

PURDUE UNIVERSITY

Integrated Safety Plan Self-Audit

[The Integrated Safety Plan \(ISP\)](#) is Environmental Health and Safety's (EHS's) Safety and Health Management System to promote safety and compliance throughout the campus community. Our goal is to have every department represented by a Certified Safety Program. The desired outcomes of the ISP are to:

1. Integrate environmental health and safety into Purdue's learning, discovery, and engagement mission
2. Reduce risk of harm to all Purdue faculty, staff, students, and contractors
3. Promote individual accountability for safety and regulatory compliance
4. Ensure a proactive system is in place to address environmental health and safety issues
5. Improve the level and consistency of regulatory compliance
6. Reduce employee injury rates through timely and effective communication and training

As a reward for participation, a **Certified Safety Program** will be indemnified from environmental health and safety regulatory fines if they continue to act in good faith. A certification renewal is required annually. Integrated Safety Plan certification includes at least the following elements:

1. Developing an area safety committee
2. Establishing communication channels for safety issues
3. Demonstrating upper administrative support for safety
4. Conducting self-assessments using the self-audit checklist for labs, shops, conference rooms, etc. (within 6 months of the audit date)
5. Abating deficiencies found during the self-audit
6. Successfully completing an EHS safety program evaluation

For more information about the elements of an ISP certification, review the ISP Preparation Document located on the ISP page of the EHS website.

The **Self-Audit Checklist** is a tool used to evaluate safety and compliance for your area. A checklist is required for all building spaces, and work performed, that is assigned to or under control of the department being certified. Please adhere to the following guidelines when completing the self-audit.

- The person completing the self-audit should be knowledgeable about the operations of the space, the work performed by the employees, and have the authority to affect positive changes. Appropriate people include the PI, supervisor, lab manager, or shop manager, and designated staff member or research student.
- The person assigned to complete the self-audit checklist must sign and date the last page of the audit form
- The PI or supervisor must sign and date the last page of the audit form to affirm the following:
 - Their responsibility for the area
 - They have reviewed the self-audit
 - Any deficiencies identified will be corrected in a timely manner
- Ensure Self-Audit Checklists submitted for EHS review have been completed within six (6) months of the on-site evaluation date.
- Any issues discovered shall have a corrective action assigned to address the issue
- All corrective actions shall be documented in the Corrective Actions section recording the following:
 - Section Number
 - Corrective Action Taken
 - Date Completed
 - Person who completed the corrective action
- Corrective actions shall be completed before submission unless there is a valid reason that they are not (contact your EHS Advisor for assistance)
- Feel free to write any notes or clarifications in the comment sections

If you have any questions about the self-audit, certifying your safety program, or ISP contact your EHS Advisor or any EHS Advisor found on our website.

Self-Audit Date: _____

Person Completing Audit: _____

Building: _____ Room(s): _____ PI or Supervisor: _____

START HERE, PLEASE READ ALL SECTIONS, SKIP ONLY WHEN PROMPTED.

If this self-audit is for offices, common/communal areas (i.e., kitchenettes, conference rooms), computer labs, or storage rooms that do not involve the handling of, use of, or exposure to hazardous chemicals, equipment, machinery, animals, biological or radiological agents you may stop after completing section 11. **If you are unsure contact a safety committee member or EHS Advisor.**

Type of Room or Area:

☐ Laboratory ☐ Mechanical Room ☐ Shop ☐ Offices ☐ Common ☐ Computer ☐ Storage
☐ Other: _____

Please do not edit or delete any sections. The PI/Supervisor must sign and date last page.

1. Emergency Preparedness and Fire Protection

	Y	N	NA
1.1 Are all employees familiar with the general emergency procedures listed below?			
• Cease operations (contain and control if it can be done safely) and leave the area • Evacuate others by verbal command and/or activating the fire alarm • Call 911 and be available to emergency responders if you have knowledge of the emergency and area			
1.2 Has a copy of the Building Emergency Plan or a link to its electronic version been distributed to all employees?			
1.3 Are all employees familiar with site specific emergency procedures? (Special and unique hazards have been identified and post evacuation or shelter procedures have been developed)			
1.4 Are fire extinguishers unobstructed?			
1.5 Are exits identified when not immediately apparent?			
1.6 Are materials stored at least 18 inches below sprinkler heads or at least 24 inches below ceiling in non-sprinkler areas?			
1.7 Are fire doors kept closed, unless designed to self-close when the fire alarm is triggered?			

