PERSONAL PROTECTIVE EQUIPMENT
FOR
GENERAL INDUSTRY
MIOSHA (MICHIGAN OSHA)
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Safety-Related Personal Protective Equipment  
General Industry

Introduction

Hazards exist in every workplace in many different forms: sharp edges, falling objects, flying sparks, chemicals, noise and a myriad of other potentially dangerous situations.

Controlling a hazard at its source is the best way to protect employees. When engineering, work practice and administrative controls can’t protect employees, employers must provide personal protective equipment (PPE) to their employees and ensure its use. PPE is equipment worn to minimize exposure to a variety of hazards.

This guide will help both employers and employees do the following:

- Understand the types of PPE.
- Know the basics of conducting a “hazard assessment” of the workplace.
- Select appropriate PPE for a variety of circumstances.
- Understand what kind of training is needed in the proper use and care of PPE.

The information in this guide is general in nature and does not address all workplace hazards or PPE requirements. The information, methods and procedures are based on the MIOSHA requirements for PPE as set forth in Part 33. Personal Protective Equipment and Part 380. Noise Exposure.
To ensure the greatest possible protection for employees in the workplace, the cooperative efforts of both employers and employees will help in establishing and maintaining a safe and healthy work environment.

In general, employers are responsible for:

___ Performing a “hazard assessment” of the workplace to identify and control hazards.
___ Certifying, in writing, completion of a hazard assessment.
___ Identifying and providing appropriate PPE for employees.
___ Training and retraining employees in the use and care of the PPE.
___ Maintaining PPE, including replacing worn or damaged PPE.
___ Periodically reviewing, updating and evaluating the effectiveness of the PPE program.

In general, employees should:

___ Properly wear PPE,
___ Attend training sessions on PPE,
___ Care for, clean and maintain PPE, and
___ Inform a supervisor of the need to repair or replace PPE.
Hazard Assessment And Equipment Selection

1. **Conduct a workplace survey.** Conduct a walk-through survey to identify sources of hazards to feet, head, eyes and face of workers. Reassess whenever a new hazard is introduced into the workplace.

   Care should be taken to recognize the possibility of multiple and simultaneous exposure to a variety of hazards. Adequate protection against the **highest level** of each of the hazards should be provided.

   **Sources**
   During the walk-through survey, observe:

   a. Sources of *impact/motion*; i.e., machinery or processes where any movement of tools, machine elements or particles could exist or movement of personnel that could result in collision with stationary objects;
   b. Sources of *high temperatures* that could result in burns, eye injury or ignition of protective equipment, etc.;
   c. Types of *chemical exposures*;
   d. Sources of *hazardous atmospheres*;
   e. Sources of *hazardous radiation*, i.e., welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.;
   f. Sources of *falling objects* or potential for dropping objects;
   g. Sources of *sharp objects* which might pierce the feet or cut hands;
   h. Sources of *rolling or pinching objects* which could crush the feet;
   i. *Layout of the workplace* and *location of co-workers*; and
   j. Any *electrical hazards*.

2. **Organize and analyze data.** When the walk-through is complete, the employer should organize and analyze the data so that it may be efficiently used in determining the proper types of PPE required at the worksite. The employer should become aware of the different types of PPE available and the levels of protection offered.

3. **Select Personal Protective Equipment.** Select PPE which ensures a level of protection greater than the minimum required to protect employees from the hazards. PPE that fits well and is comfortable to wear will encourage employee use.

4. **Fit the device.** If PPE does not fit properly, it can make the difference between being safely covered or dangerously exposed. It may not provide the level of protection desired and may discourage employee use.

5. **Reassess hazards.** When new equipment and/or processes introduce hazards that might require revised PPE strategies.
## PERSONAL PROTECTIVE EQUIPMENT
### HAZARD ASSESSMENT

**Company Name:** ABC Mfg. Co.  
**Date of Assessment:** 2-29-2000

**Company address:** 110 S. Main St., Lansing, MI

**Workplace Evaluated:** Production Dept. A.

**Name of Person Completing Assessment:** Jim James, Safety Director

<table>
<thead>
<tr>
<th><strong>Job Classification</strong></th>
<th><strong>HAZARD SOURCE/TYPES</strong></th>
<th><strong>BODY PART AFFECTED</strong></th>
<th><strong>PPE REQUIRED</strong></th>
<th><strong>TYPE OF PPE REQUIRED</strong></th>
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<tbody>
<tr>
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<td>Flying Particles</td>
<td>Eye</td>
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<td>Safety glasses</td>
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<td></td>
<td>Impact</td>
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<tr>
<td>Parts/Equipment</td>
<td>Hand</td>
<td>Yes</td>
<td>Gloves</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>(no revolving shafts)</td>
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<tr>
<td>Laceration</td>
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</table>
Employers are required to train each employee who must use PPE. Employees must be trained to know at least the following:

- When PPE is necessary;
- What PPE is necessary;
- How to properly put on, take off, adjust and wear the PPE;
- The limitations of the PPE;
- Proper care, maintenance, useful life and disposal of PPE;
- Additional requirements when sharing PPE.

