

OCCUPATIONAL HEALTH AND SAFETY UNIT

POLICY NOTICE - OHSU P7 (1996)

DEPARTMENTAL HEALTH AND SAFETY INSPECTIONS



Introduction

The Health and Safety Executive is placing increasing emphasis on formal systems of inspection, monitoring and auditing for showing compliance with statutory health and safety duties (see ref.1).

This policy describes the procedure in force in the University for the self-inspection of Departments and briefly introduces procedures for central monitoring and auditing of the safety management at Departmental level.

NB *The University has a number of different designations of senior management posts which in the context of the organisation of health and safety, are regarded as synonymous. For the purposes of this code of practice, "Head" includes the designations of director and managers of other units. Similarly, "Department" includes the terms, School, Centre, Unit, Institute, etc.*

Self Inspection Within Departments

The purpose of formal Departmental self-inspection is to enable each Head of Department to be assured that standards laid down by the University and UK legislation are being observed. The principal ingredient of the inspection is a physical check to identify the presence of hazards where control may require attention. This involves visiting each workplace and critically examining it for hazards. An inspection of a Department is not a substitute for routine or maintenance checks: one function of the Departmental self-inspections is to monitor the conduct of these more specific checks and tests.

In addition to the physical check of the workplace, another important element of Departmental inspection is to confirm that correct procedures are being followed. For example, the inspection should verify:-

- ! that risk assessments are being carried out in accordance with the relevant legislation and are being brought to the attention of those at risk (eg from substances hazardous to health, manual handling, personal protective equipment, work equipment, etc);
 - ! the adequacy of training
 - ! that the management arrangements are working and if they are not, why not.
- and so on.

Inspection Procedure

1 **Heads of Departments** must ensure that:-

- i) all areas of their Department are inspected on a quarterly basis, by a team drawn from their staff.
- ii) arrangements are made for one of these inspections to be the annual full-scale inspection which must take place during the time period specified for that Department in Appendix 1. This full-scale inspection must include a review of the Department's arrangements for health and safety management.
- iii) any remedial action identified as necessary is taken, as far as is reasonably practicable.
- iv) copies of the annual full-scale inspection reports are sent to the University Safety Adviser.
- v) Departmental Safety Committees or equivalent bodies are consulted regarding the inspections.

2 The **Inspection Team** must have sufficient experience and be familiar with both the work-practices of the Department and relevant health and safety standards. The full-scale annual inspection should be carried out by this team. However, in Departments which are large and/or geographically widespread it is recommended that the quarterly inspections be carried out by Safety Monitors who are responsible for a particular unit of the Department (see Page 14 OHSU G10 Code of Practice for Departmental Management of Health and Safety).

The main Inspection Team should normally consist of no more than 3 members, made up of:-

- i) The Departmental Safety Co-ordinator (DSC) or Head of Department, as leader.
- ii) a Trade Union safety representative who should have experience of the type of work conducted in the area.
- iii) one other member of the Department (or of another Department).

A member of the Occupational Health and Safety Unit will attend some Departmental inspections. Training of members of the Inspection Teams and Safety Monitors will be arranged by the Occupational Health and Safety Unit

3 The **Inspection** should be based on a check-list. Checklists are useful as an aide-memoire to highlight hazards and correct working procedures and to prompt the inspection team to ask the right questions. The check-list should take the form of a series of questions relating to the work area or activities, all of which require an answer. The questions should be asked in such a way that no further action is required whenever the answer is 'yes'. Where the answer 'no' appears

remedial action will be required.

An example of a check-list is given as Appendix 2. The check-list consists of a comprehensive set of typical questions to be asked as part of the inspection process.

It is recommended that Departments tailor the list to the Department's specific activities. The resultant Departmental check-lists should not be seen as being cut in stone; they should be reviewed regularly and developed in the light of experience and changes in legislation and standards.

The full-scale annual inspection should cover all areas indicated in the Departmental check-lists. However, it should be noted that some quarterly inspections could concentrate on specific areas only eg electrical safety standards, the Control of Substances Hazardous to Health Regulations etc.

Although check-lists should be used as the basis for the inspection, they should not constrain the Inspection Team or Safety Monitors or prevent it from identifying other potential problems.

During the inspection, the Inspection Team or Safety Monitors should attempt to discover the root causes of any unsatisfactory conditions that they find, and, where possible, should make positive recommendations for addressing the underlying problems as well as their symptoms.

- 4** A **Written Report** on inspections must be submitted to the Head of Department. In addition a report of the full-scale annual inspection must be sent to the University Safety Adviser within the timescale indicated in Appendix 1.

