Guidance on Workplace Health and Safety Inspections



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1 Introduction

It is the policy of University Court that the University will 'take steps designed to progressively improve health and safety performance'.

The aim of self-inspection is for each School/Unit to assess its own health and safety performance against pre-determined standards in order to ensure compliance with legislation, to recognise achievement and, where necessary, to take remedial measures.

Schools/Units should regularly carry out a wide range of safety checks as part of normal procedures. Formal inspection is not intended to be a substitute for this regular checking. Indeed, one function of the inspection is to ensure that more specific checks and tests are being carried out.

In conducting the inspection, the team should attempt to discover the root causes of any unsatisfactory practices and/or equipment failings and where practicable positive recommendations should be made in an appropriate report.

The frequency of inspections should be based on an assessment of the degree of risks. The interval between inspections should, however, never be greater than one year.

2 Inspection Procedure

It is recommended that the inspection team should be formed. The team should be small in number; comprising of two or three people including the Safety Co-ordinator, who has a key role in arranging the inspection and who has the duty of preparing a written report for the Head of the School/Unit. The Safety Co-ordinator should also attempt to provide continuity and ensure consistency with previous inspections while, at the same time, developing the quality of the inspection process. Heads may wish to consider inviting trade union safety representatives and/or a suitable person from outside the School/Unit if they believe it will improve the quality of the inspection.

The University recommends the use of a basic checklist for completing the inspection as this ensures a structured inspection process and also ensures that items of high risk are not forgotten during the inspection. The first task for the inspection team should be to produce an inspection checklist which is appropriate for the risks in the workplace. An example checklist is given in Appendix 1 of this guidance. The checklist in Appendix 1 covers general health and safety matters which affect all workplaces and also more specific workplaces.

The checklist should be reviewed regularly and developed in the light of experience and to take account of any significant changes including legislation and standards. A checklist is only the basis for an inspection and inspection teams should not confine themselves solely to these points when carrying out an inspection.

The next step in the inspection process is to review the health and safety documentation produced by the School / Unit. This normally be done before the main inspection is performed.

The documents that should be reviewed include

- School / Unit Local health and Safety Policy;
- Minutes of the last three School / Unit Health and Safety Committee meetings;
- Previous inspection reports;
- A sample of risk assessments associated with the work performed in the School/Unit;
- Fire Safety Log Book.

The purpose of this is to ensure that appropriate records are being kept.

The team should then agree on the inspection route and any specific tasks delegated to individuals in the team.

It is important that, in addition to the checklist the team use their initiative and their senses during the inspection. They should, for instance:

- Look for items that may not be on the checklist;
- Listen for equipment that has not been properly maintained;
- Identify burning smells or smell for leaks of chemicals

When carrying out an inspection, the team should involve staff in the workplaces visited by asking questions e.g. have they seen risk assessments for their work activities and do they have any health and safety concerns about their workplace.

3 Inspection Reports

After conducting the inspection, the team should identify any unsatisfactory conditions / equipment failings and, where possible, should make positive recommendations in a report.

The report on the inspection should include:

- 1. the date, names of team members and a list of the precise areas/activities inspected;
- 2. positive findings, as well as details of the location and significance of any failings discovered;
- 3. recommendations for remedial action, including timescales and priorities;
- 4. details of who should carry out particular remedial actions;

Any delay in preparation of the report should not delay remedial measures or prevent immediate action. An example of a School / Unit inspection report form is given in Appendix 2 and an example Residence report form is given in Appendix 3.

The inspection report should then be sent to the Head of the School / Unit for their information/action. The report should then be signed by the head and a copy of the report sent to the Director of EHSS for monitoring purposes.

