

## GENERAL SAFETY INSPECTION CHECKLIST

As part of EH&S's safety survey program we have compiled a list of the most common safety problems. This is not a list of every possible hazard, but can be utilized as a guideline to conduct your own safety surveys. If you have any questions please contact EH&S at ext. 5711 or 3302.

<b>Administrative</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Does the Injury and Illness Prevention Program identify the department chairperson/manager as the person responsible for overseeing the program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have employees been trained on the departmental IIP and is there a copy of the IIP readily available to them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are training records maintained and available for review by employees, EH&S and outside agencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are safety inspections conducted on a regularly scheduled basis? Are the inspection records readily available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are Material Safety Data Sheets (MSDSs) and an inventory of all hazardous materials used in the workplace on file and accessible to employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the departmental Emergency Operations Plan include a floor plan/map of the department, including emergency assembly point, procedures and routes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are employees/students instructed in emergency procedures (i.e., location of equipment and exits, location and use of fire extinguishers)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If applicable, are employee/student medical records, and records of exposure to hazardous substances maintained, current, and available for employees and their physicians?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>General Safety Concerns</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Are the exits (doorways), exit aisles or corridors free of obstacles and combustible storage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are fire doors not propped open with wedges?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are light fixtures working and are diffusers installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have all loose rugs or mats been secured or removed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have missing or loose ceiling tiles been repaired?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the area free of tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is overhead storage minimized, particularly heavy objects?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are overhead items (light) secured from falling during an earthquake?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### **Electrical Cords and Outlets**

**Yes No N/A**

Are extension cords, multiple outlet strips, or cube taps plugged directly into a wall outlet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are extension cords at a minimum 14 gauge (heavy-duty) and used only one appliance or fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are cords in good condition without splices, deterioration, taping, damage, or being sharply bent or pinched?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are extension cords prevented from running through walls, ceiling or doors, and from across aisles or passageways?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are extension cords grounded when servicing a grounded appliance or fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the multiple outlet strip have a circuit breaker?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are multiple outlet strip cords 6' or under?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do cube taps have no more than 3 outlets?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is clear access (36" clearance) provided to electrical panels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are electrical cover plates provided on all electrical switches or outlets?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### **Heaters and Fans**

**Yes No N/A**

Do all heaters have a working tip-over switch?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------

- |  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| Are all electric space heaters plugged directly into the wall? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are combustibles kept 24" from all sides and tops of heaters?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are fine finger guards provided on fans?                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all fans below head level or secured?                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Seismic Bracing and Earthquake Preparedness**

**Yes   No   N/A**

- |  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| Are furnishings over 42" high braced? (This includes file cabinets, bookcases, desk hutches, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is all shelving secured?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

\_\_\_\_\_  
Safety Coordinator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head's Signature

\_\_\_\_\_  
Date