Personal Protective Equipment (PPE)

I. PURPOSE
This program provides for the proper selection and use of Personal Protective Equipment (PPE) at the [insert facility name].

II. SCOPE
A PPE assessment must be conducted in all non-office environment work areas to identify physical and chemical hazards warranting PPE use when engineering, work practice and administrative controls are not feasible. PPE is barrier clothing or gear worn to protect the eyes, face, head, hands, feet, and body from identified hazards.

III. RESPONSIBILITIES/ROLES
[insert job title] Reviews the requirements of the PPE standard, determines applicability to the site and assists in implementing the program requirements for this facility.

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
[insert job title(s)] will perform, document and certify that a PPE hazard assessment to identify hazards for each work task(s) has been conducted. [insert job title(s)] will also review this 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 are introduced.

[insert job title(s)] will select appropriate PPE based upon any recognized Physical or Chemical Hazard.
[a sample PPE Hazard Assessment is attached]

2. General PPE Requirements
If PPE is required when performing tasks in certain areas, the facility shall develop signage to indicate the PPE requirements. These signs should 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.
[e.g. Signage that indicates the use of safety glasses in the wood shop]

3. Specific PPE Requirements
PPE needs are determined by the PPE hazard assessment, which considers hazards, current controls in place and additional protective requirements.

The facility 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 and harmful light. Face shields used for splash protection must be used in conjunction with either safety glasses or goggles.
**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.

**Torso 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.

### 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. Replace defective or damaged PPE immediately.

4. Discard defective or damaged PPE.

**B. Use of PPE**

1. [insert responsible parties] will ensure employees wear required and properly fitted PPE.

2. [insert responsible parties] will ensure PPE is used correctly for the intended application.

3. [insert responsible parties] will ensure employees understand how to inspect, don, doff, adjust and wear PPE.

**C. Limitations of PPE**

1. [insert responsible parties] 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. [insert responsible parties] 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**

[insert responsible parties] will ensure awareness training will be provided to all employees upon initial assignment and annually thereafter. Training will cover general PPE requirements and relevant facility-specific PPE requirements. Awareness training documentation is maintained at [insert location or electronic file path][a sample training form is attached]
2. Retraining

[Insert responsible parties] will ensure retraining for employees must be completed when changes in the workplace render previous training obsolete, or when the employee has not retained the required skills/knowledge needed.
Sample PPE Hazard Assessment/Certification Form
&
Employee Training Certification
# Personal Protective Equipment (PPE)
## Hazard Assessment Survey and Analysis

The following hazards have been noted:

<table>
<thead>
<tr>
<th>Part of Body</th>
<th>Hazard</th>
<th>Required PPE</th>
<th>Notes</th>
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<tbody>
<tr>
<td><strong>Hands</strong></td>
<td>■ Penetration - sharp objects</td>
<td>■ Leather/cut resistant gloves</td>
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<td></td>
<td>■ Penetration - animal bites</td>
<td>■ Leather/cut resistant gloves</td>
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<td></td>
<td>■ Penetration - rough objects</td>
<td>■ General purpose work gloves</td>
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<td></td>
<td>■ Chemical(s) ____________</td>
<td>■ Chemical resistant gloves;</td>
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<td></td>
<td>■ Extreme cold</td>
<td>■ Type ________________</td>
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<td></td>
<td>■ Extreme heat</td>
<td>■ Insulated gloves</td>
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<td>■ Blood or other body fluids</td>
<td>■ Heat/flame resistant gloves</td>
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<td>■ Electrical shock</td>
<td>■ Latex or nitrile gloves</td>
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<td>■ Vibration - power tools</td>
<td>■ Insulated rubber gloves;</td>
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<td>■ Other ___________________</td>
<td>■ Type ________________</td>
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<td>■ Cotton, leather or anti-vibration gloves</td>
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<td>■ Other __________________</td>
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<tr>
<td><strong>Eyes and Face</strong></td>
<td>■ Impact-flying objects, chips, sand or dirt</td>
<td>■ Safety glasses w/side shields</td>
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<td></td>
<td>■ Nuisance dust</td>
<td>■ Glasses/goggles w/face shield</td>
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<td></td>
<td>■ UV light-welding, cutting, torch brazing or soldering</td>
<td>■ Impact goggles</td>
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<td>■ Chemical-splashing liquid</td>
<td>■ Welding goggles</td>
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<td>■ Chemical-irritating mists</td>
<td>■ Welding helmet/shield w/safety glasses &amp; side shields</td>
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<td></td>
<td>■ Hot sparks-grinding</td>
<td>■ Chemical goggles/ face shield</td>
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<td></td>
<td>■ Splashing molten metal</td>
<td>■ Chemical splash goggles</td>
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<td>■ Glare/High Intensity lights</td>
<td>■ Safety glasses w/side shields</td>
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<td>■ Laser operations</td>
<td>■ Glasses/goggles w/face shield</td>
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<td>■ Other ____________________</td>
<td>■ Safety goggles w/face shield</td>
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<td>■ Shaded safety glasses</td>
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<td>■ Laser spectacles or goggles</td>
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<td>■ Other __________________</td>
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<td><strong>Ears</strong></td>
<td>■ Exposure to noise levels (&gt; 85 dBA 8-hour TWA)</td>
<td>■ Ear muffs, plugs or ear caps</td>
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<td>■ Exposure to sparks</td>
<td>■ Leather welding hood</td>
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<td>■ Other ____________________</td>
<td>■ Other ________________</td>
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<td>Part of Body</td>
<td>Hazard</td>
<td>Required PPE</td>
<td>Notes</td>
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| **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 Respirator Protection Program |
| **Feet** | □ Impact-heavy objects  
□ Compression-rolling or pinching objects/vehicles  
□ Slippery or wet surface  
□ 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** | □ 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** | □ 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_____________ |

**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: _____________
**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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<th>Name</th>
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Subjects of training (example: welding, or job titles if on 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: __________________________