



Power Operated Tools (Employees)

Scope

This policy applies to all employees who use power operated tools. This includes but is not limited to the shop tools in the Facilities Management, Fine & Performing Arts, Theater departments, and Physics and Engineering departments.

Purpose

To ensure that employees who operate such equipment do so competently and without placing themselves or others at risk of injury and to reduce the possibility of damage to the equipment and College property.

Process

- 1. Managers must complete Safe Operating Procedures (SOP) for each piece of equipment or retain the list that comes with new equipment.
- 2. Managers must post SOPs in the shop where easily accessible for all operators.
- 3. Managers must ensure that each operator is familiar with the safety procedures for the shop; employees must sign-off to document that they are familiar with these procedures (see page 2).
- 4. Employees may not operate equipment alone after normal business hours.
- 5. All individuals who are working in a shop while equipment is being operated must wear eye protection.

Responsibilities

- 1. Manager
 - a. Post Safe Operating Procedures in a prominent place in the shop
 - b. Review the SOPs with the operators
 - c. Review safety procedures with each employee
 - d. Have each employee sign the form documenting that they are familiar with the safety procedures (see p. 2)
 - e. Ensure that the SOPs are being followed
 - f. Ensure that operators and others working in the shops are wearing eye protection

2. Operators

- a. Read and understand the SOPs
- b. Follow the SOPs
- c. Obtain the appropriate training prior to operating equipment
- d. Wear appropriate personal protective equipment (PPE) when working in the shops

3. Human Resources

a. Maintain all training records for employees

Evaluation

The Safety Committee shall be responsible for evaluating this policy annually.

Document History

Created: 4/2005

Audited: 1/2006, 2/2007, 3/2008, 3/2009, 3/2010, 3/2011, 3/2012



Power Operated Tools – Safety Procedures Sign-Off

By signing below, I am acknowledging that I have been tr	ained on and am familiar with the
safety procedures for the shop and equipment in which I	am working.
Employee's Signature	Date
Print Name – Employee	-
Manager's Signature	Date
Print Name – Manager	-
Ocalibration December	
Cc: Human Resources	