

# **Safe Operating Procedure**

(Revised 12/13)

## COMMUNICATION OF WORK AREA SAFETY INFORMATION

(For assistance, please contact EHS at (402) 472-4925, or visit our web site at http://ehs.unl.edu/)

In accordance with UNL's **Injury Illness and Prevention Program (IIPP)**, certain work area specific emergency/safety information must be provided to all employees. The Work Area Safety Information Worksheet at the end of this document assists supervisors by ensuring that necessary information is communicated to each employee (a fillable form is available). Information should be updated as situations change within the work area.

Injury and Illness Prevention Plan (IIPP). The first section of the worksheet documents that employees have been trained on general safety and instructed on what to do in case of an injury/illness incident. This is usually accomplished by: 1) completing the EHS web-based training module titled, *Core – Injury and Illness Prevention Plan (IIPP)*; 2) reviewing the safety and compliance manual and procedures established by the supervisor; 3) reviewing work place specific emergency information (e.g., alarms, evacuation and shelter-in-place locations, etc.), and; 4) Informing employees of department/unit-specific injury/illness procedures (See EHS SOP, *On-The-Job and Student Injuries*).

Supervisors should use the **EHS Virtual Manual** tool (available on the EHS web site) to create a basic safety and compliance manual, and instruct employees to read the manual and refer to it as necessary throughout their career at UNL. Supervisors should supplement the basic manual with additional information, procedures, and instruction as appropriate to the hazards unique to the work places under their authority. In locations where employees may use or be exposed to hazardous chemicals, the Virtual Manual serves as a basic Chemical Hygiene/Hazard Communication plan, which is required by federal Occupational Safety and Health Administration standards.

Emergency Preparedness. The next section of the worksheet assists in providing appropriate instruction in emergency preparedness and documenting training. Employees must be instructed in the appropriate actions to take in the event of various types of emergencies. This is generally accomplished by completing the EHS web-based training module titled, *Core –Emergency Preparedness Training*. This training must be supplemented with work site-specific information such as egress routes, alarm sounds for various emergencies, locations of alarm pull stations, emergency phones and contacts, tornado shelter location, etc. Employees should be familiar with UNL's emergency preparedness web site (<u>http://emergency.unl.edu</u>), and consider

enrolling in the UNL Alert System. EHS also offers a related but supplemental web-based training module titled, *Fire Extinguishers*.

Job Hazard Awareness and Relevant Training. As applicable, employees must be informed of the unique hazards associated with their assigned tasks and trained on the prescribed measures or strategies that have been implemented to mitigate associated risks. See the following EHS SOPs for additional guidance/information: Job Safety Assessments and Chemical Hazard Assessment & Risk Minimization. The previously discussed EHS Virtual Manual is particularly useful for this purpose but must be supplemented with task or work site-specific information, as appropriate and applicable. Completion of appropriate and applicable training is critical. The checklist at the end of this document lists available EHS web-based training modules. The EHS training needs assessment form (http://ehs.unl.edu/Training Needs Assessment.pdf) can be used to identify applicable training.

### WORK AREA SAFETY INFORMATION WORKSHEET

(For assistance, please contact EHS at (40	2) 472-4925, or visit our web site at <u>http://ehs.unl.edu/</u> )		
Location:	Department: Employee:		
Supervisor:			
Date(s) Prepared/Reviewed/Revised:			
	date of training:). Tety deficiency in my work area or assigned task/equipment, pment to conduct my job safely, I should contact:		
<ul> <li>student is injured or becomes ill while at a</li> <li>If applicable, I know the names and contact and have volunteered to assist injured pers</li> <li>I know how and when to summon emergen available to me for this purpose (911 from</li> <li>I know where to locate the first aid kit for me for the first and kit for me for the</li></ul>	action to take, including reporting, if I or a co-worker or UNL function. t information of persons who are trained in first aid/CPR cons assigned to my work area/location. cy response personnel and the communication equipment a telephone).		
Additional written specific work procedure necessary):	s are located at (include user ID and password, if		
	eparedness training (date of training:). aredness web site ( <u>http://emergency.unl.edu</u> ) and have or		

- □ I know who to contact in the event of an emergency and their contact information. Emergency numbers are posted at:
- □ As applicable, I know how to access emergency contacts information for co-workers, employees that I supervise, or students that I am responsible for.
- $\Box$  I have been shown the nearest alarm pull stations(s) to my work area(s).
- □ The fire alarm makes the following sound: \_\_\_\_\_
- □ I will be notified of a tornado warning by: \_
- $\Box$  I have been shown the nearest telephone(s) to my work area(s).
- $\Box$  I have been shown a primary and secondary evacuation route from my work area(s).
- □ The designated gathering location following building evacuation is \_\_\_\_\_\_
- □ If the tornado warning sounds, the designated gathering location is\_\_\_\_\_
- □ Critical systems to shut-down, if safe to do so, prior to evacuation are \_\_\_\_\_
- □ If the area should be secured prior to evacuation and it is safe to do so, I should do the following:\_\_\_\_\_
- □ I have been shown the materials and/or processes that present a fire hazard in my work area.