Employers should make sure that each employee demonstrates an understanding of the PPE training as well as the ability to properly wear and use PPE before they are allowed to perform work requiring the use of PPE. If an employer believes that a previously trained employee is not demonstrating the proper understanding and skill level in the use of PPE, that employee should receive retraining. Other situations that require additional or retraining of employees include changes in the workplace or in the type of required PPE that make prior training obsolete.

The employer must document the training of each employee required to wear or use PPE by preparing a certification containing the name of each employee trained, the date of training and a clear identification of the subject of the certification.

Note: See Appendix B1-B4 for sample assessment forms
See Appendix A for sample certification letter
Sharing PPE

An employer may choose to provide one pair of protective eyewear for each position rather than individual eyewear for each employee. If this is done, the employer must make sure that employees disinfect shared protective eyewear after each use. Protective eyewear with corrective lenses may only be used by the employee for whom the corrective prescription was issued and may not be shared.
Employees can be exposed to a large number of hazards that pose danger to their eyes and face. MIOSHA required employers to ensure that employees have appropriate eye or face protection if they are exposed to front and/or side impact hazards from:

- Flying objects and particles;
- Molten metal;
- Liquid chemicals;
- Acids or caustic liquids;
- Chemical gases or vapors;
- Potentially infected material;
- Glare;
- Injurious radiation;
- Electrical flash.

**Selection**

Selecting the most suitable eye and face protection for employees should take into consideration the following elements:

- Ability to **protect** against specific workplace hazards;
- Should **fit** properly and be reasonably comfortable to wear;
- Should provide **unrestricted** vision and movement;
- Should be **durable** and **cleanable**;
- Should allow unrestricted functioning of any other required PPE.

The eye and face protection selected for employee use must clearly identify the manufacturer. Any new eye and face protective devices must comply with ANSI Z87.1-1989 or be at least as effective as this standard requires.

**Welding Operations**

The intense light associated with welding operations can cause serious and sometimes permanent eye damage if operators do not wear proper eye protection. The intensity of light or radiant energy produced by welding, cutting or brazing operations varies according to a number of factors including the task producing the light, the electrode size and arc current. Table 2 Personal Protective Equipment shows the minimum protective shades for a variety of welding, cutting and brazing operations in general industry.
Lenses

Lenses intended for use in eye protectors are of 4 basic types.

- **Clear lenses** which are impact-resisting and provide protection against flying objects. The use of tinted lenses for cosmetic purposes is not acceptable. Clear lenses must transmit not less than 89% of visible radiation. To wear a tinted lens that transmits less than 89%, a medical statement should be provided.

- **Absorptive lenses** of shades 1.7 through 3.0 which are impact-resisting and provide protection against flying objects and glare or which are impact-resisting and provide protection against flying objects, and narrowband spectral transmittance of injurious radiation. Shaded lenses greater than 3.0 should be worn when employees are exposed to injurious radiation as defined in the employer’s hazard assessment and Table 2 of Part 33. Personal Protective Equipment.

- **Protective-corrective lenses** which are impact-resisting and either clear or absorptive, as specified for persons requiring visual correction.

- **Filter lenses** that are impact resisting and provide protection against flying objects and narrow-band spectral transmittance of injurious radiation.

Note: See Appendix C for PPE Training Certification

Note: See Appendix D for Sample Test used to demonstrate understanding
A head injury can impair an employee for life or can be fatal. Protecting employees from potential head injuries by wearing a safety helmet or hardhat is one of the easiest ways to protect an employee’s head from injury.

Employers must ensure that their employees wear head protection if they are exposed to any of the following:

- Falling or flying objects;
- Other harmful contacts or exposures;
- Risk of injury from electrical shock;
- Chemicals;
- Temperature extremes;
- Hair entanglement.