4 Actions by Heads

The Head of School/Unit should ensure that:

- School/Unit Safety Committee and trade union safety representatives, where appointed, are consulted on the precise arrangements for inspection;
- staff are instructed to assist the team during the inspection;
- inspection teams are appointed and appropriately trained;
- inspection teams have sufficient authority and are familiar with both the working practices of the School/Unit and the health and safety standards relevant to the premises and activities;
- sufficient time is allocated to the members of the inspection team to carry out inspections and associated work;
- inspections are completed on schedule;
- appropriate remedial action is, where reasonably practicable, undertaken promptly;
- records are kept of the inspections and of the completion of remedial action;
- copies of all records are sent to the Director of EHSS along with the Annual Safety Report Form for monitoring purposes;
- Heads are advised, where reasonably practicable, to undertake spot checks on health and safety (or be part of annual health and safety inspection) as this demonstrates managerial commitment.

Workplace Inspection Checklist

General Health and Safety (For All Workplaces and Work Activities)

A. Health and Safety Information

- 1. When was the last workplace inspection performed (inspections should be done on an annual basis)?
- 2. Have all the remedial actions recommended in the last inspection report been carried out (and if not why not)?
- 3. Have all members of staff and in particular new recruits been given access to copies of:
 - The University Health and Safety Policy Statement;
 - The relevant University Health and Safety Codes and Guidance publications;
 - The School/Unit's own Health and Safety Policy / Codes of Practice / Rules?
 - Other relevant guidance
- 4. Are all staff aware that Accidents and Dangerous Occurrences/Near Misses should be reported to the Director of EHSS and how staff should make such reports?
- 5. Are there procedures for reporting potential hazards within the School/Unit?
- 6. Has the School/Unit Safety Committee met during the last 12 months?
- 7. Are there adequate written minutes for this local committee and are they published in a manner which is accessible to all members of the School/Unit?
- 8. Are persons aware that the University operates a No-Smoking policy except in designated areas?

B. Fire Safety

- 1. Are there sufficient Fire Action Notices posted in appropriate locations?
- 2. In the event of an emergency evacuation, has someone been nominated to act as Assembly controller and to meet the Fire Service when they arrive?
- 3. Are all fire exit and escape routes, fire alarm points and items of fire fighting equipment clearly visible, unobstructed and appropriately indicated?
- 4. Are all fire doors marked as such and kept closed (except those on magnetic catches linked to the fire alarm system)?
- 5. Are there appropriate procedures (Personal Evacuation Plans) for the safe evacuation of disabled persons who may be present during an emergency evacuation of the building?

6. Is the 'Fire Safety Log Book' being kept up to date?

Are fire alarms tested at an appropriate frequency (once a week)? Has a fire drill been performed within the past year? Is the Emergency Lighting being tested every 6 months? Are the fire detectors tested every 6 months?

7. Have staff received appropriate fire training from the University Fire Safety Adviser within the past two years (if not, you should contact Mr. Ron Adams - the University Fire Safety Adviser as soon as reasonably practicable)?

C. First Aid

- 1. Are there an adequate numbers of first-aiders and/or 'Appointed Persons' in the School/Unit with respect to the risks within that School/Unit?
- 2. Are there sufficient First-Aid notices posted at appropriate locations in the School/Unit and are the names on those notices up-to-date?
- 3. Is there an adequate provision of first-aid box(s) kept in the School/Unit/Building?
- 4. Has a person been nominated to look after the First-Aid box and to ensure that the box is fully stocked?

D. Emergency Services

1. Are all members of staff aware how to contact the emergency services?

E. Training

- 1. Have all new members of staff been given appropriate induction training?
- 2. Have staff been provided with appropriate specialised training (e.g. in the use of equipment, substances etc) required for the work activities performed?
- 3. Is the training requirement of the School/Unit regularly reviewed e.g. by the local Health and Safety Committee ?

F. General Welfare

- 1. Are floors clean?
- 2. Are floor coverings Non-Slip?
- 3. Are there any tripping hazards (e.g. loose floor coverings, wires across access ways etc)?
- 4. Are desks/worktops intact and easily cleaned?
- 5. Is the lighting adequate for the work activity and in good working order?
- 6. Is the standard of general ventilation satisfactory for the type work undertaken?