2. Housekeeping

	Y	N	NA
2.1 Are aisles and means of egress clear of obstructions?			
2.2 Are doorways and hallways free of obstructions to allow for clear visibility and exit?			
2.3 Are floors free of oil, grease, liquids, broken and uneven surfaces, or sharp objects?			
2.4 Is this area uncluttered (e.g. there is minimal storage of combustible materials and emergency egress is not impeded)?			
2.5 Are aisles or walkways near moving or operating machinery and welding operations arranged so employees will not be subjected to hazards?			
2.6 Is trash (e.g. sharps, used toner, empty chemical containers, and broken glass) put into proper containers for disposal?			
2.7 Are heavier items stored on lower and middle shelves of storage rooms and cabinets?			
2.8 Is material stored in a manner to prevent it from tipping, falling, collapsing, rolling, or spreading?			

3. General Electrical Safety

	Y	N	NA
3.1 Are electrical cords in good condition?			
3.2 Is the ground pin securely in place on three pin wire plugs?			
3.3 Are multi-outlet devices (e.g. power strip, surge protector) labeled with a UL Certification?			
3.4 Are extension cords only for temporary use?			
3.5 Are extension cords rated for the equipment being powered?			
3.6 Are extension cords and/or multi-outlet devices used without being connected to each other?			
3.7 Are electrical outlets properly loaded and/or proper strain relief provided for suspended wiring?			
3.8 Are GFCI (Ground Fault Circuit Interrupter) outlets used within 6 feet of kitchenette and bathroom sinks, or other wet operations?			
3.9 Are all wires insulated?			
3.10 Are wire connections and junction boxes covered?			
3.11 Are all electrical boxes knockouts (<i>circular covering removed to create a hole for wires, cables, or conduit</i>) in place?			
3.12 Are all electrical panels locked?			
3.13 Do all electrical panels have at least 30" wide and 36" deep, unobstructed space in front of panel?			

4. 3D Printers Safety

	Y	N	NA
4.1 Are there 3D Printers in use in this area?			
<i>If you answered "No" to question 4.1, you may proceed to section 5.</i>			
4.2 Did EHS review the area and use of the 3D Printers?			
<i>If you answered "No" to question 4.2, contact EHS.</i>			

5. Step Stool and Ladder Safety

	Y	N	NA
5.1 Are step stools, rolling stairs, ladders, or rolling ladders used?			
<i>If you answered "No" to question 5.1, you may proceed to section 6.</i>			
5.2 Are they in good condition with safety labeling in place?			
5.3 Are wood ladders free of opaque coverings?			
5.4 Are there non-slip feet on the base of ladders and step stools?			
5.5 Are ladders stored so they are stable and secure from falling or sliding?			
5.6 Have employees received EHS approved training on safe use and inspection of their ladders?			

6. Contractor Safety

	Y	N	NA
6.1 Do individuals from other departments (i.e., operations & maintenance, building services) consistently or periodically perform work in this area?			
6.2 Are employees from other departments that perform work in this area adequately informed (i.e., orientation, signage) of the area's hazards?			
6.3 Do individuals from outside companies (i.e., a contractor hired to complete project) perform work in this area consistently or periodically?			
<i>If you answered "No" to question 6.3, you may proceed to section 7.</i>			
6.4 Are outside companies provided with safety orientation on area hazards prior to performing work?			

7. Occupational Biological Hazards: [Bloodborne Pathogen Exposure Control Plan](#)

	Y	N	NA
7.1 Do employees have the potential to have occupational exposure to human blood or human bodily fluids?			
<i>If you answered "No" to question 7.1, you may proceed to section 8.</i>			
7.2 Is regulated waste contained and managed per the Bloodborne Pathogen Exposure Control Plan ?			
7.3 Are these employees given annually required Bloodborne Pathogen Training?			

8. General Chemical Safety

	Y	N	NA
8.1 Are chemical containers appropriate and in good condition?			
8.2 Are chemical containers correctly labeled?			
8.3 Are chemicals stored in an orderly manner?			
8.4 Are incompatible chemicals segregated by hazard, distance, or secondary containment?			
8.5 Are chemicals stored in a manner to prevent them from being broken or spilled?			
8.6 Is the combined volume of flammable liquids stored outside flammable safety cabinets less than 10 gallons?			
8.7 Are gas cylinders, tubing, and fittings properly secured?			
8.8 Is contaminated protective clothing properly disposed of or laundered?			

