



WORKER'S RIGHT-TO-KNOW STATEMENT

Virginia Commonwealth University Health System - Virginia Commonwealth University

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

<input type="checkbox"/> general office hazards	<input type="checkbox"/> ethylene oxide
<input type="checkbox"/> hazardous chemicals	<input type="checkbox"/> work requiring the use of respiratory protection
<input type="checkbox"/> radioactive materials	<input type="checkbox"/> formaldehyde
<input type="checkbox"/> lasers, microwaves, UV, or RF radiation	<input type="checkbox"/> nitrous oxide
<input type="checkbox"/> radiation producing devices	<input type="checkbox"/> asbestos
<input type="checkbox"/> blood, blood products, or other body fluids	<input type="checkbox"/> glutaraldehyde
<input type="checkbox"/> carcinogens, reproductive hazards or cytotoxins	<input type="checkbox"/> other (please specify) _____

SECTION II. I have reviewed the following health and safety information:

<input type="checkbox"/> VCUHS/MCVP Safety Manual	<input type="checkbox"/> Infection Control Manual
<input type="checkbox"/> Employee Right-To-Know Brochure	<input type="checkbox"/> Biohazard/Recombinant DNA Safety Guide
<input type="checkbox"/> Safety Awareness Handbook	<input type="checkbox"/> Departmental Safety Policies
<input type="checkbox"/> Radiation Safety Manual/Guide	<input type="checkbox"/> other (please specify) _____
<input type="checkbox"/> Carcinogen Safety Guide	_____

SECTION III. I have participated in the following training programs:

<input type="checkbox"/> Safety Awareness (new employee orientation)	<input type="checkbox"/> Standard Precautions
<input type="checkbox"/> Hazard Communication (formal or informal)	<input type="checkbox"/> Respiratory Protection
<input type="checkbox"/> Radiation Safety	<input type="checkbox"/> Asbestos Awareness
<input type="checkbox"/> Laboratory Safety (formal or informal)	<input type="checkbox"/> other (please specify) _____
<input type="checkbox"/> Dangerous Goods	

SECTION IV. For employees who must utilize respiratory protection (e.g., the N-95 mask) to perform their work duties. (Circle Answer)

I have been fit-tested with the respirator I will use at work: YES NO

his document should be completed in conjunction with your supervisor. Signing this document does not relieve the VCUHS of responsibility or negate the employee's rights to protection. It merely signifies that the individual has been informed of his/her *right-to-know* about hazards in the workplace.

Employee's Printed Name	Signature	Date
Supervisor's Printed Name	Signature	Date

Annual Reviews:

_____ Date Int.	_____ Date Int.	_____ Date Int.	_____ Date Int.
_____ Date Int.	_____ Date Int.	_____ Date Int.	_____ Date Int.

PLACE A COPY OF THIS FORM IN EMPLOYEE'S PERSONNEL FILE

Additional forms available on web: www.vcu.edu/oehs/oehsforms.html

Instructions
for
Worker's Right-To-Know Statement
Place the completed form in the employee's personnel file.

Purpose

The *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. Hazard clarification should be reviewed by the employee and the supervisor each year. The signatures at the bottom of this document indicate that this review has been performed. If additional hazards are identified, a new *Worker's Right-To-Know Statement* must be completed. Faculty are also encouraged to utilize this statement with student researchers. For the purposes of this document, *supervisor* means any employee or individual acting on behalf of the VCUHS in an official capacity, whether with or without compensation, who directs the work duties of another employee. Many employees may have little or no exposure to injurious occupational hazards. However, at a minimum, all employees should read the *Employee Right-To-Know* brochure and *Safety Awareness Handbook*, check-off the appropriate spaces in section 2, and check-off hazard communication and safety awareness under section 3.

Section I contains a list of potential hazards which 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 VCU/VCUHS regarding workplace health hazards. *Worker's Right-To-Know* brochures and the *Safety Awareness Handbook* can be obtained through OEHS or on the web at www.vcu.edu/oehs. Space has been provided to list documents that may not have been included (i.e., departmental safety guides specific to certain hazardous operations).

Section III contains a list of various occupational health training programs offered by OEHS, VCUHS, and other sources. The employee/supervisor should identify which of these programs the employee has attended and those which would be appropriate for the employee to attend. Some training may be brief and informal. Due to the nature of employment or 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 a case such as this, briefly explaining the VCU Hazard Communication Program, reviewing the *Worker's Right-To-Know Brochure* and *Safety Awareness Handbook*, and signing the *Worker's Right-To-Know Statement* would be sufficient compliance. Space has been provided to list training that may not have been included (i.e., departmental programs).

Section IV is required to be completed by all VCU/VCHS employees who must utilize respiratory protection during the performance of their job. Typically, this will include individuals with patient contact who must wear the N-95 mask for the prevention of tuberculosis transmission. Employees must indicate whether or not they have been fit-tested to wear a respirator.

Annual Review as part of the employees annual performance evaluation, the supervisor should review the employee's WRTK statement to ensure it is up-to-date and reflects any changes in potential hazards the employee is exposed to. If necessary the form may be modified and initialed by both the employee and the supervisor. The supervisor should document the review by initialing and dating this section of the form each time a review is performed.