□ If I am expected or allowed to use a fire extinguisher, I have completed EHS Fire Extinguisher training (date of training: \_\_\_\_\_)

#### Chemical Safety (applicable to those persons who handle or may be exposed to hazardous chemicals:

- □ I have completed EHS Chemical Safety training, either instructor-led or web-based (date of training: \_\_\_\_\_).
- □ A chemical inventory/list for my work area is located \_\_\_\_\_
- □ Safety Data Sheets for the chemicals in my work area can be located at (include user ID and password, if applicable)
- □ I have reviewed the Safety Data Sheets and understand the health and physical hazards of the chemicals that I will be working with or around.
- □ I have read and understand the EHS SOP, *Chemical Hazard Assessment & Risk Minimization* as well as companion EHS SOPs specific to the class of chemicals that I work with.
- **I** I know the limits of my authorization for working with chemicals and will adhere to these limitations.
- □ I understand the appropriate precautions and procedures to take for safe use of the chemicals with which I work, to include engineering controls, administrative controls (e.g., specific procedures), and personal protective equipment required.
- □ I am familiar with the location and operation of emergency eyewash equipment and safety showers.
- □ I know where the chemical spill supplies are located. I have been informed of the appropriate procedures for use of these supplies, to include types of chemicals and situations for which the supplies can be used and sizes of spills for which they may be used. I understand that I will need to use personal protective equipment when cleaning up a spill.
- □ I know to initiate building evacuation and call 911 if a spill presents an imminent hazard.

#### **Personal Protective Equipment:**

- □ I have been trained to know what specific PPE I am required to wear under specific conditions.
- □ I know how to attain the PPE that I need.
- □ I have been informed of the limitations, care, and proper use of my assigned PPE.

#### Security:

- □ I understand the procedures and reporting that should occur if I see unauthorized or unfamiliar persons in the work area.
- □ I have been informed of chemicals, biological agents, and radioactive materials that require additional security precautions and I understand how to secure those materials, as well as report any missing materials.
- □ I have been informed of security practices that are in force in my work area (i.e., key/credential/biometric security, hours of operation, etc.).

#### Additional Safety Information for this Work Area:

- □ I am aware of specific hazards associated with my assigned work tasks. I understand and am competent in the strategies that have been prescribed to minimize risks (See EHS SOP, Job Safety Assessments).
- □ I have discussed with my supervisor additional training that may apply to my job and have completed such training.
  - Personal Protective Equipment (Date Completed:\_\_\_\_\_)
  - □ Hearing Conservation (Date Completed:\_\_\_\_\_)
  - Respiratory Protection (Date Completed:\_\_\_\_\_)
  - Asbestos Awareness (Date Completed:\_\_\_\_\_)
     Biosafety Basics (Date Completed:\_\_\_\_\_)

  - Biosafety in the BSL-2 Laboratory (Date Completed:\_\_\_\_\_)

#### (Created 8/02; Revised 12/03, 5/08, 6/09, 8/12, 3/13)

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NIH Guidelines for	Research Involving	Recombinant	or Synthetic DNA	A molecules	(Date
Completed:	)				

- Bloodborne Pathogens (Date Completed:\_\_\_\_\_)
- Confined Space Awareness (Date Completed:
- Dining Services: General and Equipment Safety (Date Completed:\_\_\_\_\_)
- Fire Extinguisher (Date Completed:
  General Electrical Safety (Date Completed:
  )
- Laboratory Safety Training Colloquium Series (Specify Appropriate Modules and Date Completed Below)

- Laser Safety (Date Completed:\_\_\_\_\_) Lockout/Tagout for Machines and Equipment (Date Completed:\_\_\_\_\_)
  - □ Mobile Aerial Lifts (Date Completed:\_\_\_\_\_)
  - Portable Ladders (Date Completed:\_\_\_\_\_)
  - Powered Industrial Trucks (Date Completed:\_\_\_\_\_\_
  - \_) □ Spill Prevention Control and Countermeasures (SPCC) (Date Completed:\_\_\_\_\_
  - DOT/IATA (Shipping of Dangerous Goods/Hazardous Materials; retraining required every three years) (Date Completed:
  - **Radiation Safety (Specify Appropriate Modules and Date Completed Below):**

Other (Include work/task specific required training and dates completed)