9. Eye Wash & Safety Shower Safety

	Y	N	NA
9.1 Does this space have an emergency eyewash or safety shower?			
<i>If you answered "No" to question 9.1, you may proceed to section 10.</i>			
9.2 Is there unobstructed access to eyewashes and safety showers?			
9.3 Are plumbed eyewashes flushed weekly to verify flow and remove sediment?			

10. Personal Protective Equipment (PPE): [Personal Protective Policy](#)

	Y	N	NA
10.1 Are all PIs, supervisors, and employees familiar with and have access to the PPE Policy?			
10.2 Has a Certification of Hazard Assessment been performed by task or position/title or location ?			
10.3 Has PI/supervisor completed and signed a task or position/title or location Certification of Hazard Assessment?			
10.4 Are Certifications of Hazard Assessment readily available to all employees?			
10.5 Are there any recognized hazards that require PPE (e.g. chemical, biological, radiological, mechanical, electrical, laser, working from heights, heat, cold, stored mechanical energy, flying debris, falling objects, etc.)?			
<i>If you answered "No" to question 10.5, you may proceed to section 11.</i>			
10.6 Have employees been trained on the correct use, care, donning, doffing, and limitations of PPE for tasks/assignments?			
10.7 Are PPE training records for each employee available for review?			

Areas require chemical safety training compliance under either the Hazard Communication Program OR Chemical Hygiene Plan (CHP).

11. Hazard Communication: [Hazard Communication Program](#)

Y	N	NA
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If this is exclusively a Chemical Hygiene Plan work area, you may proceed to section 12.

11.1 Is there a Designated Trained Individual (DTI) assigned to this area?

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11.2 Is at least Hazard Communication Awareness Training provided initially and documented?

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11.3 Is this an office or administrative area where all chemical use for the purpose intended by the manufacturer?

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If you answered "Yes" to question 11.3, you may proceed to section 13.

11.4 Do all containers have complete and legible Globally Harmonized System (i.e., pictograms) compliant labels?

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11.5 Is [Hazard Communication comprehensive training](#) provided and documented annually?

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11.6 Is a Safety Data Sheet (SDS) for every chemical readily available to all employees?

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11.7 Is there a current Chemical Inventory for every chemical that is updated at least annually?

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11.8 Do employees receive training when new chemical hazards are introduced that is documented?

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11.9 Is the area specific Hazard Communication Program readily available?

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11.10 Is the area specific Hazard Communication Program with the implementation document ([Appendix IV](#)) readily available?

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12. Chemical Hygiene Plan (CHP): [Chemical Hygiene Plan](#)

Y	N	NA
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CHP training is required for the "laboratory use of hazardous chemicals" (i.e., handling or use of such chemicals where all the following conditions are met):

- I. Chemical manipulations are carried out on a laboratory scale
- II. Multiple chemical procedures or chemicals are used
- III. The procedures involved are not part of a production process, nor in any way simulate a production process; and
- IV. "Protective laboratory practices and equipment" are available and in common use to minimize the potential for employee exposure to hazardous chemicals.

12.1 Based on the above criteria, does this space require CHP training and/or do employees working in this space have CHP training?

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If you answered "No" to question 12.1, return to section 11.

12.2 Is a Safety Data Sheet (SDS) for every chemical readily available to all employees?

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12.3 Do all employees receive lab-specific Chemical Hygiene Plan training and have access to their lab-specific CHP?

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12.4 Do employees receive training when new chemical hazards are introduced that is documented?

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12.5 Is lab-specific Chemical Hygiene Plan training documented by one of the methods below **and** lab-specific SOPs?

[\[Lab-Specific Training Certification form\]](#) – OR – [\[Lab Safety Fundamentals online training\]](#)

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12.6 Is a [Laboratory Door Posting](#) with emergency contacts and document locations posted at laboratory entrance doors?

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12.7 Is a key/legend prominently posted or readily available for labels using abbreviations or formulas?

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12.8 Are all volatile toxic and/or flammable material manipulations done in a properly working fume hood that is tested annually?

