



London Ambulance Service **NHS**  
NHS Trust

## **The Workplace Inspection Procedure**

## **DOCUMENT PROFILE and CONTROL**

**Purpose of the document:** is to ensure the London Ambulance Service NHS Trust (LAS) comply with the Workplace (Health, Safety and Welfare) Regulations 1992, and to ensure that all LAS premises provide a safe and healthy environment for its staff.

**Sponsor Department:** Health, Safety and Risk Department.

**Author/Reviewer:** Senior Safety and Risk Adviser. To be reviewed by April 2013.

**Document Status:** Final

<b>Amendment History</b>			
Date	*Version	Author/Contributor	Amendment Details
30/07/12	2.1	Senior Health, Safety and Risk Advisor	Review of monitoring section and addition of flowchart to Appendix 2
06/09/10	1.4	Safety and Risk Adviser, Governance and Compliance Manager	Included reference to Lockdown procedures, updated Responsibilities, Definitions added, defined Risk Assessment section, added information on Security Arrangements
12/04/10	1.3	Safety and Risk Adviser	Added 4.3
17/03/10	1.2	Safety and Risk Adviser	Reformatted, added scope, definitions
15/09/08	1.1	Senior Safety and Risk Advisor	Reformatted, added monitoring
01/03/07	0.1	Senior Safety and Risk Advisor	First draft

**\*Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

<b>For Approval By:</b>	<b>Date Approved</b>	<b>Version</b>
SMG	15/09/2010	2.0
Chief Executive	01/03/07	1.0
<b>Agreed by Trust Board (If appropriate):</b>		

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The RIB	10/10	Governance Administrator	GCT

<b>EqIA completed on</b>	<b>By</b>
12/04/010	Safety and Risk Adviser
<b>Staffside reviewed on</b>	<b>By</b>
	Staffside Representative

<b>Links to Related documents or references providing additional information</b>		
<b>Ref. No.</b>	<b>Title</b>	<b>Version</b>
	The Workplace (Health, Safety and Welfare) Regulations 1992	
	The Management of (Health and Safety at Work) Regulations 1999	
TP077	Security Management Policy	
TP027	Infection Prevention and Control Policy	
HS011	Incident Reporting Procedure	
TP055	Investigation of Incidents, PALS, Claims and Complaints policy	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

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## 1. Introduction

The Workplace (Health and Safety and Welfare) Regulations 1992 place duties on employers, to undertake regular work place inspections, with a written record being taken of such inspections.

## 2. Scope

This procedure applies to all premises owned, rented or used on a regular basis by the London Ambulance Service (LAS) NHS Trust. The procedure is intended to apply to any hazard within the workplace.

## 3. Objectives

1. To ensure the London Ambulance Service NHS Trust (LAS) complies with the Workplace (Health, Safety and Welfare) Regulations 1992.
2. To ensure that all LAS premises provide a safe and healthy environment for its staff.

## 4 Responsibilities

- 4.1 It is the responsibility of the Ambulance Operations Managers (AOM)/ Duty Station Officers (DSO) / Departmental Managers;
  - to carry out inspections of stations/premises within their unit together with a local Health and Safety Representative, on a quarterly basis,
  - to ensure that all hazards identified have been rectified or followed up within one month of the inspection.
- 4.2 It is the Estates Department's responsibility to arrange the maintenance or repair of hazards or items identified during inspections.
- 4.3 The Health, Safety and Risk Department will take responsibility for the submission of quarterly Premises Inspection reports to the Corporate Health and Safety Committee and for maintaining a central repository of completed inspection forms submitted to them.
- 4.4 It is the responsibility of the AOM/DSO/Departmental Manager, together with a local Health and Safety Representative, to carry out inspections of stations/ premises within their unit on a quarterly basis, recording findings on the LA156 Workplace Premises Inspection / Risk Assessment Form (Appendix 1).

