

Four Focus Items for Work Area Inspections

Picture This



Workplace Inspections

! help to identify and record hazards for corrective action. Regular inspections are an important part of your workplace health and safety program.

WHY INSPECT?

- Listen to concerns
- Gain further understanding of jobs and tasks
- Identify existing and potential hazards
- Determine underlying causes of hazards
- Recommend corrective action
- Monitor steps taken to eliminate hazards or control the risk

TYPES OF INSPECTIONS

- Ongoing/daily
- Pre-operation
- Periodic

HAZARDS TO LOOK FOR

- Safety:** inadequate machine guards, unsafe conditions or practices
- Biological:** viruses, bacteria, fungi, parasites
- Chemical:** solids, liquids, vapours, gas, dust, fumes, mists
- Ergonomic:** repetitive and forceful movements, awkward postures, workstations, tools, equipment
- Physical:** noise, vibration, energy, weather, temperature, electricity
- Psychosocial:** stress, burnout, bullying, harassment, violence

INSPECTION TIPS

- Look up, down, around and inside.** Be methodical and thorough.
- Clearly describe each hazard** and its exact location in your notes as you find them. Take photos if needed.
- Draw attention** to the presence of any immediate danger.
- Shut down and "lock out"** any hazardous items that cannot be brought to a safe operating standard until repaired.
- Never ignore any item** because you do not have knowledge to make an accurate judgement of safety.
- Ask questions,** but do not unnecessarily interfere with work activities or create a potentially hazardous situation.
- Do not operate equipment.** Ask the operator for a demonstration.
- Consider what will happen** if the item is both stopped and moving.
- Factor in the way the work** is organized and the work pace.
- Do not rely on your senses.** You may have to measure levels of exposure to chemicals, noise, radiation or biological agents.

INSPECTION REPORT

Inspection Location: _____ Date: _____
 Department/Areas Covered: _____ Time: _____

Items and Locations	Hazard(s) Observed	Report Item Y/N	Priority A/B/C	Recommended Actions	For Future Follow-up		
					Person Responsible	Action Taken	Date

Copies to: _____ Inspected by: _____