

College of Agricultural Sciences – Chainsaw Safety Program

Policy and Responsibilities

All CAS employees assigned chainsaw work will be provided training on the safe use of chainsaws, will be required to demonstrate their ability to handle the chainsaw in a safe manner, and will be required to wear the proper PPE.

***No one under the age of 18 can be assigned chainsaw work.**

Procedure

Training Requirements:

- ❖ View video Chainsaw Safety, Operation & Maintenance produced by Stihl.
<http://www.stihlusa.com/information/videos/playlist-chainsaw-safety-operation/>
- ❖ Read *Section 4, Chapter 6 Chainsaws* in the CAS Farm Safety Manual.
<http://agsci.oregonstate.edu/main/health-and-safety-training-manual>
- ❖ Someone that has proven competence in the use of a chainsaw will have the employee demonstrate that they can start and operate the chainsaw in a safe manner.

PPE Requirements:

- ❖ Close-fitting clothes
- ❖ Hearing protection
- ❖ Safety eyewear
- ❖ Non-slip boots
- ❖ Gloves
- ❖ Protective leggings specific to chainsaw use
- ❖ Hardhat (if it is determined that there are overhead hazards)

Work Requirements:

- ❖ First aid kit available at work site
- ❖ Communication plan in place in case of injury
 - Job location
 - Communication device
 - Who should be called
 - Check-in/Check-out procedures if working alone, but avoid if possible

- Contact information for nearest hospital including address, driving directions and phone number

Chainsaw Safety Checklist

Utilize this checklist when assigning chainsaw work and check each item when completed. Keep this documentation with unit.

	Training	Resource	Date Completed
<input type="checkbox"/>	Chainsaw Video	http://www.stihlusa.com/information/videos/playlist-chainsaw-safety-operation/	
<input type="checkbox"/>	CAS Farm Safety Manual	http://agsci.oregonstate.edu/main/health-and-safety-training-manual	
<input type="checkbox"/>	First Aid Kit Location		
<input type="checkbox"/>	Communication Plan		
<input type="checkbox"/>	PPE Distributed and Worn		
<input type="checkbox"/>	Employee Demonstration of Skill		
<input type="checkbox"/>	Hospital Contact Information		

By signing below I acknowledge that I have received chainsaw safety training and have been provided the necessary PPE and that I will wear the PPE when the chainsaw is in use.

Employee Signature

Date

Supervisor Signature

Date