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12.9 Do employees maintain laboratory coat hygiene by storing them where their exterior does not touch other garments or spread chemical contamination?

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13. Collaborative/Interdisciplinary Research Safety

Y	N	NA
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13.1 Does this space primarily support collaborative or interdisciplinary research activities?

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13.2 Are there individuals performing research activities in this space employed by another department?

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If you answered "No" to question 13.2, you may proceed to section 14.

13.3 Has orientation training for operations in this area been provided for these individuals?

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13.4 Has required regulatory safety training been provided and documented for these Individuals?

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13.5 Are ISP self-audit checklists for this space shared with these individuals and/or their department(s) when requested?

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13.6 Are there mechanisms and hierarchies (e.g., reprimands, escalation, stop work, loss of lab privileges) to address safety concerns and enforce safety compliance with these individuals?

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14. Shipping Hazardous Material

Y	N	NA
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14.1 Is there a need to ship materials such as laboratory chemicals, dry ice, radioactive materials, compressed gases, biological agents or samples, energetics, equipment or instruments that contain hazardous materials, lithium or other rechargeable batteries?

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If you answered "No" to question 14.1, you may proceed to section 15.

14.2 Are employees aware of [eShipGlobal](#) for shipping hazardous material or has an EHS hazardous materials chemist been contacted for these shipments?

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15. Biological Hazards (Laboratory): [Biological Safety Manual](#)

Y N NA

15.1 Are biohazardous agents (those that can cause disease or illness) used in the laboratory?			
<i>If you answered "No" to question 15.1, you may proceed to section 16.</i>			
15.2 Have employees been notified of specific handling procedures associated with biohazards used in their work area?			
15.3 Do laboratory employees know what to do in the event of a biohazard exposure (puncture, cut, splash, or inhalation)?			
15.4 Are all biologically hazardous materials secured from unauthorized use or removal?			
15.5 For biohazardous agents that can cause disease or illness in humans, are employees given annually required Bloodborne Pathogen Training?			

16. Chemical/Biological Waste (Non-Radioactive): [Hazardous Waste Disposal Guidelines](#)

Y N NA

16.1 Does this location generate or store non-municipal waste? Non-municipal waste may include, but is not limited to, undesired or outdated chemicals, spent chemical solutions, chemically contaminated debris or media, electronic devices, fluorescent lamps, batteries, and biological materials.			
<i>If you answered "No" to question 16.1, you may proceed to section 17.</i>			
16.2 Are containers appropriate, clean, leak-proof, safe for transportation, labeled, and closed tightly when not in use?			
16.3 Are chemical waste containers labeled with an orange Hazardous Waste Disposal tag?			
16.4 Do chemical waste container labels list the constituents?			
16.5 Do chemical waste container labels have the hazards marked?			
16.6 Are incompatible wastes segregated by hazard, distance, or secondary containment?			
16.7 Are LC and HPLC waste containers fitted with engineered caps or lids to prevent organic solvents from evaporating?			
16.8 Is the volume of liquid chemical waste stored less than 35 gallons?			
16.9 Is the volume of hazardous waste stored less than 55 gallons or 1 quart of acutely toxic waste?			
16.10 Is a Chemical/Biological Waste Request submitted to EHS in a timely manner for hazardous waste disposal?			
16.11 Is biological waste contained and managed per the Biological Safety Manual ?			
16.12 Are all waste laboratory chemicals (including buffers, salts, sugars, etc.) submitted for chemical waste pick-up?			
16.13 Is all e-waste sent to Purdue Warehouse and Surplus to be processed for recycling?			
16.14 Does this location practice waste minimization?			

17. Mercury Safety: [Mercury Reduction Policy](#)

Y N NA

17.1 Does this location have or use elemental mercury in thermometers, devices, or other apparatus?			
<i>If you answered "No" to question 17.1, you may proceed to section 18.</i>			
17.2 Are employees familiar with the Chemical and Laboratory Safety Committee's Mercury Reduction Policy?			

