**WORKPLACE INSPECTION CHECKLIST HIGH / LOW CARE**

*To be customised to suit specific site environment*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| NAME OF WORKSITE / LOCATION: | DATE: | | | | | | |
| AREA INSPECTED: | INSPECTED BY: | | | | | | |
| FIRE / EMERGENCY | YES | | NO | | N/A | ACTION / COMMENTS | |
| Firefighting equipment (extinguishers, blankets, hose reels) clearly visible and suitable signage in place? (distance visible from 20 m) |  | |  | |  |  | |
| Is the access to the firefighting equipment (extinguishers, blankets, hose reels) unobstructed? (1 m square) |  | |  | |  |  | |
| Firefighting equipment in place (extinguishers, blankets, hose reels), serviced within the last 6 months, tag stamped, correctly charged (fire extinguishers) & clearly marked for type of fire? |  | |  | |  |  | |
| Sprinklers unobstructed? |  | |  | |  |  | |
| Location of all emergency equipment including alarms, emergency shut off devices, showers, eye wash stations, spill kits etc. clearly visible and suitable signage in place? |  | |  | |  |  | |
| Clear access is available to all emergency equipment, including alarms, emergency shutoff devices, showers, eye wash stations and spill kits etc.? |  | |  | |  |  | |
| Are evacuation plans displayed? Are they current (within 5 year date)? Are fire extinguishers clearly marked on the evacuation plans? |  | |  | |  |  | |
| Emergency lighting and exit signs functioning correctly? |  | |  | |  |  | |
| Where a door is designated as an emergency exit, does it open outwards? If the answer is ‘No’ is there a device that enables the door to be held open? |  | |  | |  |  | |
| Exit doors open easily from the inside, without a key? |  | |  | |  |  | |
| Exits free from obstructions? (internally and externally) |  | |  | |  |  | |
| Fire doors close properly? – (not chocked (wedged) open) |  | |  | |  |  | |
| Emergency phone numbers clearly displayed? |  | |  | |  |  | |
| Floors free from defects, clear of leads, cables etc.? |  | |  | |  |  | |
| Glass in door panels & other panels clearly marked? |  | |  | |  |  | |
| ELECTRICAL | YES | | NO | | N/A | ACTION / COMMENTS | |
| No cracked or broken switches? |  | |  | |  |  | |
| All plug in type electrical equipment fitted with a current inspection & test tag? |  | |  | |  |  | |
| No frayed or damaged leads? |  | |  | |  |  | |
| All electrical cables tied or positioned as to prevent anyone tripping over them? |  | |  | |  |  | |
| Electrical tools and appliances in good condition? |  | |  | |  |  | |
| No double adaptors or piggy back plugs in use? |  | |  | |  |  | |
| Power boards have overload protection (normally a small push button near where the lead is) and powerboards/appliances etc. not suspended from leads? |  | |  | |  |  | |
| No strained leads? |  | |  | |  |  | |
| Electrical leads, tools, appliances etc. well clear of wet/damp conditions? |  | |  | |  |  | |
| Residual Current Devices (RCD’s) or safety switches in place and used where required? |  | |  | |  |  | |
| Electrical leads & extension cords not exposed to risk of damage from traffic, equipment, trolleys, sharp edges, weights etc.? |  | |  | |  |  | |
| Electrical cabinets’ secured and unobstructed access available? |  | |  | |  |  | |
| BIOLOGICAL / INFECTION CONTROL | YES | | NO | | N/A | ACTION / COMMENTS | |
| Are there plastic liners in all garbage bins? |  | |  | |  |  | |
| Are the garbage bins liners changed daily, including weekends? |  | |  | |  |  | |
| Are garbage bins covered? |  | |  | |  |  | |
| Are liquids disposed of according to the Safety Data Sheets? |  | |  | |  |  | |
| Are there special boxes for disposable of needles and sharps? |  | |  | |  |  | |
| Is the garbage bin in the resident’s room used for paper only? |  | |  | |  |  | |
| Is garbage with blood and other specimens in it identified as such? |  | |  | |  |  | |
