



OFFENDER JOB HAZARD ANALYSIS

Analysis Conducted by: Rod Buck Date: 2012
 Project Location: OYA Food Services Department: Food Services
 Project or Task: Main Kitchen Services Host Agency: OYA
 Equipment and Tool list: NA
 Job Description: Food Service Worker

LIST THE SPECIFIC HAZARD NOTED IN THE BOXES BELOW:

	HEAD	EYES/FACE	SKIN	HAND	FOOT	HEARING	OTHER	PPE minimum requirement) or Process/ Engineering control
FALL/TRIP/SLIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wet floors / Spills / uneven Floors / Mats / Carts					
Description								Wet floor signs for spills Non - Slip shoes. Keep Carts out of Walkways Make sure Mats not curled on edges and are laying flat
ENTRAPMENT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Minimum chance of entrapment behind Appliances					
Description								Make certain you have ample work space when cleaning or maintaing equipment
NOISE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hood system / Garbage disposal / Steam pots / dishwasher				
Description								Wear ear plugs if prolonged exposure exists
DUST/VAPOR/FUMES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chemical odor / Cooking smoke / Flour dust
Description								Wear dust mask, proper training and knowledge of MSDS (chemicals) before use
ABSORPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Working with cleaning chemicals
Description								Wear gloves, Eye protection, ensure proper training and knowledge (MSDS) before use
ELECTRICAL	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Working with appliances / Toaster / Microwave/ Coffee pot
Description								Proper training in use and techniques. Unplug before cleaning
CHEMICAL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Kitchen cleaning chemicals / Bleach / Floor cleaner / Grease cutter
Description								Rubber gloves, Dust masks Goggles, Proper traing and knowledge (MSDS) before use
WORKING SURFACE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wet - uneven floor / Food prep surfaces
Description								Keep floor dry and free of slippery substances Keep walkways open Food prep surfaces clear to ensure proper and safe food prep
Burns	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hot ovens / Stoves / Steamers / Boiling water / Dishwasher				
Description								Gloves, Aprons, proper handling techniques



OFFENDER JOB HAZARD ANALYSIS

State of Oregon
OREGON YOUTH AUTHORITY

	<input type="checkbox"/>							
Description	<input type="checkbox"/>							
Description	<input type="checkbox"/>							
Description	<input type="checkbox"/>							
Description	<input type="checkbox"/>							
Notes:								

Staff signature (staff who completed form)

Date signed