- 7. Is the standard of heating affording an adequate level of comfort?
- 8. Is there a room thermometer to measure temperature?
- 9. Is there sufficient circulation space within the office to allow staff to get to and from their workstations safely?
- 10. Are the workstations suitable both for the person(s) using them and for the type of work being undertaken?
- 11. Where required, have adjustable window blinds been provided to attenuate sunlight?
- 12. Is there a supply of wholesome drinking water supplied within a reasonable proximity to the workplace?
- 13. Where drinking water dispensers are provided, are these subject to a cleaning/maintenance agreement with the suppliers?
- 14. Where such dispensers are of a bottled type, is the stock of water bottles kept in a cool, dark area?
- 15. Are there adequate toilet facilities within reasonable proximity of the workplace?
- 16. Is there an adequate facility for hand washing within a reasonable proximity to the office ?
- 17. Is there an adequate supply of soap, towels (or hot air hand drying) at this facility?
- 18. Is there accommodation for outdoor clothing to allow clothing to dry out if wet?

Office Health and Safety

A. Electrical Safety

- 1. Are all items of portable electrical equipment labelled as having been tested for electrical safety at the frequency set by the University?
- 2. Cube electrical adapters **MUST NOT** be used as they pose a fire risk. If more sockets are required use appropriate distribution boards).
- 3. Is the Area free from tripping hazards presented by trailing electrical or other cables?

B. Hazardous Substances

- 1. Has sufficient hazard information been provided for all hazardous proprietary products used in the office (e.g. Material Safety Data Sheets, Orange warning signs on containers etc.)?
- 2. Are staff specifically informed of any required 'Safe Systems of Work' which are to be followed when using these products?
- 3. Are significant quantities of hazardous products used in the office and if so have appropriate specific 'Control of Substances Hazardous to Health' (COSHH) risk assessments been produced for the use of these products (e.g. use of 'Spray Mount' etc)?
- 4. If a specific COSHH risk assessment has been produced, are the appropriate control measures identified being implemented?
- 5. Are all chemicals kept in appropriate containers which are clearly labelled including hazard labels where appropriate (e.g. cleaning fluids, glues etc)?

C. Equipment

- 1. Have all Display Screen Equipment (DSE) 'Users' been identified (see University Guidance on the Safe Use of DSE Equipment for definition of 'User')?
- 2. Have all 'Users' workstations been assessed for risk using the University form found in the publication entitled: 'Guidance Notes on the Safe Use of Display Screen Equipment'?
 - This document is available on the EHSS website at the following address: http://www.st-andrews.ac.uk/services/safety/webpages/DSE-guide/DSE-guide.html
- 3. Where failings in display screen equipment have been identified, have they been rectified?
- 4. Have all 'Users' completed the DSE computerised training package and completed the test at the end of this package (the training package can be accessed via the Environmental, Health and Safety Services webpage URL:

http://www.st-andrews.ac.uk/services/safety/webpages/dse-program/DSE manual.html

- 5. Are all DSE 'Users' aware that they have a legal right to request an eyesight test and that it must be arranged through the University's Occupational Health Adviser (Te: 2752, e-mail: jgm3)?
- 6. Are all items of mechanical cutting equipment adequately guarded to prevent contact with potentially hazardous moving parts?
- 7. Are all items of office equipment being used in line with the manufacturers safety instructions (e.g. filing cabinets being filled from the bottom up etc)?
- 8. Are photocopiers and laser printers located such that exhaust is not directed at workers?

D. Manual Handling Operations

- 1. Where reasonably practicable, has the work activity been designed to avoid manual handling operations?
- 2. Has a generic risk assessment of routine manual handling operations been produced? Are the control measures being implemented and/or enforced?
- 3. For tasks where there is a significant risk of injury due to a manual handling, has a specific risk assessment been carried out?
- 4. If a specific manual handling operation risk assessment has been produced, does the assessment identify the necessary control measures to eliminate or minimise the risks of the operations? Are these control measures being implemented?
- 5. Is there a suitable means of access to items being stored above head-height?
- 6. Are items being stacked above head height? (Items should not be stacked on shelves above head height).
- 7. Are heavy/awkwardly shaped items stored in position for easy access and lifting?

