## Checklist of E/OHS Activities for Machine Guarding

Program Contact Person: Neal Mulder

Is the Machine Guarding Plan for each affected work area in place? Yes No

Is the plan/plans current? Yes No

Has the Plan been reviewed this school year? Yes No

Has a survey of all district fixed equipment been conducted? Yes No

When was the evaluation completed? 11/6/18

Who conducted the evaluation? Shane Carlson

How are corrections documented? Activity Manual located in the district office.

Is all fixed equipment safeguarded to meet OSHA criteria? Yes No

Has the alternative MDE "best practices" criteria used to safeguard equipment? Yes No

Has equipment determined not in compliance scheduled for repair or replacement? Yes No

If replaced, was "best practices," bid specification criteria used for procurement? Yes No N/A

## **Identified Fixed Equipment Locations**

LocationBuilding/BuildingsStaff Affected# of itemWelding ShopHigh SchoolNeil MulderAg ShopHigh SchoolNeil Mulder

Contracted technical services to review and recommend? Advanced Health Safety and Sucurity.

Name of person or contractor conducting survey? Shane Carlson 11/06/2018.

Results of technical services located where? Activity Manual located at the district office

Checklist for minimum requirements:

- Power outage protection provided for required equipment
- Emergency stops provided for required equipment
- Safe work practice placards at applicable fixed tool stations
- Proper guards provided and used
- Color coding as prescribed by OSHA standards
- Non-slip surfaces by each piece of equipment
- Fixed equipment secured to prevent "walking" or movement

Has a log of employee accidents and near misses been established and used? Yes No

Annual training for affe	cted	staff	is	provide	d?	Yes	No
Training conducted		date)		_•			

Training has been scheduled for <u>December 2018</u>.