

# SAFETY HAZARD REVIEW CHECKLIST

University of Washington Facilities

HRC#

☐ Amended on: \_\_\_\_/\_\_\_\_/\_\_\_\_

Before scheduling a job or assigning work, consider the following items. Check any that apply, initiate appropriate coordination or preventive/corrective action, and ensure that the appropriate personal protective equipment is checked.

**IMPORTANT NOTE:** If you do not know how to proceed safely, consult the WAC regulations and/or consult the your department safety contact or Environmental Health and Safety (EH&S).

Site Specific Walkthrough Completed	Yes	Date	No
Work Request #		Location	
Task			

Have you identified all potential hazards?

## SAFE WORK SITE

- ☐ **Access/Egress** ☐ Inadequate lighting ☐ Ladder ☐ Pedestrian traffic ☐ Scaffolding ☐ Vehicle traffic
- ☐ Other \_\_\_\_\_

## POTENTIAL HAZARDS (Mark all that apply)

- ☐ **Airborne Contaminants**
- ☐ Animal dander ☐ Gas ☐ General Room Dust (paper, soil, clothing fibers, etc.) ☐ Metal dust or fume ☐ Mist
- ☐ Mold ☐ Wood dust ☐ Vapor
- ☐ Other \_\_\_\_\_
- ☐ **Animals** (*includes insects*)
- ☐ **Asbestos** - *If suspect material present, AHERA survey information required or assumed positive*
- ☐ **Biological Hazards** (*feces, blood*)
- ☐ **Compressed Gasses**
- ☐ **Confined Space** ☐ **Permit-Required Confined Space**
- ☐ **Cranes** ☐ **Hoisting & Rigging**
- ☐ **Electrical**
- ☐ Extension cords (GFCI required) ☐ Exposed energized electrical equipment ☐ Generators
- ☐ Power lines overhead/underground) ☐ Outdoors and/or moist environment (GFCI protection required)
- ☐ **Ergonomics** ☐ Lifting ☐ Repetitive motion ☐ High Force ☐ Awkward posture
- ☐ **Excavation, Trenching and Shoring**
- ☐ **Fall Hazard**
- ☐ **Fire Hazard**
- ☐ Hot work ☐ Flammable materials
- ☐ Other \_\_\_\_\_
- ☐ **Hazardous Chemicals**

## POTENTIAL HAZARDS (continued)

### ☐ Hazardous Energy

☐ Heat ☐ Hydraulic ☐ Stored energy (kinetic energy) ☐ Pressure

☐ Other \_\_\_\_\_

### ☐ Heat Stress ☐ Cold Stress

### ☐ Laboratory

☐ Pre-work decontamination required ☐ FS Tool/Equipment decontamination required

☐ Other \_\_\_\_\_

### ☐ Lead (paint, pipe, shielding, etc.)

### ☐ Noise

☐ Heavy Equipment ☐ Powder Actuated Tools ☐ Power/Hand Tools

### ☐ Overhead Hazard

### ☐ Powered Materials Handling *including forklifts, powered industrial trucks, hoists*

☐ Other \_\_\_\_\_

### ☐ Radiation

☐ Ionizing (x-rays, lab sources and radioactive chemicals)

☐ Non-ionizing (cell tower transmitters, Magnetic Resonance Imaging (MRI), lasers, ELF)

### ☐ Scaffolding

☐ Less than 10' high ☐ Greater than 10' high ☐ No Guardrails

☐ Other \_\_\_\_\_

### ☐ Silica

### ☐ Welding/Torch Cutting/Soldering

☐ Other Potential or Actual Hazards \_\_\_\_\_

## SAFEGUARDS

### ☐ Administrative Controls

☐ Confined Space Permit ☐ Employee rotation ☐ Energized electrical permit and work plan

☐ Fall protection work plan ☐ Frequent Rest Breaks ☐ Hot Work Permit ☐ Lab/Department specific procedures