E. Office Housekeeping

- 1. Are passageways, traffic routes clear of slipping, tripping and falling hazards e.g. cables, boxes stock etc. ?
- 2. Are waste bins emptied regularly?
- 3. Is an effort made to ensure that the storage of empty cardboard boxes kept to a minimum?

F. Other Questions

Laboratory Health and Safety

A. General Laboratory Area

- 1. If necessary, is there a Code of Practice which staff and students should follow when working in this laboratory?
- 2. Is there good housekeeping in the laboratory?
- 3. Have all unnecessary items (e.g. boxes) been removed from the laboratory?
- 4. Are floors clean?
- 5. Are work surfaces intact and easily cleaned?
- 6. Are empty glass bottles stored where they cannot be knocked or kicked over?
- 7. Are properly designed carriers available and used for the transport of glass bottles / Winchesters?
- 8. Where health surveillance has been recommended in a risk assessment (e.g. exposure to animal danders for animal house workers), are relevant members of staff attending the Occupational Health Services?

B. Chemical and Biological Hazards

- 1. Have all procedures that involve chemical and biological hazards that may cause harm to human health or the environment been risk assessed?
- 2. Where Workplace Exposure Limits (WEL) have been assigned by the Health and Safety Executive, does the risk assessment identify the WEL and are control measures implemented to reduce exposure below the WEL?
- 3. Have all procedures involving the use of genetically modified organisms been risk assessed and the assessment been approved by the local Safety Committee, ratified by the Chemical and Biological Hazards Sub-Committee and if necessary, approved by the Health and Safety Executive?
- 4. Are Material Safety Data Sheets available for all substances that pose a risk to human health and/or the environment?
- 5. Are all chemicals clearly labelled?
- 6. Are very toxic chemicals (University Hazard Rating of 5) kept in locked stores?
- 7. Is there less than 50 litres of flammable solvent being stored in the laboratory?
- 8. Are flammable reagents and solvents stored in a suitable fire resistant cabinet or bins that contain spill trays?
- 9. Are the flammables stores properly labelled in accordance with the Health and Safety (Signs and Signals) Regulations 1996?

- 10. Are strong acids and alkalis stored in spill trays?
- 11. Are purpose made and properly labelled receptacles being used for waste sharps?
- 12. Are the fridges used for the storage of chemicals 'Spark Proof' (i.e. the thermostat is located outwith the storage cabinet)?
- 13. Are storage areas, fridges and freezers where infectious agents and/or toxic chemicals are kept suitably labelled according to the Health and Safety (Signs and Signals) Regulations 1996?
- 14. Are there appropriate arrangements and written records for the storage and disposal of waste toxic chemicals and biological agents?
- 15. Are autoclaves used for the disinfection of infectious agents regularly calibrated to verify that they operating effectively?
- 16. Are the chemical disinfectants being used verified that that they are effective against the relevant biological agents?

C. Radiation Hazards

- 1. Where applicable, are Certificates of Registration and Authorisation issued under the Radioactive Substances Act 1993 by the Scottish Environment Protection Agency (SEPA) posted in the work area?
- 2. Do all X-ray machines comply with the generic Authorisation issued by the Health and Safety Executive (HSE) under the Ionising Radiations Regulations 1999?
- 3. Are members of staff using open/closed radiation sources aware of the relevant University Local Rules for that type of source?
- 4. Have all users of radioactivity been registered as a 'Radiation Worker' and has the project they are working on been registered with the University Radiation Protection Service?
- 5. Have all projects been 'Approved' by the University Radiation Protection Adviser?
- 6. Are there suitable and sufficient School/Unit records for storage, use and disposal of radioactivity?
- 7. Are all users of lasers other than in the School of Physics and Astronomy been registered as 'Laser Workers' with the University Radiation Protection Service?

