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						ор					
New work process		New equipment or chemical									
Campus/Center: Building:											
Room/Work area:											
Who will be impacted Departr	es	Other emp	Students								
by this assessment? Visitors			Contractor	rs/Vendors	ors Other						
Description:											
3. Which of the following potential hazards are present? Describe the specific hazard.											
Sharp objects (glass, cutting ed			ogical/BBP exp	osure		emical use					
Outdoor work (heat, cold, wildlif			ng, carrying		_	o, studio, shop					
Control of Hazardous Energy (LO/TO)			flash, electrica	l	Confined space						
Working at heights, ladders			onomics		Animal handling						
PIT/Mobile platform use		Aerial lifts				Vehicle use					
Hazardous Building Mat.		Lighting/Visibility			Pressure vessels						
Machinery/moving parts			kplace violenc	е	Other:						
4. Which of the following environmental conditions present that could require testing or											
monitoring? Describe the specification Hazardous Building Material (as		Mo	tals/welding		Silica						
					Chemicals						
5. Which of the following potential sources of harm are present? Describe the potential source											
of harm.											
Struck by/on	Caught in/be	een	Puncture								
Slip/trip/fall	Contact with			Needle	stick						
Exposure to bodily fluids	Flying partic			Other:	er:						
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 o	peration	Equipm	Equipment maintenance				Chen	nic	al specific	
Department					uments		Other:			
Describe the department specific training: B. EH&S Provided Training										
PIT/Scissor Lift/Utility Vehicles Asbe			stos Awareness				Scaffold Safety			
Heat Illness Prevention Plan				Confined Space					Fall Protection	
Compressed Gas Safety				Cranes, Hoists,					Class C Fueling	
Wildfire Smoke Protection					espiratory Protection				LO/TO	
Hazardous Material Emergency Response Hearing Conservation Hot Work 8. What additional actions need to be taken?						Hot vvork				
Develop dep		Establish inspection and/o maintenance schedules					Coordinate with other stakeholders			
	eering 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.										