Personal Protective Equipment Program

[Sample]

To ensure the greatest possible protection for employees in the workplace. When engineering, work practice, and administrative controls are not feasible or do not provide sufficient protection to eliminate a hazard, employers must provide personal protective equipment (PPE) to their employees and ensure its use.

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Department of Administration

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**Personal Protective Equipment (PPE) Program**

**I. PURPOSE**

This program provides general guidance for the proper selection and use of personal protective equipment (PPE) for each hazard at [agency name].

**II. SCOPE**

Personal protective equipment for ears, eyes, face, head, body, and extremities shall be provided such as respiratory devices, hearing protection, fall protection, protective clothing, protective shields, and barriers while maintaining in a sanitary and reliable condition. PPE is required wherever it is necessary to handle hazards of processes, environmental, chemical, radiological, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation, or physical contact.

**III. RESPONSIBILITIES/ROLES**

(person/position designated) reviews the requirements of the PPE standard, determines applicability to the site, and assists in implementing the program requirements for this location.

All Employees - Follow applicable program requirements and communicate with their supervisor when there are safety issues not specifically addressed by the hazard assessment.

**IV. PROGRAM ELEMENTS**

**1. PPE Hazard Assessments**

(person/position designated) will perform, document, and certify that a PPE hazard assessment has been conducted to identify hazards for each work task(s).

(person/position designated) will also review the PPE hazard assessment when changes occur to the work task or work environment. A PPE hazard assessment will also be conducted for new equipment, processes, and tasks where new job hazards may be introduced. The hazard assessment should begin with a walk-through survey of the location to develop a list of potential hazards in the following basic hazard categories: impact, penetration, compression (roll-over), chemical, heat/cold, harmful dust, light (optical) radiation, and biologic. In addition to noting the basic location layout and reviewing any history of occupational illnesses or injuries, things to look for during the walk-through survey include:

* Sources of electricity.
* Sources of motion such as machines or processes where movement may exist that could result in an impact between personnel and equipment.
* Sources of high temperatures that could result in burns, eye injuries or fire.
* Types of chemicals used in the workplace.
* Sources of harmful dusts.
* Sources of light radiation, such as welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.
* The potential for falling or dropping objects.
* Sharp objects that could poke, cut, stab or puncture.
* Biologic hazards such as blood or other potentially infected material.

(person/position designated) will select appropriate PPE based upon any uncontrolled recognized Physical or Chemical Hazard (*See Appendix A for sample PPE hazard assessment).*

OSHA standard [1910.132(d)(2)](https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=9777) requires verification that the required workplace hazard assessment has been performed through a written certification identifying the workplace evaluated. Recertification shall be documented annually to verify job conditions and hazards have not substantially changed *(See Appendix B for sample written recertification).*

**2. General PPE Requirements**

If PPE is required when performing tasks in certain areas, the location will provide signage to indicate the PPE requirements. These signs will be posted at entrances to the applicable areas to remind employees, contractors, and visitors of the requirement to wear PPE while in this specific area (Ex: Signage that indicates the use of safety glasses in the wood shop). [agency name] will provide PPE, at no cost to the employees, that is required to comply with the provisions in OSHA 29 CFR 1910. When employees provide their own exempted protective equipment, the employer will verify its adequacy, proper maintenance, and sanitation of such equipment (See Appendix B for certification of personnel protective equipment hazard assessment).

**3. Specific PPE Requirements**

PPE needs are determined by the PPE hazard assessment, which considers hazards, current controls in place and additional protective requirements. All PPE must meet ANSI standards (Z87.1 eye and face protection, Z89.1 head protection, Z41.1 foot protection). The location will consider the following when evaluating PPE needs:

Eye and face protection when there is a potential to encounter hazards such as flying debris, chemical splashes, chemical fumes, molten metal, potentially infectious materials, and harmful light. Face shields used for splash protection must be used in conjunction with either safety glasses or goggles.

NOTE: Affected employees wearing prescription lenses must wear eye protection that incorporates the prescription in its design or protection that can be worn over.

Head protection may be required when there is a danger of injury from falling objects from above, fixed objects (i.e., low clearance), or electrical shock and burns.

Hand and arm protection may be required when skin may be exposed to harmful substances, chemical or thermal burns, electrical dangers, bruises, abrasions, cuts or punctures, fractures and amputations.

Foot and leg protection may be required when hazards such as falling or rolling objects, crushing or penetrating materials, exposure to hot or corrosive materials, and electrical are present in the workplace.

Body protection may be required when exposed to hot splashes from molten metals or other hot liquids, impact from tools or machines or hazardous chemicals.

