

Date: _____

Inspector(s): _____

Job Title: _____

Dean: _____

Signature: _____



THOMSON RIVERS UNIVERSITY

SCIENCE BLDG. SAFETY INSPECTION

Note: Not all sections will be applicable to all locations and the list is not exhaustive. These items apply to hallways, offices, lecture rooms and the building in general. Answering 'no' to any of the following questions indicates a need for corrective action to be taken.

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
1.0	<u>LIGHTING</u>					
1.01	Are all areas adequately lit?					
1.02	Is there an emergency lighting system that is adequately maintained?					
1.03	Are light fittings in good repair and clean?					
1.04	Are fittings accessible for routine maintenance?					
1.05	Are all illuminated signs and notices in lift ways and exits in working order?					
1.06	Is outside lighting adequate for safety and security?					
2.0	<u>NOISE</u>					
2.01	Are noise hazard signs placed in work areas where levels exceeding 85 dBA are recorded?					
2.02	Have hearing protection areas and tasks been identified?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
2.03	Is hearing protection provided for staff and visitors where appropriate?					
2.04	Is the workplace free of complaint or comment from employees or visitors about excessive noise in the workplace?					
3.0	<u>OFFICES</u>					
3.01	Do individuals complain about ergonomic issues?					
3.02	Is there sufficient individual storage space?					
3.03	Are lighting and ventilation sufficient?					
4.0	<u>ELECTRICAL</u>					
4.01	Are circuit breaker switches installed?					
4.02	Is the main switch/circuit breaker clearly labeled?					
4.03	Is the main switch/circuit breaker easily accessible?					
4.04	Are all isolators, fuses, switches, emergency stops, indicators and other electrical components clearly marked and identifiable?					
4.05	Is a Carbon Dioxide fire extinguisher placed adjacent to switchboard?					
5.0	<u>STORAGE AREAS</u>					
5.01	Is storage adequate to meet requirements?					
5.02	Is storage suitable for the purpose used?					
5.03	Are storage areas easily accessible?					
5.04	Are stacks stable?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
5.05	Is there safe storage for heavy items [in a low position]?					
5.06	Are the cupboards and shelves in good condition?					
5.07	Are shelves free from dust and rubbish?					
5.08	Is the shelf approach unobstructed to allow correct lift technique?					
5.09	Are stored items checked for shelf life?					
5.10	Are floors clear of rubbish and trip hazards?					
5.11	Are storage areas clearly identified?					
5.12	Are stools and ladders available for obtaining items above comfortable reach?					
5.13	Are mechanical devices provided for lifting and carrying heavy objects?					
6.	<u>SAFETY SIGNS/ POSTERS</u>					
6.01	Are signs/posters in a prominent position and easy to understand?					
6.02	Are signs/posters close to the source of the hazard?					
6.03	Do current signs and posters adequately advise of all hazards present?					
6.04	Are warning signs displayed at potentially hazardous areas [Slippery When Wet]?					
6.05	Are warning signs and or barricades erected when work is in progress?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
7.0	<u>VENTILATION/AIR CONDITIONING</u>					
7.01	Are individuals satisfied with thermal comfort?					
7.02	Are air conditioning filters/vents cleaned regularly?					
7.03	Are cooling towers treated regularly?					
7.04	Are readings retained in a register?					
7.05	Are the air conditioning controls easy to access and check?					
7.06	Is ventilation appropriate / adequate for the type of work being undertaken?					
7.07	Are ventilation systems regularly maintained?					
7.08	Have fume/extraction systems been installed where required?					
7.09	Are smoke free zones enforced around building air intake ports?					
8.	<u>WASHROOMS</u>					
8.01	Are facilities clean, private, well ventilated and in good repair?					
8.02	Is there at least one basin with hot and cold running water for every 15 employees?					
8.03	Are soap and hand drying facilities provided?					
8.04	Are floors clean and free of water?					
8.06	Is sanitary disposal in place and serviced regularly?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
9.0	<u>KITCHEN/ AMENITY AREAS</u>					
9.01	Is the kitchen/amenities area kept clean?					
9.02	Is drinking water available?					
9.03	Are the floors clean and in good repair?					
9.04	Are the furniture and fittings clean and in good repair?					
9.05	Are kitchen appliances and white goods regularly maintained?					
9.06	Do kitchen appliances and white goods display electrical compliance tagging?					
9.07	Are there suitable receptacles for waste and are they emptied regularly?					
10.0	<u>GENERAL</u>					
10.01	Are employees aware of hazards specific to their workplace?					
10.02	Do employees report accidents, near misses and hazards?					
10.03	Is access/egress to the building safe and free from obstruction?					
10.04	Are exits signs clearly posted and illuminated?					
10.05	Do regular maintenance inspections of the building take place?					
10.06	Is a system in place for the reporting of building defects?					
10.07	Do doors open and close properly?					
10.08	Are building evacuation routes prominently displayed?					

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10.09	Are arrangements in place for the safety of employees/visitors with limited mobility?					
10.10	Are surfaces of pathways around the building well maintained?					
10.11	Are stairways and railings in good repair?					
10.12	Are floors free from litter?					
10.13	Are uncarpeted floors clean? [no oil, grease or water spills]?					
10.14	Are carpets in good repair [no holes, loose threads]?					
10.15	Are window panes clean and unbroken?					
10.16	Are window ledges free of dust and rubbish?					
10.17	Are walls clean and in good repair?					
10.18	Where available are lifts in good working order and serviced frequently?					
11.0	<u>TRAINING</u>					
11.01	Is OH&S included in induction training for all employees?					
11.02	Does initial training include a thorough review of hazards and accidents associated with the job?					
11.03	Is training provided for the use of emergency equipment?					
11.04	Is there satisfactory task training to ensure work is carried out safely?					
11.05	Have managers and supervisors attended Managerial OH&S training?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
11.06	Have managers been trained in Hazard Identification and Risk assessment?					
11.07	Are health and safety committee members adequately trained?					
11.08	Are training records maintained for all OH&S training?					
12.0	<u>EMPLOYEE PARTICIPATION</u>					
12.02	Do employees have access to the minutes of health and safety committee meetings?					
12.03	Are workers consulted on the safety aspects of all the equipment?					
13.0	<u>CHEMICAL STORAGE</u>					
13.01	Are the lights working properly?					
13.02	Are exits free from obstruction?					
13.03	Are fire extinguishers present and have they been inspected in the last year?					
13.04	Is ventilation adequate?					
13.05	Does the eyewash and shower work?					
13.06	Are chemicals labeled?					
13.07	Do shelving units have lips?					
13.08	Are chemicals meant for disposal labeled and stored appropriately?					
13.09	Is the floor free of spills?					
14.0	<u>ADDITIONAL</u>					

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