



# Safe Operating Procedure

(Revised 12/23)

## COMMUNICATION OF WORK AREA SAFETY INFORMATION

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### Authority

In accordance with UNL's **Injury Illness and Prevention Program (IIPP)**, certain work area specific emergency/safety information must be provided to all employees. The Work Area Safety Information Worksheet at the end of this document assists supervisors by ensuring that necessary information is communicated to each employee. Information should be updated as situations change within the work area.

### Injury and Illness Prevention Plan (IIPP)

The first section of the worksheet documents that employees have been trained on general safety and instructed on what to do in case of an injury/illness incident. This is usually accomplished by: 1) completing the EHS web-based training module titled, **Core – Injury and Illness Prevention Plan (IIPP)**; 2) reviewing the safety and compliance manual and procedures established by the supervisor; 3) reviewing work place specific emergency information (e.g., alarms, evacuation and shelter-in-place locations, etc.), and; 4) Informing employees of department/unit-specific injury/illness procedures (See EHS SOP, **On-The-Job and Student Injuries**).

### Virtual Manual

Supervisors should use the **EHS Virtual Manual** tool (available on the EHS website Resources dropdown) to create a basic safety and compliance manual and instruct employees to read the manual and refer to it as necessary throughout their career at UNL. Supervisors should supplement the basic manual with additional information, procedures, and instruction as appropriate to the hazards unique to the workplaces under their authority. In locations where employees may use or be exposed to hazardous chemicals, the Virtual Manual serves as a basic Chemical Hygiene/Hazard Communication plan, which is required by federal Occupational Safety and Health Administration standards.



## Emergency Preparedness

The next section of the worksheet assists in providing appropriate instruction in emergency preparedness and documenting training. Employees must be instructed in the appropriate actions to take in the event of various types of emergencies. This is generally accomplished by completing the EHS web-based training module titled, **Core –Emergency Preparedness Training**. This training must be supplemented with work site- specific information such as egress routes, alarm sounds for various emergencies, locations of alarm pull stations, emergency contacts, tornado shelter location, etc. Employees should be familiar with the SAFETY AT UNL website (<https://safety.unl.edu>) and consider enrolling in the UNL Alert System.

## Job Hazard Analysis and Relevant Training

As applicable, employees must be informed of the unique hazards associated with their assigned tasks and trained on the prescribed measures or strategies that have been implemented to mitigate associated risks. See the following EHS SOPs for additional guidance/information: **Job Safety Assessments** and **Chemical Hazard Assessment & Risk Minimization**.

The previously discussed EHS Virtual Manual is particularly useful for this purpose but must be supplemented with task or work site-specific information, as appropriate and applicable. Completion of appropriate and applicable training is critical. The EHS Training Needs Assessment ([https://ehs.unl.edu/Training\\_Needs\\_Assessment.pdf](https://ehs.unl.edu/Training_Needs_Assessment.pdf)) can be used to identify applicable EHS training.



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**WORK AREA SAFETY INFORMATION WORKSHEET**

Location: \_\_\_\_\_ Department: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Employee: \_\_\_\_\_

Date(s) Prepared/Reviewed/Revised: \_\_\_\_\_

**Injury and Illness Prevention Plan (IIPP):**

- I have completed EHS Core-IIPP training (date of training: \_\_\_\_\_).
- If I recognize an uncontrolled hazard or safety deficiency in my work area or assigned task/equipment, or I do not have the necessary help or equipment to conduct my job safely, I should contact:  
\_\_\_\_\_
- I have read the EHS SOP, ***On-the-Job and Student Injuries*** and department/unit specific supplemental information and know what action to take, including reporting, if I or a co-worker or student is injured or becomes ill while at a UNL function.
- If applicable, I know the names and contact information of persons who are trained in first aid/CPR and have volunteered to assist injured persons assigned to my work area/location.
- I know how and when to summon emergency response personnel and the communication equipment available to me for this purpose (911 from a telephone).
- I know where to locate the first aid kit for my work area, if available.
- The Virtual Manual that applies to my work can be located at (include user ID and password, if accessing on-line):  
\_\_\_\_\_
- Additional written specific work procedures are located at (include user ID and password, if necessary):  
\_\_\_\_\_

