University of Rochester
JOB HAZARD ASSESSMENT FORM

Instructions:

OSHA Standards 29 CFR 1910.132 - 1910.138 require employers to complete job hazard assessments (JHAs) for the tasks their employees perform. According to the University of Rochester’s Personal Protective Equipment Program, it is the responsibility of the employee’s Manager, Principle Investigator or Supervisor to perform a job hazard assessment to determine the biological, chemical and physical hazards, which are present in an employee’s workspace or hazards that are encountered during an employee’s normal duties and to provide any personal protective equipment that these assessments show a need for.

All University of Rochester Managers, Principle Investigators or Supervisors MUST complete a job hazard assessment for the tasks that are performed by their employees. To simplify this process, Environmental Health and Safety (EH&S) has provided this form, which can be printed and used to complete the job hazard assessments. EH&S is available to provide any assistance to Managers, Principle Investigators or Supervisors upon request at x5-3241. Filling out the form should not take any longer than 5-10 minutes at the most to complete. After completing the form, please sign the completed document and place it in your departmental file. EH&S will perform periodic JHA audits in randomly selected departments to ensure the JHA has been completed for each position in your department.

NOTE: OSHA also requires job hazard assessments whenever there is a significant change in the workplace or in an employee’s regular duties. University of Rochester Managers, Principle Investigators or Supervisors will need to complete a second job hazard assessment whenever these changes occur.

Job Title:____________________________________________  Date: ____________________

Functional Title: ______________________________________ (If different from job title)

Pay Grade: _____________      Position Code: _____________

Department: _________________________________________  Division: __________________

Printed name and signature of individual completing form:

Supervisor:  ________________________________________________

________________________________________________

Department Administrator: ______________________________________________________

____________________________________________________
ENVIRONMENTAL CONDITIONS

Check the description(s) of environmental conditions that this job is subject to in a normal workday. For every condition checked, section B (hazard and controls) must be completed. If an item is checked, the employee should refer to the indicated training program and/or safety plan.

Work is performed:

_______ outdoors and subject to varying climate conditions i.e., extreme heat/cold resulting in heat stress, exhaustion, or metabolic slow down such as hypothermia, exposure to heat resulting in burns, exposure to cold resulting in frost bite.

_______ in a noisy environment i.e., noise levels (>85 dBA 8 hr TWA) that result in hearing damage or inability to communicate safety-critical information. Examples include, but not limited to; staff feels the need to shout in order to be heard 2-3 feet away, exposure to generators, mechanical rooms, and use of power equipment such as drills, lawnmowers, nail gun, circular saw.

_______ near/with equipment causing vibrations.

_______ that poses potential exposure to hazards such as chemical, electrical, physical, biological etc., and requires wearing PPE (Personal Protective Equipment) to protect the eyes/face, head, respiratory system, feet and hands.

_______ involving potential exposure to human blood or body fluids. This includes contact with contaminated equipment or surfaces as well as working in patient-care areas, or having patient contact.

_______ with exposure to chemicals and/or particulates that require use of a respirator. Examples include, but not limited to Tb, formaldehyde, solvents, and any other airborne particulate or chemical that requires use of a PAPR, N95, negative pressure respirator or in an IDLH (Immediately Dangerous to Life and Health) environment that requires use of an SCBA or air line respirator.

_______ with biologicals, including but not limited to human specimens and research samples, for which a vaccine is available and offered by the University. Examples include, but are not limited to hepatitis B vaccine series, hepatitis A vaccine series, vaccinia virus vaccine, chicken pox virus vaccine, and rabies vaccine.

_______ with biologicals for which serum banking is recommended by the University.

_______ with non-human primates.

_______ with research animals or in Vivarium areas.

_______ at heights above 4 ft. that would require wearing PPE for fall protection.

_______ in areas classified as a permit required confined space i.e. has adequate size and configuration for employee entry, has limited means of access and/or egress, is not designed for continuous employee occupancy, contains or has the potential to contain a hazardous atmosphere, contains material that has the potential for engulfing an entrant, has inwardly converging walls or a floor that
slopes downward that could potentially trap or asphyxiate an employee, contains any other recognized serious safety/health hazard.

______ in dental settings assisting dentists by providing instruments, amalgams, processing x-rays, and clean up activities between patients.

______ requiring the use of special cleaning agents to disinfect medical care equipment or environmental surfaces.

______ with medical lasers. Medical lasers must only be set up and used by credentialed personnel. EH&S training program is to be used as a general training course for nurses and technicians towards Strong Health credentialing process.

______ in operating rooms. EH&S training course is to be used by OR staff in the hazard recognition and controls that are to be implemented to prevent injuries/exposures.

______ using powered industrial trucks such as forklifts or motorized pallet jacks. Personal must be certified by attending classroom training and demonstrating proficiency with the equipment.

SECTION B: DESCRIBE HAZARDS AND CONTROLS
(This section must be completed for each environmental condition checked above)

Describe job tasks that require personal protective equipment (PPE) and list the PPE necessary to perform the job task

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____________________________________________________________________________________
Please describe the job hazards (i.e. exposure to TB, blood, noise levels that exceed 85 dBA, hazardous chemicals that require respiratory protection. Etc.) and the associated health assessment necessary.

- Required/recommended vaccines (i.e. Hep B, rabies)
- Medical monitoring (for enrollment in the Hearing Conservation or Respiratory Protection Program)
- Fit testing for respirators (N95 or any tight fitting respirator)

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Please note: For any required/recommended vaccines, medical monitoring or fit testing that is listed, University Health Service or Occupational Medicine must be contacted.

OTHER COMMENTS:
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