

# WORKPLACE INSPECTION CHECKLIST TYPE 3

| Environment   | Yes | No | N/A | Action Required? By who? By when? |
|---|-----|----|-----|-----------------------------------|
| Is the workplace sufficiently well ventilated?                        |     |    |     |                                   |
| Is workplace temperature reasonably comfortable?                      |     |    |     |                                   |
| Is lighting adequate for working tasks and/or service activities?     |     |    |     |                                   |
| Do all work areas have sufficient space? (11 cu m rule)               |     |    |     |                                   |
| Cleanliness and waste   | Yes | No | N/A | Action Required? By who? By when? |
| Are workplace areas suitably clean and tidy?                          |     |    |     |                                   |
| Is all waste held in suitable containers? (bins with lids, sacks etc) |     |    |     |                                   |
| Is all waste removed from work and service areas regularly?           |     |    |     |                                   |

|   |            |           |            |  |
|---|------------|-----------|------------|--|
| Is any hazardous waste stored and disposed of correctly?  |            |           |            |  |
| <b>Floors, Walkways &amp; Stairs</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are all floors and walkways clear and in good condition and free of slip/trip hazards such as trailing wires, boxes, loose thresholds, loose carpet or slippery when wet? |            |           |            |  |
| Are steps and stairways safe and in good condition?   |            |           |            |  |
| Are steps and stairways fitted with adequate handrails?   |            |           |            |  |
| Are external walkways/routes free of potholes/trip hazards?   |            |           |            |  |
| <b>Persons / Objects falling</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are there areas where people can fall from height?  |            |           |            |  |
| Are there areas where objects can fall from height?   |            |           |            |  |

| <b>Work at Height</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
|--|------------|-----------|------------|--|
| Where activities are carried out at height are staff trained in the use of approved equipment? |            |           |            |  |
| <b>Fire Precautions &amp; Emergency Exits</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are there separate storage arrangements for flammable materials?                               |            |           |            |  |
| Are bins regularly emptied and rubbish safely disposed of?                                     |            |           |            |  |
| Is smoking prohibited?   |            |           |            |  |
| Are clear fire instructions displayed throughout the workplace?                                |            |           |            |  |
| Have sources of ignition (portable heaters etc) been replaced with safer alternatives?         |            |           |            |  |
| Are fire drills carried out regularly and at least twice per year?                             |            |           |            |  |

|  |  |  |  |  |
|--|--|--|--|--|
| Are fire alarms and smoke detectors checked and tested weekly?   |  |  |  |  |
| Are the alarms capable of warning employees throughout the building?   |  |  |  |  |
| Are there other forms of fire warning for the hearing impaired?  |  |  |  |  |
| Are all employees given information, instruction and training on fire risks and precautions, as well as what to do in the event of a fire or fire alarm?   |  |  |  |  |
| Is emergency lighting provided and tested regularly?   |  |  |  |  |
| Are fire escape routes clearly signed, kept clear and wide enough to prevent a crush and do they lead quickly and directly to a place of safety?   |  |  |  |  |
| Are fire doors and exits clearly marked, kept clear on both sides at all times, never left open, and do they open easily and quickly in the direction of escape and lead quickly to a place of safety? |  |  |  |  |

|   |            |           |            |  |
|---|------------|-----------|------------|--|
| Are there enough fire extinguishers of the correct type within easy reach and near each exit? |            |           |            |  |
| Are fire extinguishers regularly inspected and tested and maintained in working order?        |            |           |            |  |
| Have all staff been instructed in the evacuation procedures in the event of an emergency?     |            |           |            |  |
| <b>Access and Egress</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are all access routes kept clear and free of combustible materials?                           |            |           |            |  |
| Are all exit doors unlocked and clear of any obstructions?                                    |            |           |            |  |
| Are external access and exit routes clear, in good order and free from trip and slip hazards? |            |           |            |  |
| Are designated refuge areas clearly signed?   |            |           |            |  |