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- 4.5.1 The AOM/DSO/Departmental Manager is responsible for bringing all hazards identified during inspections to the attention of the relevant Senior Line Manager/Health, Safety and Risk Department/Estates Department as appropriate, by sending a copy of the form to them.
- 4.5.2 It is the responsibility of the AOM/DSO/Departmental Manager to ensure that all hazards identified have been addressed within appropriate timescales depending on their severity.
- 4.6 It is the responsibility of the AOM/DSO/Departmental Manager to ensure that station workplace inspections are carried out and actions taken within their area of responsibility.
- 4.7 The Estates Department is responsible for arranging the maintenance or repair for hazards or items identified during inspections within a timescale agreed with the AOM/DSO/Departmental Manager. The timescale will depend on the degree of risk, but will normally aim to be completed within 1 month.
- 4.8 in addition to senior line manager monitoring of workplace inspections and completion of any identified work etc., the local Health and Safety Committees are responsible for monitoring and reviewing the findings from workplace inspections and reporting any high risk issues to the Corporate Health and Safety Group. Workplace Inspections will be a standing item on the agenda for these groups.
- 4.9 The Health, Safety and Risk Department is responsible for monitoring compliance of this procedure and preparing reports for each Corporate Health and Safety Group.
- 4.10 The Health Safety and Risk Department provides specialist advice when required and reviewing procedure on a three-yearly basis.
- 4.11 The Directors / Assistant Directors / Heads of Department are responsible for ensuring that workplace inspections are carried out within their directorate within the agreed timeframes and any identified high risks are recorded on the Corporate Risk Register where necessary.

## 5. Definitions

### 5.1 Workplace

Any office, ambulance station, garage, workshop, control suite or other premises owned or operated by the London Ambulance Service NHS Trust. (Please note this list is not exhaustive).

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- 5.2 Hazard**  
Something which has the potential to cause harm.
- 5.3 Premises**  
The buildings and sites in which staff and professionals work, carrying out the business of the LAS.
- 5.4 Assets**  
Materials and equipment used for carrying out the business of the LAS in delivering healthcare and in supporting the delivery of healthcare. An asset can be any piece of equipment, building, vehicles owned by the trust.
- 5.5 Security Incident**  
Any occasion where property is stolen, damaged or compromised.
- 5.6 Theft**  
The dishonest appropriation of property belonging to another with the intention of permanently depriving the other of it.
- 5.7 Criminal Damage**  
Without lawful excuse, destroys or damages property belonging to another intending to destroy or damage such property or being reckless as to whether such property is destroyed or damaged.

## **6. Procedure – Risk Assessments**

- 6.1 A Workplace Premises Inspection/ Risk Assessment Form (LA 156) (Appendix 1) should be completed in full by the AOM/DSO/Departmental Manager on a quarterly basis to ensure risk assessments are undertaken in relation to the following areas;
- Accommodation
  - Building and Security (physical security of premises and assets)
  - Fire
  - Health and Safety Information
- 6.2 Hazards identified in Part 2 of the form should be captured in greater detail in the Hazard Notification Sheet (Part 3) and the proposed action to be taken detailed.
- 6.3 The action to be taken to resolve the identified hazard and the date on which the action was completed should be recorded on the form by the AOM/DSO/Departmental Manager.

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- 6.5 All hazards identified during the inspection should be brought to the attention of the relevant department, (as identified under the RESP column of the form) by the line manager responsible for completing the inspection.
- 6.6 The local AOM/DSO/Departmental Manager should follow-up any identified outstanding items/ hazards one calendar month after instigation, and continue to do so until the issue is resolved.
- 6.7 The AOM/DSO/Departmental Manager is to ensure that identified hazards are rectified or followed up within agreed timescales. Non-urgent hazards should be followed up within one month. Hazards that represent high risks should be addressed immediately.
- 6.8 The Estates Department is required to arrange maintenance and repairs for hazards identified during workplace inspections within the agreed timescales.
- 6.9 The Health, Safety and Risk Department is to co-ordinate the inspections, collate the data and produce reports for the Local Health and Safety Working Groups.
- 6.10 Serious issues are to be monitored by the Corporate Health and Safety Group.

Hazards that present high risks are to be recorded on the Corporate Risk Register by the relevant Director/ Assistant Director/ Head of Department.

- 6.11 It is the responsibility of the AOM/DSO/Departmental Manager to ensure that workplace premises inspections are undertaken on a quarterly basis by completion of the LA156 form. If risks cannot be managed at a local level they are reported to the Corporate Health and Safety Committee and escalated to the Risk Compliance and Assurance Group (RCAG) via the risk reporting process, as outlined in Trust's Risk Assessment and Reporting Procedure (TP035).
- 6.12 The Workplace Inspection Flowchart (Appendix 2) outlines the processes for completion and follow-up of the premises inspections.