Types of Hard Hats:

- Class A hard hats provide impact and penetration resistance along with limited voltage protection (up to 2,200 volts).
- Class B hard hats provide the highest level of protection against electrical hazards, with high-voltage shock and burn protection (up to 20,000 volts). They also provide protection from impact and penetration hazards by flying/falling objects.
- Class D protective hats provide limited voltage protection (fire fighters service helmets with full brim.)

In Michigan a **Class C** helmet or any metallic head device shall not be furnished by an employer or used by an employee for head protection, except where chemicals would deteriorate other types of protective or safety hats or caps.

**Hair Enclosures (3378)**

Where there is a danger of hair entanglement in moving machinery or equipment, or where there is exposure to means of ignition, a hat, cap or net shall be used. Hair enclosures shall be reasonably comfortable, completely enclose all loose hair, and be adjustable to accommodate all head sizes. Materials shall be fast dyed and non-irritating to the skin.
Cleaning and Inspection of Head Protection

- **Inspect** daily – shell, suspension headgear, accessories for holes, cracks, tears, anything that compromises the protective value of the hat
- **Consult** manufacturer for proper cleaning procedures
- **Store** away from direct sunlight
- **Never** drill holes, paint, or apply labels, may **reduce** integrity of protection.
- **Remove and replace** if visible perforations, cracking or deformity of brim or shell. Loss of surface gloss, chalking or flaking.
- **Remove** if it sustains an impact, even if damage is not noticeable.
Foot and Leg Protection

Employees who face possible foot or leg injuries from falling or rolling objects or from crushing or penetrating materials should wear protective footwear. Also, employees whose work involves exposure to hot substances, corrosive, or poisonous materials must have protective gear to cover exposed body parts, including legs and feet. If an employee’s feet may be exposed to electrical hazards, non-conductive footwear should be worn. On the other hand, workplace exposure to static electricity may necessitate the use of conductive footwear.

Examples of situations in which an employee should wear foot and/or leg protection include:

- When heavy objects such as barrels or tools might roll onto or fall on the employee’s feet;
- Working with sharp objects such as nails or spikes that could pierce the soles or uppers of ordinary shoes;
- Exposure to molten metal that might splash on feet or legs, Forging, Foundries, and Die Casting for specific requirements);
- Working on or around hot, wet or slippery surfaces; and
- Working when electrical hazards are present.

Foot and leg protection choices include the following:

- **Safety shoes** have impact-resistant toes and heat-resistant soles that protect the feet against hot work surfaces common in roofing, paving and hot metal industries. The metal insoles of some safety shoes protect against puncture sounds. Safety shoes may also be designed to be electrically conductive to prevent buildup of static electricity or non conductive to protect workers from workplace electrical hazards.
- **Leggings** protect the lower legs and feet from heat hazards such as molten metal or welding sparks.
- **Metatarsal guards** protect the instep from impact and compression.
- **Toe guards** fit over the toes of regular shoes to protect the toes from impact and compression hazards.
Hand And Arm Protection

Where potential injury to hands and arms cannot be eliminated through engineering and work practice controls, employers must ensure that employees wear appropriate protection. Potential hazards include:

- Skin absorption of harmful substances (look for ‘skin’ warning on MSDS);
- Chemical or thermal burns;
- Electrical dangers; and
- Bruises, abrasions, cuts, punctures.

Types of Protective Gloves
There are many types of gloves available today to protect against a wide variety of hazards. Following are examples of some factors that may influence the selection of protective gloves for a workplace:

- Types of chemicals handled;
- Nature of contact (total immersion, splash, etc.);
- Duration of contact;
- Area requiring protection (hand only, forearm, arm);
- Grip requirements (dry, wet, oily);
- Thermal protection;
- Size and comfort;
- Abrasion/resistance requirements.

Gloves made from a wide variety of materials are designed for many types of workplace hazards. In general, gloves fall into four groups:

- Gloves made of leather, canvas, or metal mesh;
- Fabric and coated fabric gloves;
- Chemical--and liquid--resistant gloves;
- Insulating rubber gloves.

Care of Protective Gloves
- Inspect before each use (tears, punctures, anything making gloves ineffective, discoloration, stiffness);
- Discard if protective ability is impaired.
Safety Belts, Harnesses, Lifelines, And Lanyards

Unless protected by a perimeter guardrail or working on a portable ladder, the employee must be safeguarded by a safety harness secured to a lifeline or structure capable of sustaining the imposed load. However, there are conditions where the use of a harness and lanyard would be required along with a guardrail, such as in aerial lift or scaffold.

