UCSB Confined Space Program
Compliance Checklist

Department/Unit:_____ **Supervisor:**_____

Completed by:_____ **Date:**_____

Confined Space Program Applicability			
Question	**Yes**	**No**	**Action**
Do you supervise employees who work in confined spaces or have responsibilities for areas on campus with confined spaces?	☐	☐	If **no**, stop. Participation in UCSB's Confined Space Program not required. If **yes**, ensure that the requirements of the Confined Space Program are met.
Have the confined spaces that your employees work in been classified as permit-required or non permit-required?	☐	☐	If **no**, contact Nick Nieberding of EHS (x3743, nick.nieberding@ehs.ucsb.edu) to schedule a confined space assessment.
Are the confined spaces that your employees work in labeled with appropriate signage?			If **no**, contact Nick Nieberding to coordinate installation of confined space signage.
Training			
Have all employees that work in permit-required confined spaces (PRCSs) received documented PRCS Training?	☐	☐	If **no**, ensure all employees that work in PRCSs received documented initial PRCS Training (available on UCSB Learning Management Center).
Hazard Identification, Reduction and Control			
Has a documented Job Hazard Assessment been performed for all job tasks?	☐	☐	If **no**, ensure a documented Job Hazard Assessment is completed for all job tasks.
Have engineering and/or administrative controls been implemented to control hazards in the confined spaces which could not been eliminated? Example- Guards for exposed fan blades	☐	☐	If **no**, implement engineering and/or administrative controls where possible to reduce and control hazards.
Permits			
Are Entry Permits completed for all PRCS entries?	☐	☐	If **no**, ensure Entry Permits are completed and retained.
Are Entry Permits retained and submitted to the EH&S Confined Space Program Manager annually?	☐	☐	If **no**, ensure Entry Permits are retained and submitted to the EH&S Confined Space Program Manager at least annually.
Notes			