## 7. Security Arrangements

The Trust follows the Secretary of State's Directions issued to Health bodies and manages security issues via a Non-Executive Director, an Executive Director appointed as the Security Management Director (SMD) and a Local Security Management Specialist (LSMS). The SMD leads on security issues and is supported operationally by the LSMS, however it is a responsibility of all

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employees of the LAS to assist in the effective management of security. Where appropriate, assistance will be sought from other bodies such as the NHS Protect (NHSP), Police and the Trust Solicitors.

## **7.1 Prevention of Theft of Assets**

7.1.1 The Trust will be proactive in preventing, where practicable, employees being exposed to incidents of theft, damage or assaults.

7.1.2 On induction all staff will receive information concerning:

- Security in the workplace
- Personal security
- Incidents of violence and abuse and the support they will receive
- How breaches of security such as theft, loss or damage are to be reported

7.1.3 All operational staff as part of their initial training will receive advice about security of buildings and vehicles to prevent the loss of NHS assets.

7.1.4 The trust where appropriate will publicise any incidents of theft or damage to NHS property via media services with newspapers, radio and television. It will also participate in any campaigns coordinated by the CFSMS designed to raise awareness of the asset security within the NHS.

## **7.2 The Management of Thefts or Damage**

7.2.1 Following the discovery of a theft or damage to Trust property the affected employee must report it via the trust's incident reporting system.

7.2.2 The incident will be investigated by the line manager in accordance with the trusts Incident Reporting Procedure (HS011) and Investigation of Incidents, PALS, Claims and Complaints policy (TP055).

7.2.3 The LSMS will be notified via the reporting system and he/ she will ensure the incident is reported to the police.

7.2.4 The reported incidents of theft and damage will be reviewed every three months at the local health and safety working groups and where necessary to the Corporate Health and Safety Committee. Trends of theft, loss and damage will be reported to the RCAG.

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### **7.3 Lockdown Procedures**

- 7.3.1 The Trust is required to undertake a lockdown risk profile for its organisational sites and other specific buildings/areas.
- 7.3.2 Lockdown will occur when instructed to be carried out by Deputy Director of Operations, or any officer who has been delegated this responsibility in their absence.
- 7.3.3 The Trust must be prepared to implement these lockdown procedures where necessary to secure an organisational site against a threat.
- 7.3.4 The Trusts *Lockdown Risk Profile Procedure* sets out the arrangements for producing a lockdown risk profile for each organisational site or other specific building/area (including timescales).

### **8. Records Management**

- 8.1 A copy of the completed workplace inspection form should be retained by local Managers and copies forwarded to both the Health Safety and Risk and Estates Departments.
- 8.2 The Health, Safety and Risk Department will maintain a database on the corporate shared drive of all completed workplace inspection forms submitted to them and monitor compliance on a quarterly basis.

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<b>IMPLEMENTATION PLAN</b>				
<b>Intended Audience</b>	For all LAS staff			
<b>Dissemination</b>	Available to all staff on the Pulse			
<b>Communications</b>	Revised Procedure to be announced in the RIB and a link provided to the document			
<b>Training</b>				
<b>Monitoring:</b>				
<b>Aspect to be monitored</b>	<b>Frequency of monitoring AND Tool used</b>	<b>Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported</b>	<b>Committee/ group responsible for monitoring outcomes/ recommendations</b>	<b>How learning will take place</b>
Duties and compliance with the procedure	Quarterly Premises Inspection Reports	Health, Safety and Risk Department report to the Corporate Health and Safety Committee	Risk Compliance and Assurance Group	Dissemination of lessons via various mechanisms including recommendations from Corporate Health and Safety Group, Health and Safety Bulletins, local risk registers and action plans, etc
	Quarterly review of LA52 incident reporting data			
	Annual feedback from RIDDOR – learning and obtaining guidance on risk management within the workplace, from reported incidents related to injuries, disease and dangerous occurrences			

## Workplace Premises Inspection/ Risk Assessment Form

Form Completion Guidance:

- Save a copy of the form to your desktop,
- Use the mouse or Tab-key to select fields,
- Once complete, a form should be printed for signatures to be added.

Forms complete by hand should be written in black ink

### PART 1

Date:

Date of Last Inspection:

Premises:

Trade Union Safety Representative:

AOM/DSO/Manager :

Next Inspection Due:

**Inspections should be planned to be completed at the end of January, April, July and October.**

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## Guidance for 'Work Place' Inspection/Risk Assessment Completion

In compliance with the Health & Safety at Work Act 1974 all LAS premises are to carryout a Work Place Inspection/Risk Assessment on a three monthly basis.