**Emergency Preparedness:**

- I have completed EHS Core-Emergency Preparedness training (date of training: \_\_\_\_\_).
- I am familiar with the SAFETY AT UNL website (<http://safety.unl.edu>) and have or considered signing up for UNL Alert.
- I know who to contact in the event of an emergency and their contact information. Emergency numbers are posted at:  
\_\_\_\_\_
- As applicable, I know how to access emergency contacts information for co-workers, employees that I supervise, or students that I am responsible for.
- I have been shown the nearest alarm pull station(s) to my work area(s).
- The fire alarm makes the following sound: \_\_\_\_\_
- I will be notified of a tornado warning by: \_\_\_\_\_
- I have been shown the nearest telephone(s) to my work area(s).
- I have reviewed any existing Building Emergency Action Plan.



- I have been shown a primary and secondary evacuation route from my work area(s).
- The designated gathering location following building evacuation is \_\_\_\_\_
- If the tornado warning sounds, the designated gathering location is \_\_\_\_\_
- Critical systems to shut down, if safe to do so, prior to evacuation are \_\_\_\_\_
- If the area should be secured prior to evacuation and it is safe to do so, I should do the following: \_\_\_\_\_
- I have been shown the materials and/or processes that present a fire hazard in my work area.
- If I am expected or allowed to use a fire extinguisher, I have completed EHS Fire Extinguisher training (date of training: \_\_\_\_\_)

**Chemical Safety (applicable to those persons who handle or may be exposed to hazardous chemicals):**

- I have completed EHS Chemical Safety training, either instructor-led or web-based (date of training: \_\_\_\_\_).
- A chemical inventory/list for my work area is located at \_\_\_\_\_
- Safety Data Sheets for the chemicals in my work area can be located at (include user ID and password, if applicable) \_\_\_\_\_
- I have reviewed the Safety Data Sheets and understand the health and physical hazards of the chemicals that I will be working with or around.
- I have read and understand the EHS SOP, **Chemical Hazard Assessment & Risk Minimization** as well as companion EHS SOPs specific to the class of chemicals that I work with.
- I know the limits of my authorization for working with chemicals and will adhere to these limitations.
- I understand the appropriate precautions and procedures to take for safe use of the chemicals with which I work, to include engineering controls, administrative controls (e.g., specific procedures), and personal protective equipment required.
- I am familiar with the location and operation of emergency eyewash equipment and safety showers.
- I know where the chemical spill supplies are located. I have been informed of the appropriate procedures for use of these supplies, to include types of chemicals and situations for which the supplies can be used and sizes of spills for which they may be used. I understand that I will need to use personal protective equipment when cleaning up a spill.
- I know how to initiate building evacuation and call 911 if a spill presents an imminent hazard.

**Personal Protective Equipment:**

- I have been trained to know what specific PPE I am required to wear under specific conditions.
- I know how to attain the PPE that I need.
- I have been informed of the limitations, care, and proper use of my assigned PPE.

**Security:**

- I understand the procedures and reporting that should occur if I see unauthorized or unfamiliar persons in the work area.
- I have been informed of chemicals, biological agents, and radioactive materials that require additional security precautions and I understand how to secure those materials, as well as report any missing materials.
- I have been informed of security practices that are in force in my work area (i.e., key/credential/biometric security, hours of operation, etc.).



**Additional Safety Information for this Work Area:**

- I am aware of specific hazards associated with my assigned work tasks. I understand and am competent in the strategies that have been prescribed to minimize risks (See EHS SOP, **Job Safety Assessments**).
- I have discussed with my supervisor additional training that may apply to my job (use the Training Needs Assessment for EHS-Related Topics available on the EHS website). \_\_\_\_\_

**Other (Include work/task specific required training and dates completed)**

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