| Is contaminated garbage autoclaved or incinerated? |  | |  | |  |  | |
| Sharps containers available (close to area of use)? |  | |  | |  |  | |
| Infectious waste disposed appropriately? |  | |  | |  |  | |
| FLOORING | YES | | NO | | N/A | ACTION / COMMENTS | |
| Even surfaces? – No holes, defects etc.? |  | |  | |  |  | |
| Carpet - good condition? No tears? Not bunched? Frayed? |  | |  | |  |  | |
| Tiles – good condition? None loose? Missing? |  | |  | |  |  | |
| Floor boards – good condition? Not loose, firmly secured? |  | |  | |  |  | |
| Clear and unobstructed? Free of rubbish? |  | |  | |  |  | |
| All spills cleaned up? |  | |  | |  |  | |
| WALKWAYS / PASSAGES | YES | | NO | | N/A | ACTION / COMMENTS | |
| Adequate lighting? |  | |  | |  |  | |
| Floor surface free from defects? |  | |  | |  |  | |
| Free of obstructions? |  | |  | |  |  | |
| Clear of leads, cables etc.? |  | |  | |  |  | |
| Free from blind corners? |  | |  | |  |  | |
| GENERAL LIGHTING | YES | | NO | | N/A | ACTION / COMMENTS | |
| Adequate lighting for activities conducted? |  | |  | |  |  | |
| Good natural lighting? |  | |  | |  |  | |
| No direct or reflected glare? |  | |  | |  |  | |
| Light fittings clean & in good repair? |  | |  | |  |  | |
| All light bulbs / fluorescent tubes working correctly? |  | |  | |  |  | |
| Light covers in place where there is a potential for damage/injury? |  | |  | |  |  | |
| STAFF AMENITIES | YES | | NO | | N/A | ACTION / COMMENTS | |
| Washrooms clean and tidy? |  | |  | |  |  | |
| Toilets clean & tidy? |  | |  | |  |  | |
| Is there adequate provision for sanitary disposal? |  | |  | |  |  | |
| Are sanitary waste receptacles emptied regularly? |  | |  | |  |  | |
| Adequate ventilation provided? |  | |  | |  |  | |
| Lockers clean? |  | |  | |  |  | |
| Meal rooms clean & tidy? |  | |  | |  |  | |
| Does water flow freely down urinal drains? |  | |  | |  |  | |
| HOUSEKEEPING | YES | | NO | | N/A | ACTION / COMMENTS | |
| Work areas kept clean & tidy? |  | |  | |  |  | |
| Does the standard of cleaning appear satisfactory? |  | |  | |  |  | |
| Sufficient waste containers and emptied regularly? |  | |  | |  |  | |
| If cleaning materials are kept in this area, are they kept in locked cupboards? |  | |  | |  |  | |
| STORAGE | YES | | NO | | N/A | ACTION / COMMENTS | |
| Materials & equipment stored safely e.g. heavy items at waist height? |  | |  | |  |  | |
| Shelving – are free standing shelves and cupboards secured to ensure stability, weight ratings visible and items stored at a suitable height and within shelving width? |  | |  | |  |  | |
| Containers – are there suitable containers used for storage, and are they adequately labelled? |  | |  | |  |  | |
| Manual Handling – are staff aware of precautions/techniques to take  when lifting or moving objects? |  | |  | |  |  | |
| Floors in storage areas are free of rubbish & packing? |  | |  | |  |  | |
| Storage areas uncluttered? |  | |  | |  |  | |
| Do storage rooms have signs? |  | |  | |  |  | |
| RESIDENT TOILETS | YES | | NO | | N/A | ACTION / COMMENTS | |
| Is waste removed daily? |  | |  | |  |  | |
| Are all cisterns working satisfactorily and are they free of leaks? |  | |  | |  |  | |
| Is the use of deodorant blocks kept to a minimum? |  | |  | |  |  | |
| Do taps open and close easily and they are not damaged? |  | |  | |  |  | |
| Is there adequate drainage? |  | |  | |  |  | |
| Is toilet paper available? |  | |  | |  |  | |
| Is soap available for hand washing? |  | |  | |  |  | |
| Is the standard of cleaning satisfactory? |  | |  | |  |  | |
| RESIDENT BATHROOMS | YES | | NO | | N/A | ACTION / COMMENTS | |
| Are wet areas adequately drained and kept clear and clean? |  | |  | |  |  | |
| Are warning signs used when necessary to warn of wet floors? |  | |  | |  |  | |
