

SAMPLE using TEMPLATE 1

Title: 8.1 Inspections by Managers 8.2 Inspections by JHSC or HS Representative 8.3 Operator Pre-Use Inspections	Date of Issue: July 2005
Approved by: John Idnc	Review / Revise Date: July 2006
Location: all facilities and equipment	

PURPOSE

This procedure provides a format for ensuring that workplace inspections are conducted and consistent.

SCOPE

This standard applies to all areas of the workplace.

Definition: Inspector refers to Management, Supervisors, workers, operators of equipment or machinery and members of the Joint Health & Safety committee and / or worker representatives. It does NOT refer to a MOL inspector.

STANDARDS / PROCEDURES

1. Inspectors will use the following tools to conduct appropriate inspections:
 - a) Walkthrough Inspection Instructions,
 - b) Inspection Checklist,
 - c) Inspection Worksheet,
 - d) Previous inspection report(s),
 - e) Incident/injury reports to review if corrective action, if needed, has been taken.
2. Establish an annual documented schedule for workplace inspections.
3. Any hazards or unsafe conditions observed while conducting the inspection are corrected, immediately, if possible. This includes notifying the manager of the area where the hazard was identified and recording the notification on the inspection Worksheet.
4. A minimum of 2 employee contacts or activities will be conducted during each workplace inspection.
5. Those conducting the inspection must sign the original completed inspection worksheet.
6. Completed inspection reports are posted on the health and safety board within one week

after completion.

7. After the inspection:

- The Inspectors will forward the original, completed worksheet and checklist to the Senior Management within one week of the date of inspection.
- The Senior Management will in turn review and, forward copies to each appropriate manager(s) to action the identified items.
- The Inspector establishes a timeframe to correct hazards subject to review by Senior Management.
- Each manager, by forwarding an updated Monthly Inspection Worksheet, notifies the Senior Management of action taken to resolve the identified hazard and the date of resolution.
- The manager will report the status of required action at the manager's meeting the month following the inspection.
- Senior Management receives a copy of the updated Worksheet.
- Any action points still outstanding at the manager's meeting require an action plan with a proposed date for resolution.
- If a new hazard is created, it must be rated (ABC), and recommendations for corrective action developed including assigned timeframes, documentation (who, what, when) and a follow-up documented report.
- Specific inspection schedule with dates and participants must be documented.

ROLES AND RESPONSIBILITIES

Executive Managers Element 11.1 (h)	Conduct and record semi-annual workplace inspections. Review all other workplace inspections
Manager Element 8.1 (a)	Conduct and record quarterly workplace inspections of their assigned work areas. Review all workplace inspections conducted by supervisors and JHSC Worker Members/Worker H&S Representative.
Supervisors Element 8.1(a)	Conduct and record weekly workplace inspections of their assigned work areas, (project sites, yard, shop, etc). Conduct and record pre-project workplace inspections. Review all workplace inspections conducted by JHSC Worker Members/Worker H&S Representative
JHSC and/or Worker Rep Element 8.2(a)	Conduct and record monthly workplace inspections of all projects sites, yard and shop. Forward inspections to management for review and response if applicable.
Operators Element 8.3(a)	Conduct and record daily pre-shift inspections of all equipment or machinery used. Forward all relevant documentation to appropriate management.

COMMUNICATION

Written	Introduced at Orientation Reviewed annually with all employees Health & Safety Manual
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TRAINING

All Executive Managers, Managers, Supervisors, JHSC Members and/or Health and Safety Representative will attend Workplace Inspection training within three months of assuming their position.

Directors and Managers ensure all employees asked to conduct inspections receive training regarding “how to conduct an inspection” prior to their first inspection.

EVALUATION

Management evaluates the compliance and effectiveness of this procedure at least annually and then reflects results through a performance measure.