- If subjected to in-service loading, remove from service and don’t use again;
- Safety belt and lanyard - 4,000 pounds of tensile load;
- Lifeline secured above the employee’s workplace to an anchorage or structural member – withstand dead weight of 5,400 pounds;
- A lifeline at least ¾-inch manila rope or equivalent with not less than 5,400 foot-pounds breaking strength;
- A lanyard at least ½ inch nylon rope or equivalent;
- Free fall – less than 6 feet or no contact with lower surface;
- Store equipment in clean, dry area and away from excessive heat and freezing.
Certification of Safety-Related Personal Protective Equipment Hazard Assessment

Employer: ___________________________________________________________

Location*: __________________________________________________________

*Or type of work for employees not assigned to a fixed location

Workplace Assessed/ Evaluated: __________________________________________

Date(s): ____________________________

Name of Person Assessing/ ___________________________________________

This document certifies that the hazard assessment has been performed

Signature of Person Certifying: __________________________________________
## Personal Protective Equipment Types

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<th>Face and Eye Protection</th>
<th>Welding Helmets</th>
<th>Head Protection</th>
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<td>Half side shield</td>
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<td>w/limited voltage protection</td>
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<td>Class B – Utility service w/high</td>
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<td>Cut goggles w/</td>
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<td>Class C – Special service</td>
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<td>No voltage protection</td>
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<td>Indirect ventilation</td>
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<td>Class D – Fire fighters full brim</td>
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<td>Face Shield</td>
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<td>w/ear flaps and chin strap</td>
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<td>Hair enclosures</td>
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<td>Electrical protection</td>
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<td>Wet slippery surfaces</td>
<td>Hot Stick</td>
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<td>Cold weather protection</td>
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<tr>
<td>Leggings</td>
<td>*Must be capable of withstanding imposed voltage</td>
<td>*No safety belts for fall protection after 1-1-98.</td>
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<td>Molten metal and welding</td>
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<th>Body Protection</th>
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<td>Types</td>
<td>Types</td>
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<td>Gloves</td>
<td>Vests</td>
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<td>Hand Pads</td>
<td>Jackets</td>
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<td>Sleeves</td>
<td>Aprons</td>
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<td>Wristlets</td>
<td>Coveralls</td>
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<td>Full Body Suits</td>
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PERSONAL PROTECTIVE EQUIPMENT
HAZARD ASSESSMENT

Company Name: ____________________________________________ Date of Assessment: _____________________

Company Address: ____________________________________________________________________________________

Workplace Evaluated: __________________________________________________________________________________

Name of Person Completing Assessment: __________________________________________________________________________

<table>
<thead>
<tr>
<th>Job Classification WORKSTATION</th>
<th>HAZARD SOURCE/TYPE</th>
<th>BODY PART AFFECTED</th>
<th>PPE REQUIRED YES/NO</th>
<th>TYPE of PPE REQUIRED</th>
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# Personal Protective Equipment Hazard Assessment Certification

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<th>Date</th>
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<td></td>
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<tr>
<td><strong>Position or Title of Assessors</strong></td>
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Refer to Table 1 and 2 of the General Industry Safety Standard part 33 on Personal Protective Equipment, and all applicable Occupational Health Standards, for additional hazards and applications. For more information, contact General Industry Safety and Health Division at (517) 322-1831.

## EYE HAZARDS

- Part 33 Rule 3312
  - flying particles
  - dust & dirt
  - chemical splash
  - molten metal
  - sparks
  - weld flash
  - electrical
  - other

## HEAD HAZARDS

- Part 33 Rule 3370
  - falling objects
  - flying objects
  - electrical
  - hair entanglement
  - hot surfaces
  - chemicals
  - other

## FACE HAZARDS

- Part 33 Rule 3312
  - impact hazards
  - chemical
  - heat
  - touch cutting
  - welding
  - casting
  - high temperature exposures
  - other

## HEARING HAZARDS

Refer to Occupational Health Rules
- loud process and or equipment
- air and electrical impact tools
- forging
- logging
- tree trimming
- other

## HAND HAZARDS

- Part 33 Rule 3392 and 3387
  - skin absorption
  - punctures
  - severe cut or laceration hazard
  - chemical or thermal burns
  - other

## FOOT HAZARDS

- Part 33 Rule 3336
  - flying objects
  - rolling objects
  - powered lawn equipment
  - wet process areas
  - logging areas
  - other

