safety website; available programs & services			
b.	Contacting Public Safety for emergency and non-emergency situations			
c.	Safety alerts and timely warnings sign up			
4. VEHICLE USE and EQUIPMENT TRAINING				
Will employee be authorized to operate specialized vehicles or equipment?		Yes	No	
For Which Vehicles or Special Equipment?				
a.	Forklift?	Yes	No	If Yes, note training date:
b.	Powered Pallet Jack?	Yes	No	If Yes, note training date:
c.	Scissor Lift?	Yes	No	If Yes, note training date:
d.	Kubota?	Yes	No	If Yes, note training date:
e.	Utility Cart?	Yes	No	If Yes, note training date:
f.	Other?	Yes	No	If Yes, note training date:

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5. SPECIALIZED SAFETY TOPICS: https://www.pcc.edu/facilities-management/services/environmental-health-and-safety/health-safety-manual/						
a.	Does the employee's job require routine exposure to blood or body fluids? (H&SM Ch 4)	Yes	No	If Yes, note training date:		
b.	Will the employee be required confined space entry operations? (H&SM Ch 5)	Yes	No	If Yes, note training date:		
c.	Will employee be authorized and qualified to work on live electrical systems? (H&SM Ch 6)	Yes	No	If Yes, note training date: Qualifications are:		
d.	If no to 3.c., notify employee to stay out of motor control centers, motor drive cabinets and electrical panels					
e.	Will employee work in a laboratory? (H&SM Ch 9)	Yes	No			
f.	Is employee to be trained to perform work involving the Control of Hazardous Energy – Lockout/Tagout sources? (H&SM Ch 10)	Yes	No	If Yes, note training date:		
g.	Will the employee be required to use ladders, scaffolding or Fall Protection Equipment at heights? (H&SM Chapters 20 & 26)	Yes	No	If Yes, note training date:		
h.	Will the employee be authorized to operate machinery that requires machine guarding? (H&SM Ch 15)	Yes	No	If Yes, note training date:		
i.	Will the employee perform any Hot Work (operations generating heat, sparks or flame)? (H&SM Ch 16)	Yes	No	If Yes, note training date:		
j.	Will the employee oversee any aspect of work involving contractors? (H&SM Ch 18)	Yes	No	If Yes, note training date:		
k.	Will employee use, or work in proximity to, compressed gas cylinders? (H&SM Ch 27)	Yes	No	If Yes, note training date:		
6. EMPLOYEE PERSONAL PROTECTIVE EQUIPMENT						
a.	Respiratory Protection (H&SM Ch 17) NOTE: If respirator is assigned as required, must complete medical clearance, training and fit test. Contact EH&S			If providing voluntary dust mask, attach the information sheet. Yes? Note date:		
b.	Foot Protection - Describe minimum required footwear					
c.	Body Protection - Describe minimum required attire and any additional minimum level of protection					
d.	Head Protection (Hard Hat or Bump Cap)					
e.	Hearing Protection (H&SM Ch 11)					
f.	Eye & Face Protection	i.		Chemical Splash	Yes	No
		ii.		Safety Glasses	Yes	No
		iii.		Face Shield	Yes	No
g.	Hand Protection - Gloves	i.		Chemical	Yes	No
		ii.		Physical	Yes	No
7. SPECIALIZED EMERGENCY PROCEDURES, EQUIPMENT AND RESOURCE LOCATIONS						
a.	Location & Familiarity with contents of Emergency Guide					
b.	Location & Use of Fire Alarm Pull Stations					
c.	Location & Use of Fire Extinguishers					
d.	Location & Use of Fire Blanket (if applicable)					
e.	Building Egress & Safe Assembly Areas					
f.	Location of Automated External Defibrillator (AED)					
g.	Location of 1st Aid Kit					
h.	Location & Use of Emergency Gas Shutoffs (if applicable)					
i.	Location & Use of Emergency Washing Equipment (Drench Hose, Eyewash, Shower - if applicable)					
j.	Location & Use of Spill Kits for hazardous chemicals (if applicable)					

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7. SPECIALIZED EMERGENCY PROCEDURES, EQUIPMENT AND RESOURCE LOCATIONS (continued)			
k.	Chemical Storage Requirements (if applicable)		
l.	Chemical Waste Disposal (if applicable)		
m.	Broken Glass Disposal (if applicable)		
n.	Chemical Fume Hood Operation (if applicable)		
	<i>On/Off Switch</i>		
	<i>Flow Indicator</i>		
	<i>Sash Height</i>		
o.	<i>Light Switch</i>		
	Benchtop Fume Hoods (if applicable)		
p.	Laboratory Housekeeping & Expectations		
	<i>Equipment Locations: DI Water, Lab Drawers, Glassware, Electronics, Etc.</i>		
	<i>Access to Prep Room</i>		
	<i>Summoning Assistance</i>		
	<i>Pre Lab Expectations</i>		
q.	<i>Post Lab Expectations</i>		
	Student Expectations		
	<i>Storage/Consumption of Food & Drink; Storage of Personal Items</i>		
	<i>Dress Code, including required personal protective equipment</i>		
	<i>Instructional Equipment Storage Locations</i>		
	<i>Hazardous Materials & Student Safety Topics</i>		
	<i>Waste Disposal Requirements</i>		
8. OTHER DEPARTMENT SPECIFIC SAFETY TOPICS AND/OR TRAINING			
	Will the employee generate any regulated waste? (H&SM Ch 21)		
	Will the employee use any cranes, hoists, lifts or slings? (H&SM Ch 23)		
	Will the employee work outdoors when apparent temperatures exceed 80F? (H&SM Ch 24),		
	Will the employee work outdoors when the AQI for PM2.5 exceeds 101 due to wildfire smoke? (H&SM Ch 25)		
	Is COVID-19 training required to work in a PCC healthcare setting?		