REFERENCE MATERIALS

Occupational Health and Safety Act, Section 8 and / or 9

WORKPLACE INSPECTION CHECKLIST FOR OFFICE ENVIRONMENTS

page 1 / 4

	☑		☑
Walking Surfaces		Fire Prevention	
Walkways free of obstacles		Extinguishers available & accessible	
Cords anchored or covered		Extinguishers/hose cabinets dated monthly	
Floor coverings in good condition		Pull stations accessible	
No slip/trip hazards present		Electric cords/outlets in good condition	
Warnings posted when floors are wet		Electrical outlets not overloaded	
		Fire exits clear of obstruction	
Furniture/Office Equipment		Fire doors closed	
In good mechanical condition		Fire exit signs lit	
Properly assembled			
Properly adjusted		Security	
Secure from tipping		Employees/visitors have ID badges	
Free from sharp edges/corners		Visitors have safety rules	
Dangerous parts properly guarded			
Emergency switches accessible (Only access to Fire Extinguishers checked)			
Preventative maintenance program established for equipment & tools (PD 3-4)		First Aid	
Loose clothing/jewelry/ID badges secured		First aid kit available at First Aid Station in main photocopy room	
Appropriate for work being done		First aid kit checked monthly	
Defective equipment properly identified		WSIB poster 82 beside the kit	
Unnecessary items removed		Certificates of first aiders current & posted	
Employees instructed on safe/proper use		First aid log sheet available & in use	
Electrical cords at workstation secured			
		Protective Clothing/Equipment	
Bookcase/Shelves/Cabinets		Equipment/clothing provided where required	
Secured from tipping		(Including safety kits and cellular phones)	
In good condition		Equipment/clothing used where required	

		page 2/ 4	
Drawers/doors closed when not in use		Equipment/clothing in good condition	
One drawer of filing cabinet open at a time		Employees trained in usage	
Material safely stored/stacked/piled		Are areas appropriately signed	
Heavier or commonly accessed items between knuckle and shoulder height		Do employees have/wear proper PPE when they visit other workplaces	
Step stools available, if required			
Environment		Posted Information	
		OH&S Act and Regulations	
Light levels adequate		OH&S Policy	
Air quality adequate		Floor Warden/first aider names	
Temperature and humidity adequate		Joint Health & Safety Committee meeting minutes	
People dressed appropriately for season		Early & Safe Return To Work program	
Air/temperature units unobstructed		Training	
Noise levels appropriate		Employees aware of emergency procedures	
Hazardous materials properly labeled		Employees aware of security procedures	
Hazardous materials properly stored		Employees provided information and instruction to protect their Health and Safety	
Unexpired Material Safety Data Sheets are available		Staff Training up-to-date	
Housekeeping satisfactory			
No construction hazards present		Procedures	
		Proper use of ergonomic equipment	
		Proper use of ergonomic equipment	
		Procedures for manual materials handling in/around inspection area	
Disabled		Other Unsafe Acts/Conditions	
Required accommodations provided		Contractor infractions (e.g. safe use of ladder)	
Accommodations provided are functional		Randomly ask employees about “near misses”	

Employee & Supervisor Contacts/Observations:

page 3/ 4

1.

2.

3.

4.

*Note: To make the checklist industry-specific, and to meet the requirements for elements 8.1 (c) and 8.2 (b) add your company's own areas/structures/equipment and any other relevant items.

SAMPLE

WORKPLACE - INSPECTION WORKSHEET

page 4/ 4

Inspection Area: _____ Month: _____
 Date of inspection: _____

TYPE OF HAZARD	DETAILS OF HAZARD	LOCATION HAZARD	RATING (A,B,C) ¹	REPEAT ITEM [Y / N]	ASSIGNED TO	DATE ASSIGNED	RECOMMENDED ACTION	DETAILS OF ACTION TAKEN/ NOT	DATE RESOLVED
Chemical									
Physical									
Biological									
Stress									
Work Process/ Design									
Safety Hazard									

Inspection conducted by (Name & Signature required): _____

Additional Comments:

C.C. Senior Management [insert name]

¹ A = high risk

B = medium risk

C = low risk

(see element 4.1 for more details)

