

LASH MILLER CHEMISTRY LABORATORIES SITE-SPECIFIC TRAINING (LM-SST)

Trainee's name:	Position: UG GS PDF RA
Student # or Employee #:	Date:
Principal Investigator:	Department: Chemistry

STEP 1: TRAINING TO BE COMPLETED WITHIN THE FIRST TWO WEEKS

Contact the Manager of UG-Teaching Labs Tech Support & Supplies to schedule training: chem.safety@utoronto.ca

EMERGENCY RESPONSE	
<p>Review emergency response SOP</p> <ul style="list-style-type: none"> - Personal Injury (non-life threatening) - Personal Injury (Life threatening) - First Aid: a) First Aid room b) First aiders - Building associated emergencies: <ol style="list-style-type: none"> 1) Leaks 2) HVAC 3) Power loss 4) Exhaust failure 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

FIRE RESPONSE	
<p>Review fire response SOP</p> <ul style="list-style-type: none"> - Identify location of fire extinguisher - Discuss types of fire extinguishers - Review Fire Response - Identify location of stairs - Identify location of D class fire extinguisher (if applicable) - Book training (contact grace.flock@utoronto.ca) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

MENTAL HEALTH CRISIS RESPONSE	
<p>Review mental health crisis response SOP</p> <ul style="list-style-type: none"> - Identify : what to look for - Assist: having helpful discussions - Refer: encouraging help-seeking behavior - Resources: provide SOP 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



EYE WASH & SAFETY SHOWER

- Identify location of eye wash stations, review flushing protocol
- Activate eye wash
- Review procedure in case of spill in the eye
- Identify location of safety shower, review certification tag
- Review procedure in case of spill on body parts

FUME HOOD USE & ALARM RESPONSE

Review fume hoods use SOP

- Discuss fume hood SOP
- Discuss signs to be posted in case of alarm
- Discuss communication procedure
- Do's and Don'ts
- WHMIS symbols posted on every fume hood/cabinet

CHEMICAL SAFETY

CHEMICAL SPILL

Review Chemical Spill SOP

- SOP for spill inside the fume hood: Fume hood purge feature
- SOP for spill outside the fume hood:
 - a) Identify location of spill kit
 - b) Review content of spill kit
 - c) Review SOP and inventory form
 - d) Small spill: Reviewed definition and SOP for cleaning a small spill.
 - e) Large spill: review definition & procedure

COMPRESSED CYLINDERS	
Review compressed cylinders SOP <ul style="list-style-type: none"> - Compressed gases hazards - PPE - transportation (review proper containers) - Storage 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

The person identified below has completed the hands-on Lash Miller-SITE-SPECIFIC ON-BOARDING training (LM-SST)		
Student/employee/visitor/volunteer name:	Signature:	Date:
Stores-Trainer's name:	Signature:	Date:

STEP 2: Review with your lab's trainer and or safety officer the information you received today.

Your lab/group trainer/s is/are:

Your lab/group safety officer/s is/are:

Ensure you identify the location of safety equipment, spill kits, fire escape routes, emergency plans, etc. that are specific to your lab/group (as delineated in the checklist below).

Once STEP 2 is completed, please bring the signed checklist to Linda Scott (LM-154). The key to the lab will be issued upon receipt of this signed checklist (proof of on-boarding training)



Lash Miller Lab/Group-Specific Training Checklist

This is the trainer's guide to the lab/group-specific training review.

This checklist is to be used by lab-trainers and/or safety officer. It is a guide describing the topics to show during a walk-through of your respective lab-sites when on-boarding new students, personnel and visitors.

Laboratory designated trainers and or safety officers: using this checklist, are to ensure that incoming personnel are shown the location of the following health and safety criteria within or nearby their specific laboratories:

Emergency, Fire and Spill Response	
Located Emergency Contact Numbers and phone	<input type="checkbox"/>
Identified local First Aiders	<input type="checkbox"/>
Located First Aid boxes and identified contents	<input type="checkbox"/>
Identified nearest stairwell exits	<input type="checkbox"/>
Located Fire Alarm Pull Stations	<input type="checkbox"/>
Located Fire Extinguishers	<input type="checkbox"/>
Located Spill Kits and identified contents	<input type="checkbox"/>
Located Safety Showers and reviewed certification tag	<input type="checkbox"/>
Located and activated Eye Wash Stations	<input type="checkbox"/>

Chemical Storage and Transport	
Identified storage for flammables and combustibles	<input type="checkbox"/>
Identified storage for acids and bases	<input type="checkbox"/>
Identified storage for water and air reactives	<input type="checkbox"/>
Identified storage for oxidizers and reducers	<input type="checkbox"/>
Identified storage for toxics	<input type="checkbox"/>
Identified storage for gases and cryogenics	<input type="checkbox"/>
Identified dewars for storing cryogens	<input type="checkbox"/>
Identified oxygen sensors (if applicable)	<input type="checkbox"/>
Located freight elevator for transporting chemicals between floors	<input type="checkbox"/>
Identified secondary containment containers and/or cart(s) for transporting chemicals	<input type="checkbox"/>
Logged into HECHMET to access chemical inventory	<input type="checkbox"/>
Accessed Safety Data Sheets on HECHMET	<input type="checkbox"/>

Fume Hoods	
Identified Fume Hood face velocity meter and ensured not lower than 76 fpm (not applicable to low-flow fume hoods)	<input type="checkbox"/>
Identified proper sash working height	<input type="checkbox"/>
Identified Emergency Purge button	<input type="checkbox"/>
Located Biosafety Cabinets for Containment Level 2 laboratories	<input type="checkbox"/>

Waste Management	
Identified waste containers for hazardous liquids	<input type="checkbox"/>
Identified waste containers for biohazardous waste	<input type="checkbox"/>
Identified waste containers for lightly contaminated waste	<input type="checkbox"/>
Identified waste containers for triple rinsed glass and plastic ware	<input type="checkbox"/>
Located waste labels	<input type="checkbox"/>

The person identified below has completed the Laboratory/Group-Specific Training and has identified the aforementioned health and safety criteria within their laboratory.		
Trainee's Name:	Signature:	Date:
Trainer's Name:	Signature:	Date:
Principal Investigator's Name:	Signature:	Date:

Note: In the event that the Principal Investigator is not available to sign this form, he/she can assign a designate by sending an email to the DOTS (grace.flock@utoronot.ca).