Attachment A

State of Hawaii – Executive Branch
HAZARD ASSESSMENT CERTIFICATION FOR FOOT PROTECTION

Department: _____ Position Title of Employee: _____

Division/Branch: _____ 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

Type of foot protection required for tasks shown above:

Base:
- ❑ Impact/compression (I/C)
- ❑ Electrical (EH)
- ❑ Puncture Resistant Sole (PR)

Height: (Check only one) ❑ Low cut ❑ High cut 6"_____ ; 8" _____; Other _____

Additional **Required** Features:
- ❑ Slip resistant
- ❑ Heat resistant (soles)
- ❑ Chemical resistant
- ❑ Fire resistant (welding)
- ❑ Water resistant or ❑ Waterproof
- ❑ Metatarsal Protection (MT)
- ❑ Other _____

Person certifying assessment: _____ _____ _____
Print Name (if different from above) Signature Date

Copy to: **DHRD Safety Office; email to hrdsafety@gmail.com**
Departmental Human Resources Officer

Revised July 30, 2019

Instructions to Complete the Hazard Assessment - Foot Protection Form

Occupational Safety and Health (OSH) rules require employers to identify hazards in the workplace that cause or 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 step procedure that is effective and not overly burden-some can be used to complete the requirements. The Hazard Assessment Certification for 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 in order 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 is identified as the hazard, puncture resistant shoes would be required.

4. Transpose hazard assessment data from the table to determine what boxes to check off for the base type of foot protection, shoe height, and additional required shoe features. For the section labeled “Base,” check only the boxes related to the required protection as listed in column 3. For the section labeled “Height,” mark only one box. If the shoe height required for your position is not listed, check “Other,” and write in the required height needed. If the position requires additional foot protection as listed in column 3, specify additional foot protection requirements by checking the additional protection as required. 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.