## BODY HAZARDS

- Part 33 Rule 3394
  - wet process areas
  - chemical
  - buffing
  - sand blasting
  - polishing
  - hot liquids (water, grease, acids, etc.)
  - other

## BREATHING HAZARDS

Refer to Occupational Health Rules
- spray finishing
- fumes
- vapors
- dust
- welding
- foundries
- permit required confined spaces
- other

[Rev. 6/17/2004]
Appendix B-3

Sample PPE Assessment and Certification Worksheet

(Note) This worksheet, or any other worksheet used to assess the worksite for PPE is not mandatory. However, certification that a PPE assessment has been completed is required by the PPE standard.

Assessment conducted by: _____________________________ Date: __________________________

Task:_________________________ Department: __________________________

Instructions

1. Conduct a Job Safety Analysis of the above task.
2. List below the hazards found in the JSA.
3. If engineering or management practices cannot eliminate the hazards or are not feasible, determine the appropriate PPE for each hazard.
   Note: If you are not sure about appropriate PPE, consult your OR-OSHA consultant or insurer for assistance.

Summary of Task Hazards and PPE Required

Impact by: _____materials_____equipment_____objects_____co-worker_____other (describe)________________________

PPE required: (head, eye, foot, etc.) __________________________

Contact with: _____Stationary object_____moving object_____sharp object_____other (describe)________________________

PPE required: (foot, head, etc.) __________________________

Fall: _____ from elevation _____ to surface _____slipping _____ tripping _____ other (describe)________________________

PPE required: (fall, restraint systems) __________________________

Caught in, under, between: _____running or meshing objects _____ moving object _____stationary object _____rolling vehicle_______
collapsing materials/cave-in _____ other (describe) __________________________

PPE Required: (hand, foot, etc.) __________________________

Overexposure: _____ noise _____ heat _____ cold _____ temperature variation _____ radiation. List dBA ________ Temp ________F.

PPE required: (hearing, respiratory, clothing, eye, etc.) __________________________

Inhalation of: _____ hot _____ cold _____ dust _____mists _____ vapors _____ smoke _____gasses _____fibers _____biohazards_____ other (describe)________________________

PPE required: (respiratory, face, etc.) __________________________

Ingestion of: _____ hot _____ cold _____ acids _____bases _____ caustics _____poisons _____dust _____mists_____ vapors _____smoke
_____gases _____ radiation _____fibers _____ other (describe) __________________________

PPE Required: (respiratory, face, etc.) __________________________

Absorption of: _____acids _____bases _____ caustics _____poisons _____hazardous chemicals _____ other (describe) __________________________

PPE required: (hand, face, eye, clothing, etc.) __________________________

Skin contact with: _____ hot liquid _____molten metal _____sparks _____acids _____bases _____caustics _____poison _____other (describe) __________________________

PPE required: (hand, foot, face, eye, clothing, etc.) __________________________

4. Reference the associated MSDS for each hazardous chemical used and list the recommended PPE for that chemical.

   Chemical: _____________________________ MSDS PPE: _____________________________

Certification

Signature: _____________________________ Date: __________________________
Sample PPE Walk Through Survey and Certification

Assess each task for hazards using the following criteria: (1) Type of injury or illness possible: (2) Probability – unlikely, likely, highly likely; and (3) Severity – death, serious injury/illness, not serious injury/illness.

1. Sources of motion – machinery, processes, tools, materials, people, etc.
   Required PPE: 

2. Sources of high temperatures – that could cause burns, ignition, injury to eyes, etc.
   Required PPE: 

3. Sources of chemical exposure – splash, vapor, spray, immersion, etc.
   Required PPE: 

4. Sources of harmful atmospheres – dust, fumes, gasses, mists, vapors, fibers, etc.
   Required PPE: 

5. Sources of light radiation – welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.
   Required PPE: 

6. Sources of falling objects – materials, equipment, tools, etc.
   Required PPE: 

7. Sources of sharp objects – which could pierce the skin – feet, hands, face, etc.
   Required PPE: 

8. Sources of rolling or pinching that could crush – hands, feet.
   Required PPE: 

9. Layout of workplace and location of co-workers – adequate space for task.
   Required PPE: 

10. Sources of contact with electricity – wires, grounding.
    Required PPE: 

I certify that I have conducted a workplace survey on the above task to assess the need for personal protective equipment. The personal protective equipment noted above will be required while performing this task.