18. Laser Safety: [Laser Safety Guidelines](#)

Y N NA

18.1 Does this area have or use Class 3B or 4 lasers?			
<i>If you answered "No" to question 18.1, you may proceed to section 19.</i>			
18.2 Have all Class 3B or 4 laser projects been approved by the campus Laser Safety Officer?			
18.3 Are laser use areas identified by the proper signage per ANSI Z136.1?			
18.4 Do employees associated with the laser meet the laser safety training requirements ?			
18.5 Are required SOPs written and accessible to authorized laser users?			
18.6 Is the laser beam path entirely enclosed (i.e., absolutely no portion is exposed)?			
<i>If you answered "Yes" to question 18.6, you may proceed to section 19.</i>			
18.7 Are laser beams appropriately terminated and confined to a defined and controlled Nominal Hazard Zone (NHZ)?			
18.8 Is the appropriate Laser Safety Eyewear available, in good shape, and always used by employees within the NHZ?			

19. Radiation Safety: [Radiation Safety Manual](#)

Y N NA

19.1 Does area have radioactive material (sealed or unsealed sources), or radiation-producing equipment?			
<i>If you answered "No" to question 19.1, you may proceed to section 20.</i>			
19.2 Has the project been approved by the campus Radiation Safety Committee?			
19.3 Do employees using radioactive material or radiation producing equipment meet radiation safety training requirements ?			
19.4 Is the laboratory door posted for radioactive materials use or radiation producing equipment?			
19.5 Are all containers of radioactive materials and wastes properly labeled and secured from unauthorized use or removal?			
19.6 Are eating and drinking policies followed as designated by the room classification sticker posted on the door?			
19.7 Do radioactive material use records, contamination surveys, and inventory updated and maintained for inspection?			
19.8 Are work surfaces covered with absorbent paper or are trays used for unsealed sources (i.e., liquids, powders, etc.)?			

20. Refrigerant Compliance: [Refrigerant Regulations Compliance Program \(CFC Compliance\)](#)

Y N NA

20.1 Are refrigerants, ozone depleting substances, or Chlorofluorocarbons (CFC) used, dispensed, stored, or reclaimed?

If you answered "No" to question 20.1, you may proceed to section 21.20.2 Has EHS's Hazardous Materials section been contacted to determine if [Refrigerant Regulations Compliance Program](#) requirements are being met?**21. Equipment and Machinery Safety*****(Includes equipment or machines in any location, including laboratories, which have electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy sources that can be hazardous to workers)***

Y N NA

21.1 Is there equipment or machinery located and operated in this area or any location where employees work?

If you answered "No" to question 21.1, you may proceed to section 22.

21.2 Do employees use the equipment or machinery in this area or at any other location?

21.3 Do all employees who are allowed to use the equipment or machinery have proper training?

21.4 Do users wear the appropriate PPE as determined by hazard assessment?

21.5 Are users trained to not wear loose-fitting clothing, hair, or jewelry around moving parts of equipment or machinery?

21.6 Does all equipment or machinery have safeguards (i.e., covers, guards, shields, interlocks, screens, etc.) in place?

21.7 Do the safeguards permit safe and comfortable operation of equipment or machinery?

21.8 Is equipment or machinery anchored to prevent movement during operation?

21.9 Is there a process for out-of-service equipment or machinery?

21.10 Can equipment or machinery be serviced (cleaned and oiled) without removing the safeguards?

If you answered "No" to question 21.10, section 31 is probably applicable. Contact EHS if you are unsure.**22. Hearing Conservation: [Hearing Conservation Program](#)**

Y N NA

22.1 Are employees exposed to high noise levels (i.e., noise levels that interfere with normal vocal communication)?

If you answered "No" to question 22.1, you may proceed to section 23.

22.2 Did EHS evaluate the noise exposure?

If you answered "No" to question 22.2, contact EHS.

22.3 Are high noise areas, equipment, and machinery posted with warning signs or labels?

22.4 Is EHS-approved hearing protection available to employees and worn when needed?

If you answered "No" to question 22.4, contact EHS.

22.5 Did EHS conclude that the noise exposure requires employees to enroll in the Hearing Conservation Program?

If you answered "No" to question 22.5, you may proceed to section 23.

22.6 Do employees receive annual hearing conservation training?

22.7 Do employees have an annual audiogram?

23. Respiratory Protection: [Respiratory Protection Program](#)

Y N NA

23.1 Are there respiratory hazards (harmful dusts, fogs, fumes, mists, gases, smokes, sprays or vapors) not mitigated by engineering controls (e.g., fume hood, local exhaust, etc.)?

If you answered "No" to question 23.1, you may proceed to section 24.

