

## PALM BEACH STATE COLLEGE PERSONAL PROTECTIVE EQUIPMENT (PPE) JOB HAZARD ASSESSMENT

<b>Department:</b> Facilities	<b>Campus:</b> Lake Worth
<b>Task:</b> Operate a Shaper	
<b>Job Title(s) Performing Task:</b> Carpenter	

*Reviewed by Rick Mincey, Carpenter II, and David Suarez, Carpenter I, July 29, 2015*

Task Step/Sub-Tasks	Hazard(s)	Recommended PPE (Bolded)/Controls
1. Start exhaust fan.	Impact (from flying sawdust from back draft)	Open exhaust vent. Wear <b>safety glasses with side shields</b> .
2. Choose a blade.	Cuts (from handling blade)	Hold the blade securely with your fingers on the flat surfaces, avoiding contact with the sharp edges. Wear <b>work gloves</b> .
3. Adjust the fence to accommodate blade.	Compression	Take care to avoid putting your hands between parts that come together.
4. Turn shaper on.	None foreseen	N/A
5. Shape/cut the material.	Cuts (from rotating blade)	Keep fingers and hands away from cutting blade. Wear <b>work gloves</b> .
	Impact (from wood shavings)	Wear <b>safety glasses with side shields</b> .
	Impact (from kickback of material)	Whenever possible, use a jig to hold the material being cut against the rotating blade, rather than feeding it with your hand.
		Check the position of the directional switch before feeding the material into the shaper to ensure that you are not feeding it in the wrong direction.
	Harmful dust	Wear <b>filtering facepiece respirator (particulate mask)</b> .
Noise	Wear <b>ear plugs</b> .	

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6. Remove material and turn off shaper. Clean up work area as necessary.	None foreseen	N/A

**NOTE:** Basic hazard categories include – **impact** (falling/flying objects, struck by), **falls from height**, **penetration** (sharp objects piercing foot/hand, other body parts), **compression** (roll-over or pinching), **cuts, burns, chemical exposure** (inhalation, ingestion, skin contact, eye contact or injection), **heat, extreme cold, harmful dust, noise, light (optical) radiation** (welding, brazing, cutting, furnaces, etc.), **ionizing radiation, non-ionizing (RF energy) radiation, electrical shock, ergonomics** (includes back strain or other strain due to lifting/stretching) and **biologic**.

**CERTIFICATION:** I certify that I have personally performed the above Job Hazard Assessment on the date indicated below. *This document is a Certification of the Hazard Assessment required by 29 CFR 1910.132(d)(2).*

Larry L. Leskovjan	<i>Larry L. Leskovjan</i>	July 29, 2015
<b>Printed Name</b>	<b>Signature</b>	<b>Date</b>