It is suggested that the reports take the form of a series of Health and Safety Inspection Recording Forms. An example of such a form is reproduced as Appendix 3. Such forms are useful for collating information especially where the Department has been split up into functional units for inspection purposes.

It is the responsibility of the Head of Department to ensure, as far as is reasonably practicable, that appropriate action is taken on the findings of the inspection.

Central Monitoring and Auditing

Following the main annual Departmental Safety Inspection the Safety Adviser will arrange with the Head of Department for a monitoring inspection to be carried out by the Occupational Health and Safety Unit. This type of inspection will be similar to a departmental inspection but may (depending upon circumstances) concentrate on a particular area type of work. In addition the Occupational Health and Safety Unit will carry out a management systems audit of each Department.

Following both the monitoring inspection and audit the Safety Adviser will submit a report to the Head of Department.

The Safety Adviser will prepare an annual report on the operation and effectiveness of the system as a whole throughout the University and will submit this report to the University Safety Committee which shall review the report and recommend to Council an Action Plan for ensuring that any deficiencies in the system are rectified within an appropriate time scale.

NB More detailed guidance on carrying out Departmental Inspections can be found in OHSU G10 (1995) Code of Practice for Departmental Management of Health and Safety.

References

- 1 Education Services Advisory Committee - "Health and Safety Management in Higher and Further Education: Guidance on Inspection, Monitoring and Auditing. ISBN 0-11-886315-0.

Appendix 1

MAIN ANNUAL INSPECTION AND REPORTING DATES BY SCHOOL / DEPARTMENT.

School / Department	Main Annual Inspection to be completed by	Reporting Date
<p><u>Group 1</u></p> <p>Music Theology & Religious Studies Health & Physical Education Sciences Electronic Engineering & Computer Systems Residential Services Students Union University Farm Biocomposite Centre</p>	31st March	1st May
<p><u>Group 2</u></p> <p>Cymraeg English & Linguistics (inc ELCOS) History & Welsh History (inc Archeology) Biological Sciences (inc Treborth & Penyffridd) Ocean Sciences (inc UCES) Estates Arid Zone Studies Institute of Environmental Studies</p>	30th June	1st August
<p><u>Group 3</u></p> <p>Accounting, Banking & Economics (inc Inifinet, MBA, IFM) Continuing Education Sociology & Social Policy (inc CSPRD) Community, Regional & Communication Studies Education Mathematics Administration Physical Recreation</p>	30th September	1st November
<p><u>Group 4</u></p>	31st December	1st February

Modern Languages Psychology (inc Dyslexia) Nursing & Midwifery Studies Radiography Education Agriculture & Forest Sciences (inc Henfaes Farm) Chemistry Information Services Industrial Development Board		
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HEALTH AND SAFETY CHECKLIST

SECTION 1: HEALTH AND SAFETY MANAGEMENT

1.1. Departmental Safety Policy

Answer YES, NO or
NOT APPLICABLE

- 1.1.1. Is there a Departmental Safety Policy ? _____
- 1.1.2. Is the name and/or title of the person with overall control for health and safety within the Department clearly stated in the policy ? _____
- 1.1.3. Are responsibilities for health and safety in the Department clearly stated in the policy ? _____
- 1.1.4. Are the duties of the Departmental Safety Co-ordinator and other Departmental Safety specialists defined within the policy ? _____
- 1.1.5. Are all employees fully aware of their responsibilities and duties as outlined in the policy ? _____
- 1.1.6. Are all students fully aware of their responsibilities as outlined in the policy ? _____
- 1.1.7. Are the organisational aspects and arrangements stipulated in the policy still applicable to the Departments undertakings ? _____
- 1.1.8. Has the policy been effectively communicated to all staff and students ? _____
- 1.1.9. Are the arrangements for regular health and safety inspections clearly stated in the policy ? _____
- 1.1.10. Is the policy reviewed/up-dated annually ? _____

1.2. Departmental Health and Safety Committee or Equivalent Body

- 1.2.1. Has a Health and Safety Committee or equivalent body been set up to discuss health and safety matters ? _____
- 1.2.2. Does the Committee/equivalent body meet on a regular basis ? _____
- 1.2.3. Are the role and objectives of the Committee/equivalent body clearly defined ? _____
- 1.2.4. Are the procedures for appointing and/or electing Committee/equivalent body members clearly defined ? _____
- 1.2.5. Are all relevant University and Departmental health and safety documents available to Committee/equivalent body members ? _____

