

Location Health & Safety Representative - Monthly Workplace Inspection Report

Location: _____

Date: _____

Location H&S Rep: _____

1. GENERAL	Yes, No, N/A	Priority H/M/L	Hazard Identified (PEMEP)	Recommended Corrective Action	Date Hazard Resolved/Addressed
Is there a health and safety policy that is reviewed annually and is it posted?					
In Staff meetings, is health and safety an Agenda item?					
Is there a Location H&S Rep (LHSR) appointed for this location?					
Is the name of the LHSR posted?					
Is there a H&S binder / bulletin board?					
Are workers consulted regarding health & safety issues?					
Are all accidents / incidents/ hazards reported, recorded and investigated?					
Is there an Early and Safe Return to Work Program?					
Are memos signed off/initialled once read?					
2. Fire & Emergency Management					
Are workers aware of the emergency procedures?					
Is all electrical equipment CSA approved?					
Are all emergency exit signs illuminated and clearly visible?					
Test emergency light switch (standby lighting), if applicable.					
Are all corridors / stairways / hallways leading to emergency and fire exits free from obstruction?					
Test smoke & carbon monoxide detectors, if applicable. (Unobstructed, good visual condition)					
Are all fire extinguishers and pull stations wall mounted and free from obstruction at all times?					
Are all fire extinguishers checked monthly?					
Are the fire extinguishers suitable for the type of fire hazard (ABC)?					

2. Fire & Emergency Management (cont'd)					
Are all fire extinguishers professionally checked annually and the tag initialled?					
Can a worker cite when the last fire drill occurred? Date: _____					
Emergency supplies specific to your work location as per Emergency Policy D-003. Is there one (1) case of water available per person?					
Are panic bars on emergency doors working?					
Do all emergency exit windows and doors open easily?					
3. First Aid					
Are first aid kits stocked as per Reg. 1101? (listed in kit)					
Are first aid kits readily available?					
Is there a record of all first aid treatments? Attach copies of First Aid Log Sheet.					
Are names of all workers with valid certification posted?					
4. Lighting					
Are all interior and exterior areas adequately lit?					
Are light fixtures clean and in good repair?					
5. Office Areas					
Is the room temperature kept at a minimum 18°C?					
Are file cabinets secure with no risk of units tipping from top-heavy drawers?					
Are work areas free of clutter and tripping hazards?					
Are desk chairs adjustable and provide proper support?					
6. Hazardous Substances					
Are workers trained in WHMIS/consumer products?					
Are Material Safety Data Sheets current and readily available?					
Is the workplace continuously assessed for hazards that require the use of Personal Protective Equipment (PPE)?					
Is training provided on the correct use and maintenance of PPE?					

7. Personal Protective Equipment (PPE)					
Are workers fit-tested for N-95 respirators?					
Are N-95 respirators available?					
Is all PPE maintained in a sanitary condition?					
Is appropriate PPE worn when required?					
8. Organizational Training					
Is health and safety included in orientation training for all workers?					
Are Location Health and Safety Reps (LHSR) trained?					
Did health & safety training occur this month? If so, specify					
9. Unsafe Work Procedures					
Are workers aware of their roles and responsibilities?					
Are unsafe work practices documented and reported?					
Is there a Musculoskeletal Disorder (MSD) Awareness Policy?					
Are there protocols / procedures for lifting/transferring?					
Are workers trained in safe lifting/transferring and back care?					
Are workers trained to recognize MSD hazards, to use good body mechanics and to adopt neutral work postures?					
10. Infection Prevention and Control					
Is there an Infection Control Policy and procedures?					
Is there a Pandemic Plan?					
Are workers aware of and follow Standard Universal Precautions?					
Are there appropriate waste disposal procedures for sharps?					
11. Slips, Trips & Falls					
Are floors/walkways/doorways/stairwells free of tripping/slipping hazards?					
Is furniture arranged to prevent obstacles?					

12. Workplace Violence					
Is there a Bullying & Harassment, Workplace Violence Policy and procedures?					
Are workers exposed to workplace violence/aggression?					
Is there a Behavioural Support Policy that addresses challenging behaviours of persons supported?					
Is there training in appropriate crisis prevention and strategies?					
Are there documented reporting procedures?					
13. Other					
Are there any unaddressed employee health and safety concerns?					

Location Health & Safety Rep's Signature

Date

Supervisor's Signature

Date

Revised: February 22, 2018