☐ Lead work plan ☐ Lockout ☐ Notice of laboratory equipment decontamination

☐ Other \_\_\_\_\_

### ☐ Engineering Controls

☐ Additional ventilation ☐ Building system shutdown ☐ Electrical shutdown ☐ Electrical disconnect

☐ Enclosure ☐ Noise controls ☐ Temporary lighting ☐ Traffic control plan

☐ Other \_\_\_\_\_

## SAFEGUARDS (continued)

### ☐ Emergency

- ☐ Identify means of emergency communication (radio/cell phone/land line) ☐ Location of First Aid Kit  
☐ Location of Fire Extinguisher ☐ Location of Emergency Exit(s)

### ☐ Site Control

- ☐ Barricades ☐ Pedestrian traffic control ☐ Secure Access/Check-in ☐ Signs ☐ Vehicular traffic control  
☐ Other \_\_\_\_\_

Comments on other control/corrective actions: \_\_\_\_\_

## PERSONAL PROTECTIVE EQUIPMENT

**Note:** PPE covered by a hazard specific Work Plan/Permit does not need to be listed here.

### ☐ Body

- ☐ Arc rated ☐ Coverall ☐ FR clothing ☐ High Visibility Vests ☐ Tyvek  
☐ Other \_\_\_\_\_

### ☐ Eye

- ☐ Impact goggle/glasses ☐ Dust goggles ☐ Chemical goggles  
☐ Other \_\_\_\_\_

### ☐ Face

- ☐ Chemical splash face shield ☐ Impact face shield ☐ UV/Heat face shield/hood  
☐ Other \_\_\_\_\_

### ☐ Foot

- ☐ Shoe covers ☐ Steel/Composite toe ☐ Metatarsal Guard ☐ Puncture Resistant ☐ Substantial footwear  
☐ Electrical Hazard ☐ Other \_\_\_\_\_

### ☐ Hand

- ☐ Butyl rubber ☐ Cotton gloves ☐ Chemically resistant gloves (indicate types) ☐ Dipped cotton gloves  
☐ Electrically rated gloves ☐ Leather gloves ☐ Nitrile ☐ Silver shield ☐ Vinyl  
☐ Other \_\_\_\_\_

### ☐ Hearing Protection

- ☐ Earplugs ☐ Earmuffs

### ☐ Head

- ☐ Arc rated hood ☐ Hardhat  
☐ Other \_\_\_\_\_

**PERSONAL PROTECTIVE EQUIPMENT (continued)**☐ **Respiratory**☐ Dust mask ☐ Full face, negative pressure ☐ Half face, negative pressure ☐ PAPR☐ Other \_\_\_\_\_☐ **Cartridges:** ☐ Purple (HEPA) ☐ Yellow (Organic vapor) ☐ Purple/Yellow combination☐ Contact EH&S for correct cartridge☐ Other \_\_\_\_\_☐ **Training**☐ Asbestos Awareness☐ Asbestos 8-hour for specific material☐ Back Protection☐ Blood Borne Pathogen☐ Confined Space Awareness☐ Confined Space Entry☐ Fall Prevention☐ First Aid/CPR☐ Forklift Safety☐ Hearing Conservation☐ Other \_\_\_\_\_☐ Hoist/Lift & Crane Training☐ Hoist/Lift Training (NON-Crane)☐ Ladder Safety☐ Lead Awareness☐ Lead Worker☐ Lockout Safety☐ Mobile Elevating Work Platform☐ NFPA 70E☐ Respiratory Protection☐ Scaffold Safety**WASTE DISPOSAL**☐ No hazardous waste generated ☐ Hazardous waste generated ☐ Waste assessment needed**SIGNATURES**\_\_\_\_\_  
COMPLETED by: (Signature)\_\_\_\_\_  
Date\_\_\_\_\_  
APPROVED by: (Signature of Supervisor approving Work Plan)\_\_\_\_\_  
Date*D. Joseph Grojean*  
\_\_\_\_\_  
Department Safety Contact (Signature)*2/17/2021*  
\_\_\_\_\_  
Date