1.3. Mini Health and Safety Inspections

	<u> </u> Answer YES, NO or NOT APPLICABLE
1.3.1. Are mini safety inspections undertaken within all sectors or areas of the Department ?	<u> </u>
1.3.2. Are they on average conducted at least every quarter ?	<u> </u>
1.3.3. Are the inspections undertaken by a team of relevant employees (and students where applicable) or by Safety Monitors ?	<u> </u>
1.3.4. Are the members of the inspection teams and Safety Monitors adequately trained and/or experienced to carry out the inspections ?	<u> </u>
1.3.5. Are reports of inspections given to the Departmental Safety Co-ordinator and Head of Department ?	<u> </u>
1.3.6. Are reports acted upon effectively and action-planned where applicable ?	<u> </u>
1.3.7. Does the inspection attempt to discover the root cause of any identified problems; such as attitude, lack of training etc ?	<u> </u>
1.3.8. Are rolling programmes (Action Plan) of safety improvements on target ?	<u> </u>
1.4. Accident, Incidents and Ill Health	
1.4.1 Are all accidents and near-miss reporting procedures satisfactory ?	<u> </u>
1.4.2. Are all accidents and near-misses investigated ?	<u> </u>
1.4.3. Are studies made to try and identify any patterns of accidents or incidents ?	<u> </u>
1.4.4. Following investigations or studies are recommendations made to relevant personnel for the prevention of similar incidents ?	<u> </u>
1.4.5. Is there an effective follow-up procedure for such recommendations ?	<u> </u>
1.4.6. Have those staff identified as requiring health surveillance been identified ?	<u> </u>
1.4.7. Is ill-health monitored to identify any possible relationship with work ?	<u> </u>
1.5. Communication	
1.5.1. Has each member of staff and each student received a copy of the University's 'General Health and Safety Handbook' ?	<u> </u>
1.5.2. Is there adequate signage and/or information on health and safety on display ie on notice boards etc ?	<u> </u>
1.5.3. Is the name of the Departmental Safety Co-ordinator known to all staff and students ?	<u> </u>
1.6. Risk Assessments	

1.6.1. Have all activities and areas been Risk Assessed in accordance with applicable legislation ? _____

**Answer YES, NO or
NOT APPLICABLE**

1.6.2. Are all control measures effective and adhered to ? _____

1.6.3. Are all risk assessments posted or available in the work area ? _____

1.6.4. Are all risk assessments reviewed regularly ? _____

1.6.5. Are all staff and students aware of the requirement to risk assess their work and experiments etc ? _____

1.7. Safe Systems of Work/Local Rules

1.7.1. Do written safe systems of work and/or Local Rules exist for all potentially hazardous activities and areas ? _____

1.7.2. Are those which are in existence followed ? _____

1.7.3. Have all appropriate persons received copies of safe systems of work and/or Local Rules ? _____

1.7.4. Are they reviewed at least annually ? _____

1.8. Staff Training

1.8.1. Do all employees receive health and safety induction training both centrally and at Departmental level ? _____

1.8.2. Do all employees receive health and safety training and instruction on specialised aspects of their work ? _____

1.8.3. Is additional training given on the introduction of new equipment and work systems ? _____

1.8.4. Is additional training given if an employee is exposed to new risks ? _____

1.8.5. Are all Risk Assessors, Safety Co-ordinators or other persons with specialist health and safety duties trained on all aspects of those duties ? _____

1.8.6. Are adequate records kept on health and safety training ? _____

1.9. Student Training

1.9.1. Have all students received health and safety training on induction ? _____

1.9.2. Do all students continue to receive health and safety information during their

studies ?

1.9.3. Are all students given adequate specific training and information on particular hazards and activities ?

**Answer YES, NO or
NOT APPLICABLE**

1.10. Performance Standards

1.10.1. Are the overall health and safety standards and performance of the Department monitored and reviewed periodically to ascertain legal standing and to identify targets ?

1.10.2 Is the Head of Department involved in the review process ?

1.10.3. Does the process involve the review of Policies, Procedures, Local Rules and sampling of Risk Assessments ?

1.10.4. Is the commitment of the Department to health and safety apparent to all and is this communicated effectively to staff and students ?