23.2 Did EHS evaluate the respiratory hazards?

If you answered "No" to question 23.2, contact EHS.23.3 Did employees who voluntarily wear a N95 respirator return a signed and dated copy of the [Information for Employees Using Respirators When Not Required under the Standard](#) (29 CFR 1910.134 Appendix D) to EHS Industrial Hygiene?

23.4 Did EHS conclude the respiratory hazard exposure requires employees to enroll in the Respiratory Protection Program?

If you answered "No" to question 23.5, you may proceed to section 24.

23.5 Do employees who are enrolled in the Respiratory Protection Program receive a medical exam when required and a respirator fit test as required?

24. Confined Space: [Confined Space Program](#)

Y N NA

24.1 Is a confined space (e.g. tank, silo, manhole) present in this area and/or do employees enter confined spaces during their work in this area or any other areas?

If you answered "No" to question 24.1, you may proceed to section 25.24.2 Have employees completed [Confined Space Awareness Training](#)?

24.3 Do employees enter confined spaces during their work in this area or any other area?

If you answered "No" to question 24.3, you may proceed to section 25.

24.4 Have employees and their supervisors who enter confined spaces received Confined Space Entry Training from EHS?

24.5 Can employees classify confined spaces and identify conditions that change a space to a permit-required confined space?

This section is continued on the next page.

	Y	N	NA
24.6 Are employees familiar with pre-entry procedures and do they follow them, including atmospheric testing when required?			
24.7 Are appropriate safeguards, such as attendants or physical barriers used for manholes and street openings?			
24.8 Is all necessary safety equipment (e.g. testing, monitoring, rescue and retrieval, communication, and/or personal protective equipment) available, properly used, inspected, and maintained?			
24.9 Do employees enter permit-required confined spaces?			
<i>If you answered "No" to question 24.9, you may proceed to section 25.</i>			
24.10 Is a list of permit-required confined space locations available that identifies each location's hazards?			
24.11 Is the permit system outlined in Purdue's Confined Space Program used properly?			

25. Pesticide Safety

	Y	N	NA
25.1 Does an employee work or perform research related tasks where agricultural pesticides are used at a farm, forest, nursery, or in an enclosed space (e.g., greenhouse) in the last 30 days?			
<i>If you answered "No" to question 25.1, you may proceed to section 26.</i>			
25.2 Does that employee receive annual EPA Worker Protection Standard training?			

26. Fall Protection: [Fall Protection Program](#)

	Y	N	NA
26.1 Do employees work 4 feet or more above unguarded walking surfaces, including use of fixed ladders 24 feet or higher?			
<i>If you answered "No" to question 26.1, you may proceed to section 27.</i>			
26.2 Have employees received EHS approved Fall Protection Training?			
26.3 Is fall protection equipment inspected prior to each use?			
26.4 Is an inventory of all fall protection equipment maintained and updated annually?			
26.5 Are personal fall protection inspections completed annually using Appendix A and records kept for at least 2 years?			
26.6 Is personal fall rescue plan established prior to performing work at height?			

27. Mobile Elevating Work Platform: [Mobile Elevating Work Platform \(MEWP\) Safety Program](#)

	Y	N	NA
27.1 Do students or employees operate, work in, or work on MEWPs (e.g. cherry picker, scissor lift, or boom lift)?			
<i>If you answered "No" to question 27.1, you may proceed to section 28.</i>			
27.2 Have operators and others (supervisors, ground control, & attendants) completed training approved by EHS?			
27.3 Do operators and others receive MEWP model-specific familiarization on the particular model they will be operating?			
27.4 Is training and inspection documentation retained for operators and others?			
27.5 Are MEWP periodically serviced by a trained technician with records on site and accessible for review?			
27.6 Is personal fall protection required for operators on any MEWPs (e.g. cherry picker, scissor lift, or boom lift)?			
<i>If you answered "No" to question 27.6, you may proceed to section 28.</i>			
27.7 Have operators completed fall protection training approved by EHS?			
27.8 Has fall protection equipment been approved by EHS or EHS-approved competent person?			