______________________________  __________________________
Signature                        Date
# PPE TRAINING CERTIFICATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
<th>Employee Number</th>
<th>Trainer</th>
<th>Trained in PPE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Eye &amp; Face</td>
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<td>Foot &amp; Leg</td>
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<td>Body</td>
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<td>Electrical</td>
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<td></td>
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<td>Fall</td>
</tr>
</tbody>
</table>
Sample Personal Protective Equipment (PPE) Test

(Supervisors should give this test after training the employee on the proper use and care of PPE. The supervisor should review the test and discuss any areas requiring additional training. When the supervisor is confident that the employee has an adequate knowledge and ability to properly use PPE associated with the job, the supervisor should certify training.)

1. List the type(s) of PPE required for your task.

2. What are the hazards you are being protected against for each type of PPE used in your job?

3. Describe procedures for the use and care of the PPE you are using.

4. What should you look for to determine if the PPE you are using is in good working order?

5. What actions do you take when your PPE becomes defective?

Certification

I have personally trained ________________________________ and answered all questions pertaining to the proper use and care of PPE. I certify that he/she has adequate knowledge and ability to properly use and care for the PPE associated with his/her job.

________________________________________
Supervisor’s Signature

________________________________________
Date

I have been adequately trained on the use and care of PPE to be used by me. My supervisor has answered all questions to my satisfaction and I understand he/she will be available for follow-up training if needed.

________________________________________
Employee’s Signature

________________________________________
Date
ASSIGNMENT, TRAINING AND FIT-TEST FORM

All affected employees receive PPE training that includes when PPE is necessary; what PPE is necessary and why; how to wear PPE properly; PPE limitations and capabilities; and PPE care and maintenance. Each affected employee is fitted properly with the assigned PPE.

The following individual has been assigned PPE, has been fit-tested, and has received training.

Employee: ____________________  Training Date  ________________________________

Name of Trainer_____________________________________________

The following is a list of PPE assigned to this employee including the manufacturer, model and any identification numbers:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I acknowledge that I have been assigned the above named equipment, have had the opportunity to be properly fitted, and have received training. I also acknowledge that I understand the training that was provided:

___________________________________________

(Employee’s Signature)
PERSONAL PROTECTIVE EQUIPMENT POLICY
FOR

(Name of Company)

PURPOSE

The purpose of this program is to protect the employees of (Insert name of Company) from the occupational hazards within the workplace by providing the proper personal protective equipment (PPE). It is the goal of the company to use engineering controls as the primary method for protecting employees. However, when additional protection is necessary, appropriate PPE will be worn. The scope of this program includes PPE for eye; face, head, foot, and hand protection. If respirators and/or hearing protection is necessary, their use will be covered by the Company’s Respiratory Protection Program and the Hearing Conservation Program, respectively.

RESPONSIBILITY

The person responsible for coordinating this program is (insert name or job title of responsible person). This person will ensure that hazard assessments are conducted, appropriate PPE is assigned, and affected employees receive training. The responsible person will also be in charge of maintaining the documentation for this program.

Department supervisors should advise the responsible person of changes in PPE requirements (e.g., new procedures/processes requiring different PPE; omission of a job/task). Additionally, supervisors should consult with the responsible person before purchasing any new PPE.

HAZARD ASSESSMENTS

Each job/task performed will be assessed to determine foot, head, eye, face, and hand hazards present and the proper PPE that should be worn. The assessments will include observation of the following sources of hazards:

1. **Impact**: Flying chips, objects, dirt, particles, collision, and motion hazards.
2. **Penetration**: Falling/dropping objects, sharp objects that cut or pierce.
3. **Compression**: Rollover or pinching.
4. **Chemical**: Splashing, burns, fumes.
5. **Temperature Extremes**: Sparks, splashes from molten materials, burns from high/low temperatures.
6. **Harmful Dust**: Dirt, particles, asbestos, lead.
7. **Light Radiation**: Welding, cutting brazing, lasers, furnaces, lights.

The attached Hazard Assessment Form will be completed for each job/task and will serve as certification that a hazard assessment has been performed.
The person conducting the hazard assessment will also survey jobs that are non-routine or periodic. In some cases these assessments may not be completed until the jobs are scheduled.

Hazard assessments will be updated/evaluated whenever conditions or procedures change.

The information and suggestions contained in this material have been developed from sources believed to be reliable. However, Frankenmuth accepts no legal responsibility for the correctness or completeness of this material, or its application to specific factual situations.