|   |            |           |            |  |
|---|------------|-----------|------------|--|
| Is emergency evacuation equipment e.g. Evac chairs available and in good order?             |            |           |            |  |
| Are staff trained to use emergency evacuation equipment?                                    |            |           |            |  |
| <b>Building Management</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Is there an asbestos survey held on site and are asbestos materials identified and managed? |            |           |            |  |
| Are all known asbestos containing materials in a safe and undamaged condition?              |            |           |            |  |
| Are common areas both internal and external of shared premises in good order?               |            |           |            |  |
| Is glazing in good condition and made of safety glass or fitted with safety film?           |            |           |            |  |
| Is there a water safety file held on site with controls identified and in place?            |            |           |            |  |

|  |            |           |            |  |
|--|------------|-----------|------------|--|
| Has all Gas plant and equipment (boilers, heaters, A/C etc) been serviced in the last twelve months and are all in good working order?                               |            |           |            |  |
| Has all Electrical plant and equipment (boilers, lifts, A/C fans etc) been serviced and / or PAT tested in the last twelve months and are all in good working order? |            |           |            |  |
| <b>Welfare Facilities</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are there adequate and clean sanitary provisions?  |            |           |            |  |
| Is drinking water readily available?   |            |           |            |  |
| Are there provisions for employees to make a hot drink?  |            |           |            |  |
| Are there adequate facilities for staff to take breaks and eat meals either at or away from their workstations?  |            |           |            |  |

| <b>First Aid</b>   | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
|--|------------|-----------|------------|--|
| Is there a First Aider(s) on site?   |            |           |            |  |
| Is there an Appointed Person on site?  |            |           |            |  |
| Do you have a properly stocked First Aid box?  |            |           |            |  |
| Is the first aid box kept to the minimum level of stock?   |            |           |            |  |
| <b>Hazardous substances</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are all hazardous substances including cleaning chemicals correctly stored?                              |            |           |            |  |
| Can unauthorised persons (service users, members of the public etc) gain access to hazardous substances? |            |           |            |  |
| Are plant rooms, cleaner's cupboards, stores etc kept locked?  |            |           |            |  |



|   |            |           |            |  |
|---|------------|-----------|------------|--|
| Are hot water sources labelled and where necessary controlled by Thermostatic Mixing Valves (TMVs) and procedures to 43 C max?        |            |           |            |  |
| Are hot surface temperatures protected and or controlled to 43 C max?   |            |           |            |  |
| <b>Other facilities</b>   | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are there rest facilities for new / expectant mothers?  |            |           |            |  |
| Are there adequate facilities for staff changing and secure storage of staff clothing and valuables etc?                              |            |           |            |  |
| Are kitchens clean and tidy?  |            |           |            |  |
| Are Residual Current Devices (RCDs) fitted in key areas (workshops, kitchens, laundries etc) and are these undamaged and operational? |            |           |            |  |
| Where applicable do kitchens meet Food Hygiene Standards?   |            |           |            |  |

| <b>Tools and Equipment</b>  | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
|---|------------|-----------|------------|--|
| Are all tools in good condition, safely stored and tested?  |            |           |            |  |
| Are extension leads in good condition (undamaged, no inner cables showing etc) and tested in last 12 months?    |            |           |            |  |
| Are all step ladders / ladders in good condition and stored safely?   |            |           |            |  |
| Is all lifting equipment (hoists, lifts, ropes, chains straps, strops etc) in good condition?                   |            |           |            |  |
| Is all lifting equipment (hoists, lifts, ropes, chains straps, strops etc) adequately maintained and inspected? |            |           |            |  |
| <b>External Areas</b>   | <b>Yes</b> | <b>No</b> | <b>N/A</b> | <b>Action Required? By who? By when?</b> |
| Are structures (sheds, stores, mess rooms greenhouses etc) in good repair and secure?                           |            |           |            |  |
| Are fragile roofs adequately safeguarded?   |            |           |            |  |

|  |  |  |  |  |
|--|--|--|--|--|
| Are all walls, fences and gates in good condition? |  |  |  |  |
| Are all chemicals stored in a secure store?        |  |  |  |  |
| Are all gardens safe and well maintained?          |  |  |  |  |

**Summary of further actions including any outstanding from the last report:**

**Proposed corrective actions and target dates (to be completed by line manager):**

**Inspection carried out by:**

**Name:**

**Job Title:**

**Date:**

**Reviewed by line manger:**

**Name:**

**Job Title:**

**Date:**