**Safe Work Practice**

**TASK – Care and Use of Safety Footwear**

****** *This task may only be performed by trained and authorized personnel.*

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| **Hazards Present:*** Crushing
* Falling objects
* Sharp objects cutting or puncturing
* Electrical discharge
* Explosive atmospheres
* Extreme temperatures
* Slips and falls/slippery surfaces
* Water exposure
* Chemical exposure
* Rotating or abrasive machinery
 | **Personal Protective Equipment****(PPE)****or Devices Required:*** CSA Approved Safety foot Wear
 | **Additional Training****Requirements:** |

***NOTE:*  *All procedures obtained from mySafetyAssistant™, operator manuals or other samples must have the consultation of workers and be thoroughly reviewed to ensure they are accurate for your workplace and your jobs!***

***NOTE*: Workers must be trained in a way that demonstrates they are competent. JUST READING a SWP is NOT training. Workers must demonstrate they can safely perform task and trainer/supervisor must follow up regularly to ensure workers are performing task in a safe manner. Document each occurrence in the employee’s training record.**

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| **Proper operation:**1. **Fit of Safety Footwear**
* Before you buy a pair of safety shoes/boots, walk in them to ensure they are comfortable.
* Boots should have sufficient toe room (approx. 12.5mm from the end of your toes to the front of the shoe)
* Take socks with you that you would typically wear on the job, so the shoe is large enough to fit the sock.
* Ensure laces are laced fully, so that shoes/ boots fit snuggly around heel and ankle.
* High lace up boots are especially important to have snug, because they provide against rolled and sprained ankles.
1. **Care of Safety Footwear**
* Inspect footwear for damage before each use and replace if:
* laces are broken
* the sole is damaged
* there are holes in the shoe/boot
* tongue is missing
* Protective coatings can be used to make footwear water resistant
1. **Storage**
* Follow manufacturer’s instructions.
* Protect from excessive moisture, vermin, damaging chemicals, oils, greases or any other potential hazard that may have a detrimental effect on the footwear.

**Symbols on footwear** (These symbols will help you determine which footwear is appropriate for specific jobs.)

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| **Protection Markings** | **Safety Features** | **Recommended Use** |
|  | **Green triangle** indicates sole puncture protection with a Grade1 protective toe to withstand impacts up to 125 Joules. Comparable to a 22.7 kg (50 lb) weight droppedfrom 0.6 m. Sole puncture protection is designed to withstand a force of not less than 1200 Newtons (270 lbs)and resist cracking after being subjected to 1.5 millionflexes. | For any industry, especially construction and heavy work environments where sharp objects, such as nails are present. |
|  | **Yellow triangle** indicates sole puncture protection with a Grade 2 protective toe to withstand impacts up to 90 Joules. Comparable to a 22.7 kg (50 lb) weight droppedfrom 0.4 m. Sole puncture protection is designed to withstand a force of not less than 1200 Newtons (270 lbs)and resist cracking after being subjected to 1.5 million flexes. | For light industrial work environments requiring puncture protection as wellas toe protection. |
|  | **Blue rectangle** indicates Grade 1 protective toe without sole puncture protection. Grade 1 protective toewithstands impacts up to 125 Joules. Comparable to a 22.7 kg (50 lb) weight dropped from 0.6 m. | For industrial work environments not requiring puncture protection. |
|  | **Grey rectangle** indicates Grade 2 protective toe withoutsole puncture protection. Grade 2 protective toewithstands impacts up to 90 Joules. Comparable to a22.7 kg (50 lb) weight dropped from 0.4 m. | For institutional and nonindustrialWork environments not requiringpuncture protection. |
|  | **White label with green fir tree symbol** indicates chainsaw protective footwear. Protective features are designed into the boots to prevent a running chainsawfrom cutting all the way through the boot uppers so as to protect the shins, ankles, feet and toes. | For forestry workers and others exposed to handheld chain saws or other cutting tools. |
|  | **White rectangle with orange Greek letter omega**indicates soles that provide resistance to electric shock. Such certified footwear contains a sole and heel design assembly that, at the point of manufacturing, has electrical insulating properties intended to withstand 18,000 Volts and a leakage current not exceeding 1 mA. | For an industry whereaccidental contact with liveelectrical conductors canoccur.Warning: Electrical Shock Resistance deteriorates with wear and in wetenvironments. |
|  | **Yellow rectangle with green “SD” and grounding symbol** indicates soles are static-dissipative. The outersoles are made from an antistatic compound, chemically bound into the bottom components, capable ofdissipating an electrostatic charge in a controlled manner. The test criteria are 106 to 108 Ohms. Note thatSD footwear without toe protection will not have sole protection certified by CSA. | For any industry where a static discharge can create a hazard for workers or equipment. |
|  | **Red rectangle with black “C” and grounding symbol**indicates soles are electrically conductive. The outer soles are made from a conductive compound that is permanently bound to the bottom components to provideelectrical grounding of each foot. Test criteria are 0 to 500,000 Ohms. | For any industry where static discharge may create a hazard ofexplosion. |

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***NOTICE:* Report all hazardous situations to your supervisor without delay!**

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| **Guidance Documents / Standards /Applicable Legislation / Other:****Guidance Documents**:* Manufacturer’s Instructions / Manual
* MSDS

**CSA Standards*** CSA-Z195-02 Protective Footwear
* CSA Z195.1-02 Guideline on Selection, Care and Use of Protective Footwear

**Manitoba Workplace Safety and Health Regulation, MR 217/2006 as amended:*** 2.1.1 Safe Work Procedures
* 6.1 Personal Protective Equipment
 | **This Safe Work Practice will be reviewed any time the task, equipment, or materials change and at a minimum every three years.**

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| Completed / Approved By: |
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| Date Completed: |
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| SWP Last Reviewed / Revised by and date: |
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**This Safe Work Practice has had the consultation of the following workers:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

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