APPENDIX 9-3

Hazardous Analysis Guide and Form
Guide for Performing a Job Hazard Analysis

A hazard analysis focuses on the relationship between the worker and the task, tools, and work environment.

1. Determine if a hazard analysis should be done.

   **Answer the following questions:**
   - What can go wrong?
   - What are the consequences?
   - How could it arise?
   - What are other contributing factors?
   - How likely is it that the hazard will occur?

2. Consider Common Hazards when reviewing tasks.

   Chemical (Toxic)  Fire/Heat
   Chemical (Flammable)  Mechanical/Vibration (Chaffing/Fatigue)
   Chemical (Corrosive)  Mechanical Failure
   Explosion (Chemical Reaction)  Mechanical
   Explosion (Over Pressurization)  Noise
   Electrical (Shock/Short Circuit)  Radiation (Ionizing)
   Electrical (Fire)  Radiation (Non-Ionizing)
   Electrical (Static/ESD)  Struck By (Mass Acceleration)
   Electrical (Loss of Power)  Struck Against
   Ergonomics (Strain)  Temperature Extreme (Heat/Cold)
   Ergonomics (Human Error)  Visibility
   Excavation (Collapse)  Weather Phenomena (Snow/Rain/Wind/Ice)
   Fall (Slip, Trip)

3. Describe and document the hazard information.

   **Record the following information:**
   - Where is it happening (environment)
   - Who or what is it happening to (exposure)
   - What precipitates the hazard (trigger)
   - The outcome that would occur should it happen (consequence)
   - Any other contributing factors
4. Recommend Hazard Control Measures to minimize or eliminate the hazard.

Some hazard control methods are more effective than others. Following is the list of hazard controls in order of precedence and effectiveness:

- Engineering controls
- Administrative controls
- Personal protective equipment

**Engineering controls**
- Eliminate or minimize the hazard – design facility, equipment, or process to remove the hazard or substitute processes, equipment, materials, or other factors to lessen the hazard
- Enclose the hazard – enclosed cabs, enclosures surrounding noisy equipment, or other means
- Isolate the hazard – interlocks, guards, blast shields, welding curtains, or other means
- Removal or redirection of the hazard – ventilation

**Administrative Controls**
- Written operating procedures, work permits, and safe work practices
- Exposure time limitations
- Monitoring the use of highly hazardous materials
- Alarms, signs, and warnings
- Buddy system
- Training

**Personal Protective Equipment**
- Such as respirators, hearing protection, protective clothing, safety glasses, gloves, hardhats, and foot protection

_PPE is acceptable as a control method in the following circumstances:_
- When engineering controls are not feasible or do not totally eliminate the hazard
- While engineering controls are being developed
- When safe work practices do not provide sufficient additional protection
- During emergencies when engineering control may not be feasible
Job Hazard Analysis

Department: ____________________ Date: ____________ Prepared By: ____________

Hazard Potential: □ Pre Accident □ Post Accident
Hazard Potential: □ Minor □ Serious □ Fatal
PPE Required: □ Yes □ No

PPE Description

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Description of Hazard:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Prepared by ________________ Date: ____________

Recommendation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Supervisor Signature: ________________ Date: ____________

Corrective Action Taken: Assigned to: ________________

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Completed: ____________________ Date: ____________

Supervisor Signature: ____________________ Date: ____________

Note: Completed form to stay with supervisor.

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11/8/2007