

# Hearing Conservation Program Evaluation Checklist

Training and Education	Yes	No	N/A	Comments
1. Is training conducted at least once a year?				
2. Is the training provided by a qualified instructor?				
3. Is the success of each training program evaluated?				
4. Is the content revised periodically?				
5. Are managers and supervisors directly involved?				
6. Are posters, regulations, handouts, and employee newsletters used as supplements?				
7. Are personal counseling sessions conducted for employees having problems with hearing protection devices or showing hearing threshold shifts?				
Supervisor Involvement	Yes	No	N/A	Comments
8. Are supervisors provided with the knowledge required to supervise the use and care of hearing protectors by subordinates?				
9. Do supervisors wear hearing protectors in appropriate areas?				
10. Are supervisors counseled when employees resist wearing protectors or fail to attend hearing tests?				
11. Are disciplinary actions enforced when employees repeatedly refuse to wear hearing protectors?				
Noise Measurement	Yes	No	N/A	Comments
12. Were the essential/critical noise studies performed?				
13. Was the purpose of each noise study clearly stated?				
14. Are noise-exposed employees notified of their exposures and apprised of auditory risks?				



15. Are the results routinely transmitted to supervisors and other key individuals?				
16. Are results recorded in health/medical records of noise-exposed employees?				
17. Are results placed in shop folders?				
18. If noise maps exist, are they used by proper staff?				
19. Are noise measurement results considered when contemplating procurement of new equipment?				
20. Are noise measurement results considered when modifying the facility?				
21. Are noise measurement results considered when relocating employees?				
22. Are there changes in areas, equipment, or processes that have altered noise exposure?				
23. Are follow-up noise measurements conducted?				
24. Are appropriate steps taken to include (or exclude) employees in the hearing loss prevention programs whose exposures have changed significantly?				
<b>Engineering and Administrative Controls</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
25. Are noise controls prioritized?				
26. Is the cost-effectiveness of various options addressed?				
27. Are employees and supervisors apprised of plans for noise control measures?				
28. Are employees and supervisors consulted on various approaches?				
29. Will in-house resources or outside consultants perform the work?				
30. Are employees and supervisors counseled on the operation and maintenance of noise control devices?				
31. Are noise control projects monitored to ensure timely completion?				
32. Is the full potential for administrative controls evaluated?				

33. Are noisy processes conducted during shifts with fewer employees?				
34. Do employees have sound-treated lunch or break areas?				
<b>Monitoring Audiometry and Recordkeeping</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
35. Is the audiometric technician adequately trained, certified, and recertified as necessary?				
36. Do on-the-job observations of the technicians indicate that they perform a thorough and valid audiometric test, instruct, and consult the employee effectively, and keep appropriate records?				
37. Are records complete?				
38. Are follow-up actions documented?				
39. Are hearing threshold levels reasonably consistent from test to test? If not, are the reasons for inconsistencies investigated promptly?				
40. Are the annual test results compared to baseline to identify the presence of an OSHA standard threshold shift?				
41. Is the annual incidence of standard threshold shift greater than a few percent? If so, are problem areas pinpointed and remedial steps taken?				
42. Are audiometric trends (deteriorations) identified, both in individual and groups of employees? Note: NIOSH recommends no more than 5% of workers showing 15dB Significant Threshold Shift, same ear, same frequency.				
43. Do records show that appropriate audiometer calibration procedures are followed?				
44. Is there documentation showing that the background sound levels in the audiometer room were low enough to permit valid testing?				
45. Are the results of audiometric tests communicated to supervisors and managers as well as to employees?				
46. Is corrective action taken if the rate of no-shows for audiometric test appointments is more than 5%?				

47. Are employees incurring STS notified in writing within 21 days? Note: NIOSH recommends immediate notification if retest shows 15dB Significant Threshold Shift, same ear, same frequency.				
<b>Referrals</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
48. Are referral procedures clearly specified?				
49. Are letters of agreement between the company and consulting physicians or audiologists executed?				
50. Are mechanisms established to ensure that employees who need evaluation or treatment receive the service (i.e., transportation, scheduling, reminders)?				
51. Are records properly transmitted to the physician or audiologist and back to the company?				
52. If medical treatment is recommended, does the employee understand the condition requiring treatment, the recommendation, and methods of obtaining such treatment?				
53. Are employees referred unnecessarily?				
<b>Hearing Protection Devices</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
54. Are hearing protectors made available to all employees whose daily average noise exposures are 85 dBA or above? Note: NIOSH recommends requiring HPD use if noises equal or exceed 85 dBA regardless of exposure time.				
55. Are employees given the opportunity to select from a variety of appropriate protectors?				
56. Are employees fitted carefully with special attention to comfort?				
57. Are employees thoroughly trained initially and at least once a year?				
58. Are the protectors checked regularly for wear or defects and replaced immediately if necessary?				
59. If employees use disposable hearing protectors, are replacements readily available?				
60. Do employees understand the appropriate hygiene requirements?				
61. Have any employees developed ear infections or irritations associated with the use of hearing protectors?				



62. Are there any employees who are unable to wear these devices because of medical conditions?				
63. Are these conditions treated promptly and successfully?				
64. Are alternative types of hearing protectors considered when problems with current devices are experienced?				
65. Do employees who incur noise-induced hearing loss receive intensive counseling?				
66. Are those who fit and supervise the wearing of hearing protectors competent to deal with any problems that occur?				
67. Do workers complain that protectors interfere with their ability to do their jobs?				
68. Do workers complain that protectors interfere with spoken instructions or warning signals?				
69. Are worker complaints followed promptly with counseling, noise control, or other measures?				
70. Are employees encouraged to take hearing protectors home if they engage in noisy non-occupational activities?				
71. Are new types or potentially more effective protectors considered as they become available?				
72. Is the effectiveness of the hearing protector program evaluated regularly?				
73. Are at-the-ear protection levels evaluated to ensure that either over or under protection are adequately balanced according to the anticipated ambient noise levels?				
74. Is each hearing protector user required to demonstrate that he or she understands how to use and care for the protector?				
75. Are the results (from question 21) documented?				
<b>Administrative</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
76. Have there been any changes in federal or state regulations?				
77. Are hearing loss prevention program's policies modified to reflect changes?				

78. Are copies of company policies and guidelines regarding the hearing loss prevention program available in the offices that support the various program elements?				
79. Are those who implement the program elements aware of the company policies and guidelines regarding the hearing loss prevention program?				
80. Are those who implement the program elements compliant with the policies and guidelines of the hearing loss prevention program?				
81. Are necessary materials and supplies ordered with a minimum of delay?				
82. Are procurement officers overriding the hearing loss prevention program implementer's requests for specific hearing protectors or other hearing loss prevention equipment?				
83. If procurement officers are overriding the hearing loss prevention program implementer's requests for specific hearing protectors or other hearing loss prevention equipment, are corrective steps taken?				
84. Is the performance of key personnel evaluated periodically?				
85. If performance of key personnel is found to be less than acceptable, are steps taken to correct the situation?				
86. Has the failure to hear warning shouts or alarms been tied to any accidents or injuries?				
87. If failure to hear warning shouts or alarms has been tied to any accidents or injuries, have remedial steps been taken?				

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