**Personal Protective Equipment (PPE) Program**

**for**

(**Name of Company**)

**PURPOSE**

The purpose of this program is to protect the employees of (**Name of Company**) from the occupational hazards within the workplace by providing the proper personal protective equipment (PPE). Engineering and administrative controls shall be used as the primary controls for protecting employees. When additional protection is necessary, appropriate PPE shall be worn. This program includes PPE for eye, face, head, foot, and hand protection. If respirators and/or hearing protection are necessary, their use will be covered by the company’s Respiratory Protection Program and the Hearing Conservation Program, respectively.

**RESPONSIBILITY**

(**Name and Job Title of Person Responsible**) will be responsible for coordinating this program and ensure the following:

1. The hazard assessments are conducted.
2. Appropriate PPE is assigned.
3. Affected employees receive training.
4. Documentation is maintained.

Department supervisors should inform (**Name and Job Title of Person Responsible**) of changes in PPE requirements when there have been new procedures/processes identified that require different PPE. Department supervisors should also consult with (**Name and Job Title of Person Responsible**) prior purchasing any new PPE.

**PPE Hazard Assessments**

Each job/task performed will be assessed to determine foot, head, eye, face, and hand hazards present and the proper PPE that should be worn. The assessments will include observation of the following sources of hazards:

1. **Impact/Collision**: Flying particulate, falling or dropped materials, unsecured materials, low overhead clearance, vehicular activity, moving machine parts.
2. **Penetration**: Sharp objects, cutting tools, power and impact tools, sharp edges, animal or insect hazards, breakable materials.
3. **Compression**: round or tubular materials, stacked materials, vehicular activity, falling or dropped materials.
4. **Chemical:** Irritants, carcinogens, splashing, burns, flammable materials.
5. **Temperature Extremes**: Burns, sparks, splashes from molten materials.
6. **Harmful Dust**: Compressed air usage, grinding, chipping, polishing, sanding, cutting, blasting.
7. **Light Radiation**: Welding, cutting brazing, lasers, furnaces, lasers, high glare, high intensity light.

The PPE Hazard Assessment Certification shall be completed for each job/task and will serve as certification that a hazard assessment has been performed. The person conducting the hazard assessment will also survey jobs that are non-routine or periodic. In some cases these assessments may not be completed until the jobs are scheduled. Hazard assessments will be updated/evaluated whenever conditions or procedures change.

**CERTIFICATION OF PPE HAZARD ASESSMENT**

Employers are required to evaluate hazards in the workplace to determine if Personal Protective Equipment (PPE) is required. The employer must also certify, in writing, that a hazard assessment has been conducted. This worksheet can be used by an employer to help with the hazard assessment.

**Certification:**

This certifies that the workplace has been evaluated for hazards to determine if personal protective equipment is required.

Work Location/Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equipment/Task:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person certifying evaluation:

Signature: Date:

| **BODY PART** | **TYPES OF HAZARDS** | **PPE REQUIRED**  **(check all that apply)** |
| --- | --- | --- |
| EYES/FACE | * Dust * Projectiles * Twigs, stray objects * Chemicals * Bloodborne pathogens * Intense Light * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Safety glasses with side shields * Splash proof goggles * Faceshield * Filter Lenses * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| HEAD | * Falling objects * Fixed objects * Electrical Shock * Hair Entanglement * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Hardhat * Hairnet * Soft cap |
| HANDS | * Tools * Chemicals * Splinters * Poison ivy * Sharp objects * Extreme Heat or Cold * Blood * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Canvas gloves * Chemical resistant gloves * Nitrile gloves * Food prep gloves * Cut-resistant gloves * Heat resistant gloves * Cryogenic gloves * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| FEET/LEGS | * Impact * Falling or rolling objects * Sharp objects * Slippery or wet surfaces * Chemical * Extreme Heat or Cold * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Closed toe shoe * Closed toe boot * Safety toe shoe * Safety toe boot * Chemical resistant overboot * Slip resistant closed toe shoe * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| BODY | * Chemical splash * Chemical dust * Sharp objects * Scalding liquids * Heat * Cold * Abrasion * Radiation * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Long-sleeve shirt * Long pants * Kevlar chaps * Cotton coverall * Fire resistant coverall * Tyvek coverall * Chemical resistant coverall * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |