


Job Title:		Chemical Products; Use and Storage		Operations Approval (Name; Position):	
JHA Developed By (Name; Position):					
JHA Revised By (Name; Position):				HSE Approval (Name; Position):	
JHA Revision Date:				Dean Neuburger, Director, OHS&E	
Job Steps		Potential Hazards	Risk Rating (Before Controls)	Hazard Controls	Risk Rating (After Controls)
1	Area and equipment assessment	1. Slips and trips from chemicals and containers on the floor. 2. Damaged or broken containers. 3. Other workers in the area that could be affected by the chemicals. 4. Personnel not educated on the first aid procedures for chemical irritations and inhalations.	C4	1. Ensure floor is dry. a) If floor is wet from a chemical spill, immediately mop up and place wet floor sign and remove once it is dry. b) Notify others in area that floor is wet and if chemical has been spilled. c) Wear anti slip shoes while inside. d) Remove any containers that could create a tripping hazard. 2. Inspect all containers prior to use to ensure they are intact. a) If container is damaged, inform supervisor immediately and do not use. 3. Inform others that a pail with chemicals is to be opened. a) Put up signs to indicate the hazard. b) Clear personnel from the area if they are not required to be there. 4. Personnel should be oriented on the location of eye wash stations, first aid kit, burn kit etc. Ensure that WHMIS and SDS documentation is accessible to all workers.	C5
2	Use of chemical	1. Misuse of chemicals, using the wrong chemical for the task. 2. Chemical irritation and inhalation.	B2	1. Only WHMIS trained personnel are to handle chemicals. a) Refer to product label to identify the purpose of use. b) Do not use an improperly labeled chemical. 2. Slowly open the product to avoid the chemical splashing back and coming into contact with the body. a) Wear the appropriate PPE as per the product specific SDS (i.e. Goggles, gloves, face shield) b) If chemical comes into contact with the body, refer to first aid procedures as per chemical specific MSDS.	C5

		3. Improper label and/or container. 4. Mixing chemicals – Chemical reaction.		3. Only use approved containers for storage or use of chemicals. a) Ensure the proper label is on the right product. b) Dispose of improperly labeled products. 4. DO NOT MIX CHEMICALS! a) Always refer to SDS for possible chemical reactions. b) Always use clean and dry bottles when transferring chemicals. c) Only WHMIS trained personnel are to handle chemicals.	
3	Storage of Chemicals	1. Storing in location with extreme temperatures. 2. Improper labeling upon storage. 3. Cross contamination 4. Storage in inappropriate location resulting in inaccessible and or unstable items.	C2	1. Store at room temperature away from heat and/or cold sources. 2. Ensure manufacturer's labels are intact and legible. a) If required put a workplace label on containers. 3. Do not store chemicals with or near food storage areas. a) Do not store different chemicals directly beside each other. b) Ensure seals on containers are tight and intact. c) Ensure that the outside of the containers are cleaned before storage. 4. Chemicals must be stored a minimum 3" off of the ground. a) Containers must not be stacked more than 3 high. b) Heavier containers should be stored on the bottom if stacked. c) Only store in a low traffic designated area.	C5
Highest Task Risk Rating			B2 (High)	Highest Task Risk Rating	C5 (Low)

Safety Guidelines Required For Task (Completed on site)											
Process		PPE		Health		Training		Environment		Security	
<input checked="" type="checkbox"/>	Pre Job Hazard Analysis	<input type="checkbox"/>	Arc flash coveralls	<input type="checkbox"/>	Traction Aids	<input checked="" type="checkbox"/>	Nitrile glove	<input type="checkbox"/>	Bear awareness	<input type="checkbox"/>	Spill kit
<input type="checkbox"/>	FLRA	<input type="checkbox"/>	Disposable coveralls	<input checked="" type="checkbox"/>	Goggles	<input type="checkbox"/>	Hand Washing	<input type="checkbox"/>	Collision avoidance	<input type="checkbox"/>	Drip trays
<input type="checkbox"/>	JHA review	<input checked="" type="checkbox"/>	Ear plugs	<input checked="" type="checkbox"/>	Face shield	<input type="checkbox"/>	Ergonomics	<input type="checkbox"/>	CSTS	<input type="checkbox"/>	Traffic Mgt.
<input type="checkbox"/>	Signage (Safety/Wet Floor)	<input type="checkbox"/>	Ear muffs	<input type="checkbox"/>	Cut resistant gloves	<input type="checkbox"/>	Other	<input type="checkbox"/>	Confined space	<input type="checkbox"/>	Wildlife Mgt.
<input type="checkbox"/>	Spotter	<input checked="" type="checkbox"/>	Hard hat	<input type="checkbox"/>	Chain-mail gloves	<input type="checkbox"/>		<input type="checkbox"/>	Fall protection	<input type="checkbox"/>	Bear spray
<input type="checkbox"/>	LOTO	<input type="checkbox"/>	Harness	<input type="checkbox"/>	Knee pads	<input type="checkbox"/>		<input type="checkbox"/>	Fire extinguisher	<input type="checkbox"/>	Air horn
<input type="checkbox"/>	PTW (Permit to Work)	<input type="checkbox"/>	Lanyard	<input checked="" type="checkbox"/>	Steel toed boots (6")	<input type="checkbox"/>		<input type="checkbox"/>	Energy Isolation	<input type="checkbox"/>	Insect Repellant
<input type="checkbox"/>	Toolbox	<input type="checkbox"/>	Life line	<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>	Loader	<input type="checkbox"/>	Ventilation
<input checked="" type="checkbox"/>	Ventilation	<input type="checkbox"/>	Leather gloves; Gauntlets	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Skid steer	<input type="checkbox"/>	Other
<input type="checkbox"/>	SDS review	<input checked="" type="checkbox"/>	Sealed eyewear	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Spill responder	<input type="checkbox"/>	
<input type="checkbox"/>	Fall Protection Plan	<input type="checkbox"/>	Respiratory protection	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	TDG	<input type="checkbox"/>	
<input type="checkbox"/>	Barricades	<input type="checkbox"/>	Arc flash gloves	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>	WHIMIS	<input type="checkbox"/>	
<input type="checkbox"/>	Temp logs and verification	<input type="checkbox"/>	Arc flash face shield	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other	<input type="checkbox"/>	
<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

Probability	Severity						
		Catastrophic Death or multiple life-threatening principals	Major Life threatening injury or multiple serious injuries causing hospitalization	Moderate Significant serious injury Non-permanent injury	Minor Medical Help needed, Treatment by medical professional	Insignificant Injuries or ailments not requiring medical treatment	
		1	2	3	4	5	
	A	Almost Certain: Almost certain to occur in most circumstances	1	1	1	2	2
	B	Likely: Likely to occur frequently	1	1	2	2	2
	C	Possible: Possible and likely to occur at some time	1	2	2	2	3
	D	Remotely Possible: May occur in rare and exceptional circumstances	2	2	2	3	3

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