D. Equipment

- 1. Has all portable electrical equipment been tested for safety at the University's recommended testing frequency (see label on the equipment)?
- 2. Has Estates been notified of all 'Fixed Wired' electrical equipment?
- 3. Do all centrifuges have interlocked lids?
- 4. Has Estates been notified of all pressure systems?
- 5. Is a 'Safe Working Pressure' marked on all pressure vessels/systems?
- 6. Are all pressurised gas cylinders secured by restraining chains or bench clamps or other similar means?
- 7. Are gas cylinders sited away from doors or escape routes?
- 8. Are properly designed gas cylinder trolleys available for the transportation of gas cylinders?

E. Safe Systems of Work

- 1. Has a systematic survey been performed to identify all significant hazards in the workplace?
- 2. Where there is a significant risk to human health or the environment, has a suitable and sufficient risk assessment been performed?
- 3. Are suitable and sufficient written records kept of all risks assessments?
- 4. Have relevant employees been informed of all risk assessments associated with their work activities?
- 5. Are specific risk assessments been performed on the work activities of all expectant or breast-feeding mothers who have notified the Head of School/Unit?
- 6. Have the risk assessments identified appropriate control measures to eliminate or minimise the risks of the work activity and are the control measures being implemented?
- 7. Are hazardous areas identified and access restricted to authorised personnel only?
- 8. Are 'Permits to Work' required for any activities?
- 9. If such 'Permits to Work' are required, has an appropriate system been put in place, implemented and are all staff aware of the system?

F. Engineering Controls

- 1. Where fume cupboards are provided to control exposure to hazardous substances:
 - Are they inspected and tested every 14 months by a competent engineer (organised through Estates)?
 - Are automatic stops fitted to the sash on the cupboard(s) in this area?
 - If there are no stops, have arrowed labels be affixed to indicate the sill velocity?
- 2. Where other forms of local exhaust ventilation e.g. bench capture hoods, are used, are they subject to inspection and testing every 14 months?
- 3. Are Microbiological Safety Cabinets tested and inspected every 14 months?
- 4. Are all interlock mechanisms maintained in good working order?
- 5. Are other engineered controls maintained in good working order?
- G. Personal Protective Equipment (PPE)
- 1. Have all other means of controlling risks been tried before PPE has been issued?
- 2. Is PPE selected by a competent person?
- 3. Is the PPE issued positively assessed to ensure that it will protect against the hazards for which it has been provided?
- 4. If the PPE is not disposable, then is it regularly cleaned, inspected and maintained as specified by the manufacturer? (Are adequate records kept?)
- 5. In the case of respiratory and/or hearing protection, is it personal to the individual?
- 6. Does the work activity risk assessment regard the use of a specified PPE as mandatory? (If so, is this requirement complied with?)
- 7. Where the use of particular PPE is regarded as mandatory for the work, are appropriate signs posted which comply with the Health and Safety (Signs and Signals) Regulations 1996?
- 8. Are there appropriate storage facilities for PPE?
- 9. Are there sufficient stocks of PPE, especially respiratory protective equipment, so as to allow replacement if a defect is found?
- 10. In the case of PPE which may be contaminated by biological agents:
 - Is it always removed on leaving the work area?
 - Is it kept apart from uncontaminated clothing or equipment?
 - If the PPE may be autoclaved for waste disposal purposes, is this being carried out?
- 11. Are there suitable arrangements in place for the cleaning and/or decontamination of protective clothing?

H. Emergency Procedures

- 1. Are appropriate spill kits available to deal with foreseeable leaks and spills of hazardous substances?
- 2. Are workers trained to deal with foreseeable spills/leakages of hazardous substances?
- 3. Have plans been drawn up to deal with accidents and releases of hazardous substances?
- 4. In the case of biological agents, do these plans specify the appropriate decontamination and disinfection procedures?
- 5. Are there emergency 'Drench' shower facilities and if so are they regularly tested?
- 6. Are eye wash facilities provided?
- 7. If the eye wash facilities are in bottles, are these bottles regularly changed to ensure they are not past their 'Use By' date?
- 8. If the eye wash units are connected to mains water, are these facilities regularly tested to ensure they work properly and is this test recorded?