Hearing protection may be required when an employee is exposed to industrial noise above 85 dBA or electrical work involving an arc flash hazard (in conjunction with hearing protection program).

**4. Care, Maintenance, Use and Limitations of PPE**

A. Care and Maintenance of PPE

1. Reusable PPE must be kept in plastic bags or storage lockers to promote cleanliness and prevent contamination or degradation.
2. Follow manufacturer’s instructions in cleaning and maintaining reusable PPE.
3. Inspect prior to each use and replace defective or damaged PPE immediately.
4. Discard defective or damaged PPE.
5. When employees provide their own exempted protective equipment, the employer will verify its adequacy, including proper maintenance, and sanitation of such equipment.

B. Use of PPE

1. (person/position designated) will ensure employees wear required and properly fitted PPE.
2. (person/position designated) will ensure PPE is used correctly for the intended application.
3. (person/position designated) will ensure employees understand how to inspect, don, remove, adjust, and wear PPE.

C. Limitations of PPE

1. (person/position designated) will ensure employees understand PPE is designed for specific hazards; however, PPE must be evaluated to ensure it protects against the hazard as intended.
2. (person/position designated) will ensure employees understand that defective or damaged PPE can have a negative impact, such as dirty or scratched safety glasses or face shields can limit vision.

**V. TRAINING**

**1. Initial and Annual Training**

(person/position designated) will ensure awareness training will be provided to all employees upon initial assignment and annually thereafter. Training will cover general PPE requirements and relevant location-specific PPE requirements. Awareness training documentation is maintained at [insert location] (*See Appendix C for sample training record form*).

**2. Retraining**

(person/position designated) will ensure retraining for employees is completed when changes in the workplace render previous training obsolete, or when the employee has not retained the required skills/knowledge needed.

**\*This program was produced by the Bureau of State Risk Management with reference to DSPS resource materials. It may be adapted to fit specific location requirements.**

**Additional Information:**

[**OSHA PPE Requirements**](https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9777)

[**OSHA PPE Publication**](https://www.osha.gov/Publications/osha3151.pdf)

