

General Safety Program & Responsibilities – Form 2: Hazard Assessment

Hazard Assessment (see instructions for additional information)				
1. This assessment is being completed by:				
Name:		Department:		
2. Describe the area of focus this assessment is being completed for:				
	Academic course or discipline		Job description (depart specific responsibilities)	
	Academic shop, or lab space		Operational work area or shop	
	New work process		New equipment or chemical	
Campus/Center:			Building:	
Room/Work area:				
Who will be impacted by this assessment?		Department Employees	Other employees	Students
		Visitors	Contractors/Vendors	Other
Description:				
3. Which of the following potential hazards are present? Describe the specific hazard.				
	Sharp objects (glass, cutting edges)		Biological/BBP exposure	Chemical use
	Outdoor work (heat, cold, wildlife)		Lifting, carrying	Lab, studio, shop
	Control of Hazardous Energy (LO/TO)		Arc flash, electrical	Confined space
	Working at heights, ladders		Ergonomics	Animal handling
	PIT/Mobile platform use		Aerial lifts	Vehicle use
	Hazardous Building Mat.		Lighting/Visibility	Pressure vessels
	Machinery/moving parts		Workplace violence	Other:
Description:				
4. Which of the following environmental conditions present that could require testing or monitoring? Describe the specific exposure.				
	Hazardous Building Material (asbestos)		Metals/welding	Silica
	Environmental factors (heat/smoke)		Noise/vibration	Chemicals
Description:				
5. Which of the following potential sources of harm are present? Describe the potential source of harm.				
	Struck by/on		Caught in/between	Puncture
	Slip/trip/fall		Contact with/exposure to	Needle stick
	Exposure to bodily fluids		Flying particles	Other:
Description:				

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Hazard Controls and Next Steps			
6. Following the Hierarchy of Controls, provide information on existing and proposed hazard controls that can be implemented.			
	Controls currently in place		Additional controls needed
Engineering Controls:			
Administrative Controls:			
Personal Protective Equipment:			
7. What additional safety training should employees have?			
A. Department Provided Training			
	Equipment operation	Equipment maintenance	Chemical specific
	Department procedures	PCC resource documents	Other:
Describe the department specific training:			
B. EH&S Provided Training			
	PIT/Scissor Lift/Utility Vehicles	Asbestos Awareness	Scaffold Safety
	Heat Illness Prevention Plan	Confined Space	Fall Protection
	Compressed Gas Safety	Cranes, Hoists, Slings	Class C Fueling
	Wildfire Smoke Protection	Respiratory Protection	LO/TO
	Hazardous Material Emergency Response	Hearing Conservation	Hot Work
8. What additional actions need to be taken?			
	Develop department standard work documents	Establish inspection and/or maintenance schedules	Coordinate with other stakeholders
	Install engineering controls	Develop/Assign training	Develop task specific JHA
	Complete PPE Assessment	Exposure monitoring	Other:
9. List additional work groups/stakeholders to coordinate with on action items indicated above. Include the specific task that they will be assisting with. <i>Example: FMS, Public Safety, Student Care and Conduct.</i>			
10. List any other non-physical risks that could be present that will need review with Risk Services.			