

Workplace Inspection Safety Checklist	Date Completed: Site/Area/Department:				
Completed by: ☐Manager/Supervisor ☐Designate ☐Health and Safety Committee					
Completed by Names:	•				
Instructions: 1. Read the description. 2. Check Yes, No or Not Applicable (for staff questions: if staff answe	ers correctly	check	yes).	Shaded area indicates items which may require further action or be	
a hazard. 3. Provide a detailed description of potential hazard(s) for shaded areas. ** Items identified as re	equiring REP	AIR - F	ollow	facility management work order process.	
ITEM	YES	NO	N/A	POTENTIAL HAZARD(S) - please describe	
Section 1: General					
Aisles, hallways, and emergency exits are clear of obstruction (Staff can move safely in the work environment)?					
Department furniture, equipment and electrical cords are in satisfactory condition?					
Safe Work Procedures are available where task is performed?					
Section 2: General Staff Questions					
Give an example of an applicable safe work procedure for the tasks you do?					
How/who do you report an injury near miss to?					
How do you access Safe Work Procedures in your work area?					
Section 3: Chemical					
SDS Inventory is available?					
SDS sheets or consumer labels are available?					
Chemical Containers are labeled?					
Cleaning/chemicals products are properly stored (locked cupboard/closet)?					
Section 4: Chemical Staff Questions					
Have you been trained to use SDS/Consumer labels?					
Can you describe the procedure used for departmental spills and code brown?					
Can you tell me what chemicals require you to use PPE/Is the PPE accessible?					
Section 5: Emergency Equipment					
Are first aid kits available and stocked?					
Is post exposure protocol package current and available?					
Are chemical/cytotoxic spill kits accessible and stocked?					
Are eyewash stations intact, clear of obstacles, inspected regularly and replacement bottle available?					
Are plumbed in eye wash stations clear of obstacles and in working order? Accessible at all times?					
Have fire extinguisher(s) been checked monthly and signed off?					
Section 6: Emergency Equipment Staff Questions					
Where is the first aid kit located and how often it is inspected?					
Where is the eye wash station and is the weekly inspection completed?					
Is there a first aid kid available?					

Sharps Containers - location are easily accessible and not overfull?

Is there a fire extinguisher/pull station?

Section 7: Patient Care Areas



ITEM	YES	NO	N/A	POTENTIAL HAZARD(S) - please describe		
Oxygen tanks are secured?						
Is safe patient and handling 'mini audit' process implemented?						
Patient Handling Logo matches assessment?						
Section 8: Patient Care Area Staff Questions						
Are there any concerns about availability/condition of sliders, slings, transfers belts, etc.?						
What is the process to ensure lift batteries are charged?						
Section 9: Slip, Trip and Fall						
Electrical/bed cords are secured (trip hazard)?						
Staff is wearing appropriate footwear?						
Wet floor signage is used?						
Section 10: Slip, trip and Falls Staff Questions						
Are there any concerns or incidents with electrical/bed cords secured (trip hazard)						
Are there any concerns or incidents with wet floors/slip hazards?						
Section 11: Material Handling and Storage Hazards						
Frequently used items are placed in easy to access areas?						
Heavy items are stored at waist height?						
Step stools/ladders are available when needed?						
Section 12: C.A.R.E. (Provincial Violence Prevention Program)						
Are patients being screened?						
Is the alert system in use?						
Patient screening tool is on chart - positive screens result in alert activated?						
Section 13: C.A.R.E. Environmental Risk Assessment						
Are there isolated areas in your work area?						
Are there places of concealment (stairwells, recessed doorways, unlocked storage, etc.)?						
Can staff see all incoming persons?						
It is possible to see what is at the end of each corridor or hallway?						
Waiting and work areas are free of objects that could be used as weapons?						
There are enough exits and adequate routes of escape?						
There are places where workers can go for protection in an emergency?						
Security devices are tested on a regular basis?						
Section 14 C.A.R.E: Staff Questions						
What is the procedure for immediate assistance/response?						
Are there concerns for personal safety?						
Additional Questions/items						