I. Manual Handling

- 1. Where manual handling operations are carried out, has a generic risk assessment of the significant hazards been performed? Are the control measures being implemented and/or enforced?
- 2. Where there is a significant risk of injury due to a manual handling operation, has a specific risk assessment been carried out?
- 3. If a specific manual handling operation risk assessment has been produced, does the assessment identify the necessary control measures to eliminate or minimise the risks of the operations? Are these control measures being implemented?
- 4. Is there a suitable means of access to items being stored above head-height? If there is no suitable means of access, items should not be stored above head-height.
- 5. Are items being stacked above head height? (Items should not be stacked on shelves above head height).
- 6. Are heavy/awkwardly shaped items stored in position for easy access and lifting?
- 7. Has appropriate training been provided to persons who are involved in manual handling?

J. Hygiene Control

- 1. Are there adequate toilet facilities in the Building?
- 2. Are there adequate washing facilities (with soap and towels) in relation to the work activities?
- 3. Is eating, drinking, smoking and application of cosmetics banned (and enforced) in laboratory areas ?
- 4. Is there provision of secure storage for outdoor clothing outwith the laboratory area or in secure cupboards/lockers within the area to prevent contamination?
- 5. Are there adequate welfare facilities available outwith the laboratory area where personnel can eat and/or drink?
- 6. Is there an adequate supply of wholesome drinking water?
- 7. Where the School/Unit has supplied drinking water dispensers, are these subject to a cleaning/maintenance agreement with the suppliers?
- 8. Where such dispensers are of a bottled type, is the stock of water bottles kept in a cool, dark area?

Other Questions

Workshops

A. Administrative procedures

- 1. Is there Local Rules/Codes of Practice for work within workshops?
- 2. Has the attention of all workshop users been drawn to these Local Rules / Codes of Practice?
- 3. Has the attention of all workshop users been drawn to the University's 'Code of Practice for Workshops'?
- 4. Have all users of the workshop received appropriate training in the use of the machinery in the workshop?

B. General Health and Safety Precautions

- 1. Are the fabric and condition of the workshop suitable for the work being performed?
- 2. Are there suitable eye wash facilities?
- 3. Are there suitable warning signs posted in the workshop that comply with the Health and Safety (Signs and Signals) Regulations 1996?

C. Cleanliness and Housekeeping

- 1. Is the workshop kept clean and tidy e.g. good housekeeping?
- 2. Are all items of workshop equipment suitably placed to avoid overcrowding and anchored to ensure stability?
- 3. Are all gangways and work areas clear of obstructions and or slipping hazards?
- 4. Are there written rules forbidding the wearing of outdoor clothing and jewellery etc in the workshop and are these rules implemented?
- 5. Are smoking, eating, drinking and applying cosmetics prohibited in the workshop and are these prohibitions enforced?
- 6. Are there materials and/or kits for dealing with foreseeable spillages?

D. Lighting

- 1. Is the general level of illumination of the workshop adequate for the work being carried out?
- 2. Is the lighting appropriate for machines with rotating parts?
- 3. Is suitable supplementary local lighting employed where required?

E. Temperature and Ventilation

- 1. Is the ambient temperature in the workshop suitable for the work activity being carried out?
- 2. Is a thermometer available to measure the ambient temperature?
- 3. Is the general ventilation in the workshop adequate?
- 4. Where necessary, is there adequate Local Exhaust Ventilation (LEV) and is it working efficiently?
- 5. Is LEV maintained on a regular basis and is it inspected every 14 months by a 'Competent Person'?

