

**APPENDIX I: WORKER'S RIGHT TO KNOW STATEMENT
AND
INSTRUCTIONS**

**RETAIN ORIGINAL AND RETURN A COMPLETED COPY OF FORM TO:
EH&S, UNIT 4097**

Purpose The attached *Worker's Right-To-Know Statement* helps ensure that all employees are aware of the hazards in their work environment and know how to protect themselves against them. This right is guaranteed under the OSHA Hazard Communication Standard and a number of other federal and state statutes. A Hazard evaluation should be reviewed by the employee and the supervisor each year or when significant research changes occur. If additional hazards are identified, a new *Worker's Right-To-Know Statement* must be submitted to EH&S. Faculty are also encouraged to utilize this statement with student researchers. For the purposes of this document, *supervisor* means any UConn employee or individual acting on behalf of UConn in an official capacity that directs the work duties of another employee. Many employees may have little or no exposure to potentially injurious occupational hazards.

Section I contains a list of potential hazards that may exist in the employee's work area. Additional space has been provided to add hazards that may not have been listed. The supervisor is responsible for informing the employee of these hazards prior to engaging in work activities, including any steps necessary to prevent exposures. Most employees would be exposed to general office hazards and should check this category.

Section II contains a partial list of documents available at UConn regarding workplace health hazards. Space has been provided to list documents that may not have been included (e.g., departmental safety guides specific to certain hazardous operations).

Section III contains a list of various occupational health training programs offered by EH&S. Some training may be brief and informal. Due to the nature of employment or degree of educational background, a formal training program may not benefit all employees. An example of this would be an adjunct faculty member who has no significant contact with workplace hazards and teaches a few hours a week. In such a case, briefly explaining the UConn Hazard Communication Program or Chemical Hygiene Plan would suffice. Space has been provided to list training that may not have been included (e.g., departmental programs).

APPENDIX I: WORKER'S RIGHT TO KNOW STATEMENT

SECTION I. The following potential hazards exist in my work area (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> general office hazards | <input type="checkbox"/> microorganisms |
| <input type="checkbox"/> hazardous chemicals | <input type="checkbox"/> BL1 <input type="checkbox"/> BL2 <input type="checkbox"/> BL3 |
| <input type="checkbox"/> radioactive materials | <input type="checkbox"/> ethylene oxide |
| <input type="checkbox"/> lasers, microwaves, UV/RF | <input type="checkbox"/> work requiring respiratory protection |
| <input type="checkbox"/> radiation producing devices | <input type="checkbox"/> formaldehyde |
| <input type="checkbox"/> carcinogens or cytotoxins | <input type="checkbox"/> laboratory animals |
| <input type="checkbox"/> blood, blood products, or other body fluids | <input type="checkbox"/> asbestos |
| <input type="checkbox"/> human | <input type="checkbox"/> biological toxins |
| <input type="checkbox"/> animal | <input type="checkbox"/> other (please specify) |
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SECTION II. I have access to the following health and safety information (enter N/A where not applicable):

- | | |
|---|--|
| <input type="checkbox"/> Infection Control Practices | <input type="checkbox"/> Occupational Health and Safety Program for Animal Handlers
(http://www.ehs.uconn.edu/BIOL.HTML) |
| <input type="checkbox"/> Departmental safety policies | <input type="checkbox"/> Chemical Hygiene Plan
(http://www.ehs.uconn.edu/Chemical/chemplan.html) |
| <input type="checkbox"/> Radiation Safety Manual | <input type="checkbox"/> Hazard Communication Policy
(http://www.ehs.uconn.edu/occu.htm) |
| <input type="checkbox"/> Workplace Hazard Assessment
(http://www.ehs.uconn.edu/occu.htm) | <input type="checkbox"/> other (please specify) |
| <input type="checkbox"/> Bloodborne Pathogen Exposure
Control Plan | |
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SECTION III: The following training programs are available to personnel:

- | | | |
|---|--|--|
| <input type="checkbox"/> Biosafety | <input type="checkbox"/> Hazard Communication | <input type="checkbox"/> New Employee Orientation |
| <input type="checkbox"/> General Biosafety | <input type="checkbox"/> Personal Protective Equipment | <input type="checkbox"/> Laboratory Safety |
| <input type="checkbox"/> Bloodborne Pathogens | <input type="checkbox"/> Hearing Conservation | <input type="checkbox"/> Radiation Safety |
| <input type="checkbox"/> Biosafety in Animal Research | <input type="checkbox"/> Respiratory Protection | <input type="checkbox"/> IACUC Animal Handlers
Training |
| <input type="checkbox"/> Biosafety Level 3 | <input type="checkbox"/> Asbestos Awareness | <input type="checkbox"/> Shipping of Biological
Agents |
| <input type="checkbox"/> Select Biological Agents | <input type="checkbox"/> other (please specify) | |
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The PI or lab supervisor should complete the initial review in their area, check off the hazards found in their area, highlight information and training they feel pertinent to their work area, and then sign and date below. This should be reviewed with all employees and updated yearly or if something changes in your area.

PI or Supervisor's Printed Name

Signature

Department

Date

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