**Appendix A**

**Personal Protective Equipment (PPE)**

**Hazard Assessment Analysis**

**Job Title or Task: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| **Part of Body** | **Hazard** | **Required PPE** | **Notes** |
| --- | --- | --- | --- |
| **Hands**  [Mandatory Hands Palms Protection Clip Art](http://www.clker.com/clipart-2725.html) | ❑ Penetration-sharp objects  ❑ Penetration-animal bites  ❑ Penetration-rough objects  ❑ Chemical(s) \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ❑ Extreme cold  ❑ Extreme heat  ❑ Blood or other potentially infectious materials  ❑ Electrical shock  ❑ Vibration-power tools  ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Leather/cut resistant gloves  ❑ Leather/cut resistant gloves  ❑ General purpose work gloves  ❑ Chemical resistant gloves;  ❑ Type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ❑ Insulated gloves  ❑ Heat/flame resistant gloves  ❑ Medical grade gloves  ❑ Insulated rubber gloves  ❑ Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ❑ Cotton, leather or anti-vibration gloves infectious  ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * If electrical work is performed, implement the necessary elements of an electrical safe work practice program. |
| **Eyes and Face**  [Mandatory Face Protection Clip Art](http://www.clker.com/clipart-2724.html)[Obligatory Protection Clip Art](http://www.clker.com/clipart-2731.html) | ❑ Impact-flying objects,  chips, sand or dirt  ❑ Nuisance dust  ❑ UV light-welding, cutting, torch brazing or soldering  ❑ Chemical-splashing liquid  ❑ Chemical-irritating mists  ❑ Hot sparks-grinding  ❑ Splashing molten metal  ❑ Glare/High Intensity lights  ❑ Blood or other potentially infectious materials  ❑ Laser operations  ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Safety glasses w/side shields  ❑ Glasses/goggles w/face shield  ❑ Impact goggles  ❑ Welding goggles  ❑ Welding helmet/shield w/safety glasses & side shields  ❑ Chemical goggles/ face shield  ❑ Chemical splash goggles  ❑ Safety glasses w/side shields  ❑ Glasses/goggles w/face shield  ❑ Safety goggles w/face shield  ❑ Shaded safety glasses  ❑ Laser spectacles or goggles  ❑ Leather welding hood  ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Ears**  [Mandatory Ear Protection Clip Art](http://www.clker.com/clipart-2726.html)  Page 1 of 2 | ❑ Exposure to noise levels  (>85 dBA 8-hour TWA)  ❑ Permissible noise exposures exceed allowed decibel level in [Table G-16](https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9735&p_text_version=FALSE#1910.95%28b%29%282%29)  ❑ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Ear muffs  ❑ Single-use ear plugs  ❑ Pre-formed or molded ear plugs | * If noise exposure exceeds 85 dBA 8-hour TWA, implement the necessary elements of a hearing conservation program. |
| **Respiratory**  **System** | ❑ Nuisance dust/mist  ❑ Welding fumes  ❑ Asbestos  ❑ Pesticides  ❑ Paint spray  ❑ Organic vapors  ❑ Acid gases  ❑ Oxygen deficient/toxic  or IDLH atmosphere  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Disposable dust/mist mask  ❑ Welding respirator  ❑ Respirator w/HEPA filter  ❑ Respirator w/pesticide  cartridges  ❑ Respirator w/paint spray  cartridges  ❑ Respirator w/organic cartridges  ❑ Respirator w/acid gas cartridges  ❑ SCBA or Type C airline respirator  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * If Respirators are required or voluntarily used, implement the necessary elements of a Respiratory Protection Program. * If permit confined space entry is required, implement the necessary elements of a confined space program. |
| **Feet**  [Mandatory Feet Protection Hard Boots Clip Art](http://www.clker.com/clipart-2727.html) | ❑ Impact-heavy objects  ❑ Compression-rolling or  pinching objects/vehicles  ❑ Hot, wet, or slippery surfaces  ❑ Penetration-sharp objects  ❑ Penetration-chemical  ❑ Splashing-chemical  ❑ Exposure to extreme cold  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Steel toe safety shoes  ❑ Leather boots or safety shoes  w/metatarsal guards  ❑ Slip resistant soles  ❑ Puncture resistant soles  ❑ Chemical resistant boots/covers  ❑ Rubber boots/closed top shoes  ❑ Insulated boots or shoes  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Head**  [Mantatory Hard Hat Over Head Clip Art](http://www.clker.com/clipart-2729.html) | ❑ Struck by falling object  ❑ Struck against fixed object  ❑ Electrical-contact with  exposed wires/conductors  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Hard hat/cap  ❑ Class A  ❑ Class B  ❑ Class C  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Body**  [Wear Overall Clip Art](http://www.clker.com/clipart-wear-overall.html)  Page 2 of 2 | ❑ Impact-flying objects  ❑ Moving vehicles  ❑ Penetration-sharp objects  ❑ Electrical-static discharge  ❑ Hot metal or sparks  ❑ Chemical(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ❑ Exposure to extreme cold  ❑ Unprotected elevated  walking/working surface  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ❑ Long sleeves/ apron/ coat  ❑ Traffic vest  ❑ Cut-resistant sleeves, wristlets  ❑ Static control coats/coveralls  ❑ Flame-resistant jacket/ pants  ❑ Lab coat or apron/sleeves  ❑ Insulated jacket, hood  ❑ Body harness and lanyard  ❑ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * If elevated work is performed, implement the necessary elements of a fall protection program. |

**CERTIFICATION: I certify that I personally performed the above Hazard Assessment on the date indicated. *This document is a Certification of the Hazard Assessment*.**

Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- |
| \*JOB TITLE: (a) | TASK OR EQUIPMENT: | \*HAZARD TYPE: (b) | BODY PART IMPACTED: | \*HAZARD POTENTIAL:(c) | PPE SELECTED: | DATE VERIFIED: | ASSESSED BY: |
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**ANNUAL RECERTIFICATION OF PERSONAL PROTECTIVE EQUIPMENT (PPE) HAZARD ASSESSMENTS**

**Appendix B**

**(a) Optional-Job Titles:** That uses the equipment or performs the task to simplify documentation of training.

**(b) Hazard Type:** IMP- Impact, PEN- Penetration, COM- Compression, CHM- Chemical (state type, i.e. acid, corrosive), HT- Heat, HD- Hazardous Dust,

LR- Light Radiation, BIO- Biologic.

**(c) Hazard Potential:** High, Medium, and Low. Weigh the severity of the potential injury with the likelihood of occurrence.

**Appendix C**

**PERSONAL PROTECTIVE EQUIPMENT:**

**EMPLOYEE TRAINING CERTIFICATION**

**Person performing training session:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of training:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Full name of each employee trained** (or attach a list)

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| --- | --- |
| **Print Name** | **Signature** |
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**Subjects of training (example: welding, or job title hazard assessment certification):\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Items covered during training:**

**\_\_\_ When PPE is necessary**

**\_\_\_ What PPE is necessary**

**\_\_\_ How to properly put on, take off, adjust, and wear PPE**

**\_\_\_ Limitations and useful life of PPE**

**\_\_\_ Proper care, maintenance, replacement, and disposal of PPE**

**\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Method of Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee understanding of the training was demonstrated by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**