F. Noise

- 1. Do workshop operations produce an excessive or uncomfortable noise level (Guide: Is it necessary to raise one's voice substantially to speak to someone 1 metre away)?
- 2. If so, has a noise survey of the workplace been carried out?
- 3. Where practicable, have suitable engineering controls been implemented to control noise levels at source?
- 4. Where 3 is not practicable, have appropriate Personal Protective Equipment (e.g. ear defenders or ear plugs) (PPE) been issued to workers?
- 5. Where such PPE is required, is it chosen and issued by a 'Competent Person'?
- 6. Where noise levels exceed 90 dB(A), have mandatory notices for the use of PPE been posted?

G. Hazardous Substances

- 1. Have suitable Control of Substances Hazardous to Health (COSHH) risk assessments been performed on procedures that use hazardous substances (this includes biological as well as chemical agents)?
- 2. Do relevant staff have access to COSHH risk assessments that relate to their work activities?
- 3. Are staff aware of the control measures identified in the COSHH risk assessments and are these control measures being implemented?
- 4. Are there any special first-aid requirements for the work being carried out in the workshop and are the first-aiders in this area aware of these special requirements?
- 5. Are there appropriate arrangements for dealing with foreseeable spillages of hazardous substances?
- 6. Is there a system for the disposal of waste hazardous substances and are these arrangements being implemented?

H. Personal Protective Equipment (PPE)

- 1. Are requisite items of Personal Protective Equipment (PPE) supplied to the workers?
- 2. Are other means of controlling risks investigated before PPE has been issued?
- 3. Does a 'Competent Person' choose and issue PPE?
- 4. Are there suitable facilities to store, clean, maintain and inspect relevant PPE?
- 5. Where wearing PPE is mandatory, are appropriate signs posted which comply with the Health and Safety (Signs and Signals) Regulations 1996?

I. Electrical Equipment

- 1. Are all items of portable equipment regularly inspected and tested at the recommended frequency approved by the University?
- 2. Has Estates been notified of all 'Fixed Wired' electrical equipment?
- 3. Are Residual Current Breaking Devices installed in the workshop?

J. Lifting Operations

- 1. has a risk assessment been carried out on all lifting operations?
- 2. Are heavy lifting operations carried out using appropriate lifting equipment?
- 3. Has Estates been notified of all lifting equipment provided in the workshop (so that the University's Insurers can inspect the equipment as required by the Lifting Operations and Lifting Equipment Regulations 1998)?
- 4. Is a Safe Working Load (SWL) marked on each piece of lifting equipment?
- 5. Are suitable and sufficient head, hand and foot personal protective equipment been issued to workers?
- 6. Are operators of the equipment trained in its use and are there written records of such training?

K. Manual Handling Operations

- 1. Has a generic risk assessment of routine manual handling operations been performed? Are the control measures being implemented and/or enforced?
- 2. Where there is a significant risk of injury due to a manual handling operation, has a specific risk assessment been carried out?
- 3. If a specific manual handling operation risk assessment has been produced, does the assessment identify the necessary control measures to eliminate or minimise the risks of the operations? Are these control measures being implemented?

- 4. Is there a suitable means of access to items being stored above head-height? If there is no suitable means of access, items should not be stored above head-height.
- 5. Are items being stacked above head height? (Items should not be stacked on shelves above head height).
- 6. Are heavy/awkwardly shaped items stored in position for easy access and lifting?

L. Equipment

- 1. Has all hazardous machinery in the workshop been identified and assessed with respect to associated risks?
- 2. Is the use of hazardous equipment restricted to appropriately trained staff only?
- 3. Where necessary have hazardous machines been fitted with appropriate guards?
- 4. Is the guard the correct type with respect to the risks associated with the machine (on a priority scale of fixed guard, interlocked guard, semi and fully automatic guard, two key, two hand guard, detector guard etc)?
- 5. Is the guarding being used by the workers and if not why not (Choice of guard may be interfering work activity and thus an alternative type of guard may thus be more appropriate)?
- 6. Do all work tools comply with the Provision and Use of Work Equipment Regulations 1998?
- 7. Are all work tools in good condition and suitable for the work activities they are used for ?

