Attachment A

State of Hawaii- University of Hawaii
HAZARD ASSESSMENT CERTIFICATION FOR FOOT PROTECTION

System or Campus:_____ Job Title of Employee: _____

Office, College, or Dept.:_____ Position Number: _____

Baseyard: _____ Evaluated By (Print Name:): _____

Work Unit: _____ Position:_____ Phone: _____

Position Location (island, city): _____ Duties: ❑ Mostly outdoors; ❑ Mostly indoors

Task, Activity, Hazard Source	Assessment of Hazard	Protection

Hazard Assessment: Type of foot protection required for tasks shown above:

Base: ❑ Impact/compression
- ❑ Metatarsal
- ❑ Electrical
- ❑ Sole Protection
- ❑ Water resistant boots

❑ Other_____

Additional: ❑ Low cut ❑ High cut - height: 6"____; 8"____; Other: _____
- ❑ Slip resistant
- ❑ Water resistant
- ❑ Heat resistant (soles)
- ❑ Chemical resistant
- ❑ Fire resistant (welding)

❑ Other _____

Person certifying assessment: _____ _____ _____

Print Name (if different from above) Signature Date

Copy to: System or Campus Human Resources Officer; and email to DHRD at hrdsafety@gmail.com

Updated August 2018

Hazard Assessment - Foot Protection Form

Occupational safety and health (OSH) rules require employers to identify hazards in the workplace that are likely to cause employee injuries or illness. The personal protective equipment (PPE) revision focuses on eye and face, head, foot, and arm protection. Although the process contained herein addresses foot protection, the basic hazard assessment process can be used for other areas. However, OSH rules emphatically state that PPE should not be used as a substitute for engineering, work practices, and/or administrative controls. PPE should be used in conjunction with these controls to provide employee safety and health in the workplace.

A general five (5) step procedure that is effective and not overly burdensome can be used to complete the requirements. The Hazard Assessment Certification (Foot Protection) form facilitates the process. The steps are:

1. Complete the location demographics section of the form. The rules call for assessment of a particular type of work activity at a given location. The assessment cannot be of all positions (or work duties) of a baseyard or department island or statewide. An assessment of same positions that have identical duties and responsibilities at a specific baseyard is permissible.

2. Perform assessment by initiating a walk-through of the work site to identify tasks (column 1) with potential sources of injury such as: carry 45-pound boxes, roll/move 55-gallon drums, repair/install junction boxes, inspect construction sites, clean animal shelters or mowing grass in open fields. List all tasks that indicate a source of potential foot injury.

   In column 2 indicate the corresponding hazard from column 1, such as: crush feet, crush feet/smash toes, electrical shock, smash feet/sole puncture, animal fecal infection/slippery/continuous wet feet and impact/flying rocks. (Crush/smash feet potential would indicate a need for metatarsal foot protection.)

3. For column 3, review data of each hazard (in column 2) to determine the type of foot protection required. For example, should the hazard potential be electric shock the foot protection required is electric resistance shoes. If glass and nails be identified as the hazard, puncture resistant shoes would be required.

4. Transpose table data to define hazard in the hazard assessment section of the form. Check-off all that apply. Specify additional foot protection requirements by checking the additional protection as required. Where high tops are required indicate the height of high top protection required – 6, 8 inches, or other if higher. Where requirements are not readily listed on the form use the "Other" segment of the form to list the protection required.

5. Complete certification requirements by printing the name of evaluator, and with the evaluator signing and dating the form. Identify on the price list the shoe vendor and shoe model(s) that meet the certification requirements. Transpose applicable data to the Safety Shoe Purchase Authorization form. Contact the Human Resources Office when there is a request to deviate from the price list.