| Do shower heads flow freely? |  | |  | |  |  | |
| Is the drainage adequate? |  | |  | |  |  | |
| Is the standard of cleaning satisfactory? |  | |  | |  |  | |
| HAZARDOUS CHEMICALS | YES | | NO | | N/A | ACTION / COMMENTS | |
| Hazardous Chemical Register available? |  | |  | |  |  | |
| Chemicals are clearly labelled? |  | |  | |  |  | |
| Chemicals stored in designated storage areas? |  | |  | |  |  | |
| Decanted bottles containing hazardous or other substances are labelled? |  | |  | |  |  | |
| PPE available, maintained and good working order? |  | |  | |  |  | |
| Storage areas clean and dry? |  | |  | |  |  | |
| Safety Data Sheets (SDS’s) available? |  | |  | |  |  | |
| Hazardous chemicals risk assessed, where required? |  | |  | |  |  | |
| MANUAL HANDLING | YES | | NO | | N/A | ACTION / COMMENTS | |
| Is there a trolley etc. readily available to move heavy items? |  | |  | |  |  | |
| Is there a suitable step ladder/stool readily available when reaching items in high places? Is the step ladder minimum 120 kg rated? |  | |  | |  |  | |
| Is the equipment provided in good working order? |  | |  | |  |  | |
| WORKSTATION LAYOUT – ERGONOMICS | YES | | NO | | N/A | ACTION / COMMENTS | |
| Adequate space between furniture? |  | |  | |  |  | |
| All items in good condition? |  | |  | |  |  | |
| Desk or bench top correct height for work performed? |  | |  | |  |  | |
| Chair correctly adjusted for user? |  | |  | |  |  | |
| Do chairs have suitable glides or castors (5 wheels) to  Suit floor surface? |  | |  | |  |  | |
| Cables secured behind work surface – well clear of feet? |  | |  | |  |  | |
| Footrest available if required? |  | |  | |  |  | |
| Computer screen at correct height? |  | |  | |  |  | |
| EQUIPMENT (wheelchairs / hoists etc.) | YES | | NO | | N/A | ACTION / COMMENTS | |
| In good condition (if unsafe, tagged and taken out of service) |  | |  | |  |  | |
| In use or stored appropriately? |  | |  | |  |  | |
| Suitable for purposed use? |  | |  | |  |  | |
| Maintenance checks/records in place and up to date? |  | |  | |  |  | |
| GAS CYLINDERS | YES | | NO | | N/A | ACTION / COMMENTS | |
| Are cylinders secured properly to prevent tipping? |  | |  | |  |  | |
| Are cylinders stored outside (minimum inside) |  | |  | |  |  | |
| Are the gas cylinders equipped with pressure regulator valves? |  | |  | |  |  | |
| Cylinders in use secured on trolley? |  | |  | |  |  | |
| PERSONAL PROTECTIVE EQUIPMENT | YES | | NO | | N/A | ACTION / COMMENTS | |
| Goggles provided? |  | |  | |  |  | |
| Ear Muffs provided, where relevant? |  | |  | |  |  | |
| Rubber Boots? |  | |  | |  |  | |
| Gloves? |  | |  | |  |  | |
| Reflective Vests? |  | |  | |  |  | |
| Surgical Masks? |  | |  | |  |  | |
| Gowns/Aprons? |  | |  | |  |  | |
| Sunscreen? |  | |  | |  |  | |
| PPE Register in place? |  | |  | |  |  | |
| SECURITY | YES | | NO | | N/A | ACTION / COMMENTS | |
| Security lights working? |  | |  | |  |  | |
| External doors and windows shut and lock securely with ease? |  | |  | |  |  | |
| Locks to external doors & windows easy to operate? |  | |  | |  |  | |
| External self-closing doors shut fully? |  | |  | |  |  | |
| Alarm Systems are operable? Clear sounding? |  | |  | |  |  | |
| WHS & IM POLICY | YES | | NO | | N/A | ACTION / COMMENTS | |
| Current CSH&W SA Policy statement signed & displayed in prominent area. |  | |  | |  |  | |
| OTHER: | | | | | | | |
|  | | | | | | | |
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|  | | | | | | | |
| CORRECTIVE ACTIONS | | | | | | | |
| Complete action plan below or use sites corrective action system to implement controls to eliminate or minimise the risk. | | | | | | | |
| List the corrective actions | | Priority  (H, M, L) | | By Whom | | | By When |
| 1. | |  | |  | | |  |
| 2. | |  | |  | | |  |
| 3. | |  | |  | | |  |