M. Pressure Systems

- 1. Has Estates been notified of all pressure systems?
- 2. Have all pressure systems been clearly marked with a 'Safe Working Pressure' (SWP)?
- 3. Are all interlocks and safety devices on pressure vessels fully functional and adequately maintained?
- 4. Are there rules enforced that strictly control the use of compressed air equipment?

N. Occupational Health

- 1. Has appropriate health surveillance been implemented where identified as a control measure in a risk assessment?
- 2. Are staff aware that they may contact the Occupational Health Adviser about health problems related to their work activity?
- 3. If dermatitis is a problem, have appropriate protective creams (on the advice of the Occupational Health Adviser) been provided?

- 4. Do workshop activities involve vibration to the extent that vibration related injuries (e.g. vibration white finger) might be a potential problem?
- 5. Is there a positive policy for purchasing tools / equipment with vibration suppression filters?

University of St. Andrews

Report of Health and Safety Inspection

1. School/Unit					
2. Date of Inspection					
3. Team Members					
4. Records (The following records)	rds were	e viev	ved by t	he team)	
	Yes	No	N/A	Comments	
Accident					
Fire					
Fire Drills					
Fire Alarm Tests					
Automatic Detectors Tests					
Emergency Lighting Tests					
Risk Assessments					
General					
COSHH					
Manual Handling Operations					
Display Screen Equipment					
Lasers					
Project Forms					
Radiation Projects					
Genetic Modification Projects					
Inspections					
Portable Electrical Equipment					
Local Exhaust Ventilation					
Fume Cupboards					
Biological Safety Cabinets					
Pressure Systems					
		1		T	
Others					

5. Details of Inspection

Areas/Activities Inspected	Location and significance of failing(s) discovered	Recommendations for remedial action (Include timescale and priorities)	Action By

5. Details of Inspection

Areas/Activities Inspected	Location and significance of failing(s) discovered	Recommendations for remedial action (Include timescale and priorities)	Action By

This report must be submitted to the Head of School/Unit for information/Action
Received by the Head of School/Unit
Comments

The completed report should be returned to the School/Unit Safety Co-ordinator and a copy forwarded to the Director of EHSS for monitoring purposes.

University of St. Andrews

Report of Health and Safety Inspection of Residences

1.	Residence / Park / Unit
2.	Date of Inspection
3.	Team Members

4.	Records (The following records	were viewed by the	e team)
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	YES	NO	N/A	Comments
Accident Reports Book				
Fire				
Fire Drills				
Fire Alarm Tests				
Automatic Detectors Tests				
Emergency Lighting Tests				
Fire Risk Assessment				
Fire Log Book				
Fire Certificate				
Risk Assessments				
General				
COSHH				
Manual Handling Operations				
Display Screen Equipment				
(DSE) Workstation				
DSE User Training				
PUWER (Kitchen Equipment)				
PUWER (Other Work				
Equipment)				
Water Treatment				
Workplace Regulations				
New and Expectant Mothers				
(Where Applicable)				
Records				
Local Rules				
COSHH				
Food Safety				
Training				
Inspections / Tests				
Portable Electrical Equipment				
Ventilation Ducting				
Steam Pressure Systems				
Others				
Pest Control				

5. Details of Inspection

Areas/Activities Inspected	Location and significance of failing(s) discovered	Recommendations for remedial action (Include timescale and priorities)	Action By

5. Details of Inspection

Areas/Activities Inspected	Location and significance of failing(s) discovered	Recommendations for remedial action (Include timescale and priorities)	Action By

This report must be submitted to the Director of Residential and Business Services for information / action and a copy retained on file

Received	by the Director of Residential and Business Services	
Date		
Comment	ts	

The completed report should be returned to the School/Unit Safety Co-ordinator and a copy forwarded to the Director of EHSS for monitoring purposes.