It is the responsibility of the AOM/DSO/Manager in control of the premises to carryout the inspection in conjunction with the local Health & Safety Representative.

The Inspection Form should be completed in full with a copy being kept by the local AOM/DSO/Manager and additional copies (comprising of the front and rear hazard Notification Sheet only) forwarded to; ACAO, Sector Health & Safety Chairperson / Representatives, Human Resources Personnel Manager / Health, Safety & Risk Department

All relevant items identified as requiring attention should be forwarded to the appropriate department (signified in the far right-hand column) on the 'Hazard Notification' sheet (Part 3). Also forward a copy to the Health, Safety & Risk Department - For information only.

Please note: only issues that are of a serious or long standing Health and Safety or security nature should be identified on this document. Items such as broken locks or faulty light bulbs / tubes must be reported to the Estates Department via the HEAT system.

It is the local AOM/DSO/Manager's responsibility to follow-up any identified items/hazards that remain outstanding one calendar month after instigation.

Any queries regarding application or implementation of the 'Work Place' Inspection/Risk Assessment should be forwarded to either Snr. Safety & Risk Adviser or the Safety and Risk Adviser on 0207 783 2563

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## PART 2

RESP (Responsibility) KEY	
ST – Station	
EST - Estates	NA –Not Applicable

### A ACCOMMODATION

#### 1. Crew Areas

- A1.1. All areas clean and free of accumulated materials
- A1.2. All heaters clear of combustible materials
- A1.3. Corridors, stairs, access and exits unobstructed
- A1.4. All areas are thermally comfortable (Minimum 16°C 1hr after work commencing)
- A1.5. Effective means exist to control extremes of temperature (portable fans, open windows, etc)
- A1.6. Floor coverings – secure and free from tripping hazards
- A1.7. Communal facilities – in adequate condition of repair (Tables, sofa, stools, etc)
- A1.8. All electrical extension leads correctly installed (not 'daisy chained')

Yes	No	N/A	RESP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

#### 2. Kitchen

- A2.1. All surfaces clean and free of food / waste
- A2.2. Is all food stored correctly (packets closed, tubs sealed)
- A2.3. Are individual food lockers provided
- A2.4. Drains free of obvious blockages
- A2.5. All electrical extension leads correctly installed (not 'daisy chained')
- A2.6. Serviceable hand wash, cream and hand towel dispensers as appropriate
- A2.7. Hand washing information displayed over sink areas
- A2.8. Any visible signs of vermin / pest in area

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

(mice / mouse dropping, ants, etc)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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**3. Toilets and Washrooms**

- A3.1 All surfaces regularly cleaned
- A3.2 All floors regularly mopped using correct colour coded mop and bucket
- A3.3 Serviceable hand wash, cream and hand towel dispensers as appropriate
- A3.4 Hand washing information displayed over sink areas
- A3.5 Toilets and sinks regularly cleaned
- A3.6 Drains / toilets free of obvious blockages

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST

**4. Offices**

- A4.1 All areas clear and free of accumulated materials
- A4.2 All heaters clear of combustible materials
- A4.3 All areas thermally comfortable (Minimum 16°C 1hr after work commencing)
- A4.4 Effective means exist to control extremes of temperature (portable fans, open windows, etc)
- A4.5 Floor coverings – secure and free from tripping hazards
- A4.6 All furniture in good condition (chairs, desk, etc)
- A4.7 All electrical extension leads correctly installed (not 'daisy chained')
- A4.8 Adequate lighting levels in all office areas

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST

**B BUILDINGS AND SECURITY**

**1. External Area**

- B1.1. All perimeter fences / gates and external buildings in good state of repair and able to be secured
- B1.2 Building structure in good state of repair
- B1.3 All external pathways free from trip hazards
- B1.4 All drains clear of obvious blockages
- B1.5 Rock salt provided for winter months and correctly stored
- B1.6 No Smoking signage displayed in all entrances
- B1.7 Area clear of rubbish / litter