28. Cranes and Hoist Safety

	Y	N	NA
28.1 Do students or employees operate any powered crane or hoist?			
<i>If you answered "No" to question 28.1, you may proceed to section 29.</i>			
28.2 Have all operators successfully completed a formal instruction course and operator evaluation per EHS?			
28.3 Do all operators have current (within 3 years) training completion certificates?			
28.4 Are incidents involving cranes and hoists reported and operators re-evaluated?			
28.5 Are all cranes, hoists, and inspected before use or each shift?			
28.6 Are cranes and hoists periodically serviced by a trained technician with records on site and accessible for review?			
28.7 Are all slings, chains, and/or below the hook devices inspected before each use?			
28.8 Are all slings, chains, and/or below the hook devices approved for lifting?			

29. Powered Industrial Trucks: [Powered Industrial Truck Safety Program](#)

	Y	N	NA
29.1 Do students or employees operate, work in, or work on any powered industrial trucks (at location or other locations)?			
<i>If you answered "No" to question 29.1, you may proceed to section 30.</i>			
29.2 Have all operators successfully completed an EHS approved formal instruction course and driver evaluation?			
29.3 Do all operators have current (within 3 years) training completion certificates?			
29.4 Are incidents involving powered industrial trucks reported and operators re-evaluated?			
29.5 Are powered industrial trucks inspected before use or each shift utilizing approved EHS form?			
29.6 Are powered industrial trucks periodically serviced by a trained technician with records on site and accessible for review?			
29.7 Is there an area designated for fueling or charging powered industrial trucks?			

30. Heavy Equipment and Agricultural Equipment Safety

	Y	N	NA
30.1 Do students or employees operate, work in, or work on heavy equipment (e.g. backhoes, skid steers, front loaders, etc.) or agricultural equipment (e.g. tractors, harvesters, implements, etc.)?			
<i>If you answered "No" to question 30.1, you may proceed to section 31.</i>			
30.2 Are all operators and others properly trained based on EHS approved training?			
30.3 Are all operators trained in the proper use of Roll-Over Protection Structures (ROPS)?			
30.4 Does equipment operated on public roads have slow moving vehicle signage?			
30.5 Do all operators inspect and use the required safety devices and guards located on the specific equipment in use?			

31. Control of Hazardous Energy: [Control of Hazardous Energy Program \(Lockout/Tagout\)](#)

<i>(Includes equipment or machines in any location, including laboratories, which have electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy sources that can be hazardous to workers)</i>	Y	N	NA
31.1 Do you have any equipment or machinery that requires maintenance or service to be performed?			
<i>If you answered "No" to question 31.1, you may proceed to section 32.</i>			
31.2 Do exposed employees receive Affected Employee Lockout/Tagout training?			
31.3 Are any employees authorized to maintain or service any equipment or machinery?			
<i>If you answered "No" to question 31.3, you may proceed to section 32.</i>			
31.4 Do authorized employees receive Authorized Employee Lockout/Tagout training from EHS?			
31.5 Do authorized employees have written procedures for isolating each piece of equipment or machinery they maintain or service from all energy sources?			
31.6 Do authorized employees maintain line of sight with the equipment or machinery while it is unplugged or use Lockout/Tagout devices, tags, and locks suitable for all the equipment or machinery they maintain or service?			
31.7 Are authorized employees evaluated periodically on performing department procedures and program requirements?			

32. Electrical Safety for Employees: [Electrical Safety Program](#)

	Y	N	NA
32.1 Is electrical work performed that could expose employees to energized parts over 50 volts?			
<i>If you answered "No" to question 32.1, you may skip the following questions in this section.</i>			
32.2 Have employees received EHS approved electrical safety training?			
32.3 Are appropriate safeguards (e.g. guarding, PPE) in place to prevent contact with energized parts?			
32.4 Is there an SOP on how the area safely handles exposure (e.g. scope of work, safe practices, required PPE)?			

In Process

Corrective Actions

Document your corrective actions for addressing deficiencies identified during the self-audit. Record the corrective action, section number it applies to, date it was completed, and who completed it.

Section #	Corrective Actions	Date Completed	Completed by

Comments

In Process

I am the person that **completed** the self-audit. I affirm that I completed the self-audit to the best of my abilities.

Person Completing Signature: _____ Date: _____

I am responsible for operations in and/or personnel using the space(s) indicated. I affirm that this self-audit was completed by someone that works in the space(s) and is knowledgeable about operations therein. I agree to correct deficiencies in a timely manner.

PI/Supervisor Signature: _____ Date: _____