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| **ES15a** | **Personal Protective Equipment (PPE) Assessment** | | |
| **Unit Address** | |  | |
| **Assessment Completed** | | Date | Signed |
| **1st review** | | Date | Signed |
| **2nd review** | | Date | Signed |
| **3rd review** | | Date | Signed |

**Note** - Assessments must be reviewed every 3 years, whenever there is a significant change in the activity, and following any incident involving the activity. Assessments must be retained for a period of 6 years.

Section 1 identifies different types of PPE that can be considered to protect different parts of the body. Section 2 considers other aspects that must be considers. Record of all PPE issued to each member of staff must be recorded on the MAN16a PPE Issue Form

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| **Section 1 – Identification of PPE** | | |
| **Parts of the body protected** | **Types of suitable PPE to consider** | **Types of PPE provided**  (Write in here the PPE items in use, or N/A if not required – having checked relevant risk assessments) |
| Eyes and Face | *Safety spectacles, goggles, face visors or facemasks* to protect against chemicals, dust, projectiles and hazardous vapours |  |
| Hearing | *Ear plugs or ear defenders* to protect against hearing loss from damaging noise levels |  |
| Head and/or neck | *Hard hats or bump caps* to protect against falling or flying objects and head bumping; hairnets to prevent hair entanglement |  |
| Breathing | *Facemasks, respirators or breathing apparatus* to protect against dust, vapours, gas and oxygen deficient atmospheres |  |
| Whole body / trunk area | *Overalls, aprons, high-visibility clothing, waterproof coats, thermal clothing* to protect against the effects of adverse weather or temperature extremes, chemical splashes, hot substances etc |  |
| Hands and/or arms | *Gloves, gauntlets or armlets* to protect against abrasion, temperature extremes, cuts and punctures, impacts, chemicals, hot substances and equipment, electric shock, vibration, skin infection, disease or contamination |  |
| Feet and/or legs | *Safety boots or slip resistant footwear* with / without toecaps or steel mid-soles, *leggings and gaiters* to protect against wet, cuts and punctures, falling objects, frequent use of roll cages and/or pallet trucks and slipping |  |

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| **Section 2 – Other factors** | | | |
| **Matters to Consider** | **Y/N** | **Possible Management Action** | **Actions/Comments** |
| Have all users been trained in the correct use and care of PPE? |  | Ensure training is carried out, recorded and signed for. |  |
| Has a PPE Record of Issue been completed and signed for each user? |  | Ensure that a PPE Record of Issue is completed and signed for all users. |  |
| Are items of PPE being worn and used correctly when required? |  | Ensure employees wear or use PPE as defined in applicable risk assessments or COSHH Product Assessments. |  |
| Do all items of PPE fit properly and give adequate protection? |  | Ensure PPE is correctly adjusted to fit and, where applicable, that no gaps are present that could expose the user to harmful substances. |  |
| Is protection maintained where more than one item of PPE is worn together? |  | Check that there is no protection conflict where two or more items are worn, e.g. goggles and facemask. |  |
| Are PPE users free from adverse health effects, e.g. skin complaints, breathing difficulties etc? |  | Stop the person carrying out the task and investigate the possible cause. Refer to the guidance on Occupational Dermatitis and Occupational Asthma in the Health and Safety Manual |  |
| Is PPE stored correctly and kept away from sources of contamination, e.g. chemicals? |  | Provide suitable storage, including individual storage facilities if necessary for hygiene reasons. |  |
| Is PPE kept clean, in good condition and replaced when necessary? |  | Ensure PPE users keep PPE clean and report to manager or supervisor when replacement needed. |  |
| Where required for hygiene reasons, are employees issued with their own items of PPE? |  | Individual PPE will need to be issued if there could be a hygiene risk if shared. |  |
| Is PPE in good condition and in good working order?  Where applicable, does PPE have all straps, clasps, buckles or ties in place?  Is PPE free from obvious defects, such as:  Dents, deep scratches, holes, worn thin, frayed, torn or otherwise damaged? |  | Replace all items of defective PPE and retrain users in the need to report defective PPE for repair or replacement. |  |