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**2. Garage Area**

- B2.1 Garage shutters kept closed at all times, i.e. not held open by the emergency stop button
- B2.2 All pedestrian walkways clear of trip hazards and obstruction
- B2.3 All pedestrian walkways clearly marked
- B2.4 Oil absorption granules readily available and correctly stored
- B2.5 All oil spillages covered using absorption granules and Estates Department notified
- B2.6 Problems relating to pests and vermin (pigeons)
- B2.7 Safety barriers (where fitted) secure and undamaged

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST

**3. Storage**

- B3.1 Cleaning materials stored in accordance with instructions
- B3.2 Storage areas kept clean and tidy
- B3.3 Combustible materials storage satisfactory
- B3.4 Flammable materials stored correctly

Yes	No	N/A	RESP.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

B3.5	Empty containers disposed of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B3.6	Gas cylinders stored correctly – empty and full segregated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B3.7	Cylinder storage cupboard closed and secured at all times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**4. General / Domestic Waste**

		Yes	No	N/A	RESP.
B4.1	Recycling bins available and being used (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
B4.2	Sufficient refuse bins available and undamaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
B4.3	Build-up of rubbish around bins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B4.4	Bulk / large rubbish items building up around bins / on station	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B4.5	Rubbish bins regularly emptied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**5. Sluice Facility**

		Yes	No	N/A	RESP.
B5.1	Cleaning materials stored in accordance with instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.2	Adjacent storage areas kept clean and tidy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.3	Colour coded mops and buckets stored appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.4	Floor area clear and free of standing water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.5	Sink (and drainer where existing) are kept clean and clear of accumulated containers and other debris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.6	Serviceable hand wash, cream and hand towel dispensers as appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.7	Eye wash kit readily available and in date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
B5.8	Spillage kits / D10 / NACDL Tablets available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**6. Security**

		Yes	No	N/A	RESP.
B6.1	All relevant internal and all external doors and windows have facility to be locked / secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
B6.2	All external security lighting operable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST

**7. Electrical**

Yes	No	N/A	RESP.
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B7.1	All electrical appliances regularly PAT tested in accordance with regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
B7.2	All test stickers / labels suitable visible on appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
B7.3	Date of last PAT test checked on X-Drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**C Fire**

**1. Fire Doors and Exits**

	Yes	No	N/A	RESP.	
C1.1.	Fire doors unobstructed / not propped or wedged open	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C1.2	Fire doors in working order (Automatic door closures operable, locks working, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C1.3	Visible damage to fire doors (damaged / missing intrumescent strips)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C1.4	Fire exits clearly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST

**2. Fire Safety**

	Yes	No	N/A	RESP.	
C2.1	Fire routes unobstructed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C2.2	Fire routes clearly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.3	External staff assembly points are clearly marked / signed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.4	Fire instructions positioned in obvious places	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.5	Fire instruction signs completed fully and correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C2.6	Suitable and sufficient fire signage displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.7	Fire extinguishers located at designated points	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.8	Fire extinguisher maintenance completed and record on fire extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EST
C2.9	Emergency lighting tested weekly and recorded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**3. Fire Detection System**

	Yes	No	N/A	RESP.	
C3.1	Fire detection system tested weekly and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

	recorded in record book	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C3.2	All manual call points unobstructed and clearly visible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C3.3	All ceiling mounted detectors unobstructed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C3.4	Six monthly Evacuation Drill completed and recorded in fire log book	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C3.5	Fire log book displayed in prominent location by Fire panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
C3.6	Battery operated smoke detector tested for audibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST

**D Health and Safety Information**

1.		Yes	No	N/A	RESP.
F1.1	HSAW abstract completed and displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.2	Health and Safety Bulletins are displayed and records filed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.3	Minutes of Health and Safety Committee meetings are on view	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.4	Name and Contact details for Safety representative are displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.5	Previous Workplace Inspection readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.6	Previous Fire Risk Assessments readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.7	Previous Electrical and Building Condition surveys readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.8	Fire Marshall Named and Displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ST
F1.9	First Aid Kit sealed/full and displayed in readily accessible area.				ST

**PART 3**

To:  
From:

**HAZARD NOTIFICATION SHEET**

**RESULTS**

Code	Nature of Hazard	Proposed Action	Action Taken	Date Completion

**PART 4**

**'Follow-up'** - The local AOM/DSO/Manager must follow-up any identified outstanding items/hazards 1 (one) calendar month after instigation.

Name of Local Manager .....Signed: .....

Name of Safety Representative ..... Signed: .....