SECTION 2: PREMISES

**Answer YES, NO or
NOT APPLICABLE**

2.1. Emergency Facilities

- 2.1.1. Are Emergency exits and routes clearly marked ? _____
- 2.1.2. Are escape routes accessible and known to all ? _____
- 2.1.3. Are fire doors closed where necessary ? _____
- 2.1.4. Are all aisles, passageways and exits clear of obstruction ? _____
- 2.1.5. Can emergency exits be opened ? _____
- 2.1.6. Is the Emergency number 333 known to all ? _____
- 2.1.7. Are general evacuation procedures understood ? _____
- 2.1.8. Are "Fire Action" notices posted in the area ? _____
- 2.1.9. Has a fire drill taken place within the last 12 months ? _____
- 2.1.10. Are any occupancy figures relevant to licences issued by the Fire Authority adhered to ? _____
- 2.1.11. Are fire extinguishers:-
 - i) inspected regularly ? _____
 - ii) visible ? _____
 - iii) accessible ? _____
 - iv) indicated by an extinguisher sign above ? _____
 - v) of the correct type for potential hazards in the area ? _____
- 2.1.12. Have all personnel been trained to operate the correct type of fire appliance in the event of fire ? _____
- 2.1.13. Is the emergency alarm system:-
 - i) tested regularly ? _____
 - ii) satisfactory ? _____
- 2.1.14. Is the emergency lighting system:-
 - i) tested regularly ? _____
 - ii) satisfactory ? _____

- 2.1.15. Is the current number of trained first aiders adequate for the current hazards in the Department ? _____
- 2.1.16. Have first aiders with responsibility for areas where cyanides or hydrofluoric acid are used, undergone specific training ? _____
- 2.1.17. Is there adequate first aid provision on field work and field courses and other extra mural activities ? _____
- 2.1.18. Are the names and telephone numbers of first aiders posted in the area ? _____

Answer YES, NO or NOT APPLICABLE

- 2.1.19. Are first aid kits available and fully stocked ? _____
- 2.1.20. Are first aid boxes checked regularly ? _____
- 2.1.21. Are emergency eye-wash bottles in date ? _____
- 2.1.22. Are emergency showers checked regularly ? _____

2.2. Environment

- 2.2.1. Has the area been checked for humidity levels ? _____
- 2.2.2. Is the temperature in the area comfortable ? _____
- 2.2.3. Is the lighting level in the area sufficient ? _____
- 2.2.4. Are there any problems as regards fumes and smells ? _____
- 2.2.5. Is it considered that the area is overcrowded ? _____
- 2.2.6. Is the area dusty ? _____
- 2.2.7. Are there materials that are stored too high or not secure ? _____
- 2.2.8. Are there any unstable or unsafe chairs or benches ? _____
- 2.2.9. Are all aisles clear and a minimum of 36" wide ? _____
- 2.2.10. Are doors clear and not obstructed ? _____
- 2.2.11. Is the area clear of trip hazards or protruding objects ? _____
- 2.2.12. Are all pieces of unused equipment properly stored ? _____
- 2.2.13. Are floor tiles level and service covers in place ? _____

- 2.2.14. Are all carpets in a good state of repair ? _____
- 2.2.15. Is the area clean and tidy ? _____
- 2.2.16. Are rubbish bins available and emptied regularly ? _____
- 2.2.17. Are there separate bins for the disposal of sharps ? _____
- 2.2.18. Are floors/steps/stairs in good repair ? _____
- 2.2.19. Is there adequate storage ? _____
- 2.2.20. Are flammable materials eg paper kept to a minimum ? _____
- Answer YES, NO or
NOT APPLICABLE**
- 2.2.21. Are there adequate toilet and washing facilities available ? _____

SECTION 3: HAZARDS

3.1. Control of Substances Hazardous to Health (COSHH)

**Answer YES, NO or
NOT APPLICABLE**

- 3.1.1. Have all hazardous substances been risk assessed ? _____
- 3.1.2. Are all COSHH assessments available in the area ? _____
- 3.1.3. Is there a system to check the quality of COSHH assessments ? _____
- 3.1.4. Are all precautions stipulated adhered to ? _____
- 3.1.5. Have hazard data sheets been obtained from the manufacturers for all hazardous substances ? _____
- 3.1.6. Are these hazard data sheets readily available for consultation by staff and students ? _____
- 3.1.7. Are all containers correctly labelled ? _____
- 3.1.8. Are substances correctly disposed of ? _____
- 3.1.9. Is the chemical store(s) tidy and free of obstructions ? _____
- 3.1.10. Are substances in daily use stored correctly ? _____
- 3.1.11. Are substances segregated to prevent potential reactions ? _____
- 3.1.12. Are carrying devices available for the transport of substances ? _____
- 3.1.13. Are spill clean-up kits available (when required) ? _____
- 3.1.14. Are all personnel aware of the procedures for substance spill clean-up ? _____

- 3.1.15. Is eating, drinking, smoking and application of cosmetics prohibited in the area ? _____
- 3.1.16. Is there adequate exhaust equipment eg fume cupboards in the area ? _____
- 3.1.17. Are all exhausts functioning ? _____
- 3.1.18. Are visual checks on the performance of exhaust equipment carried out by the operator prior to each period of use ? _____
- 3.1.19. Is all exhaust equipment examined and checked at least once every 14 months ? _____
- 3.1.20. Are records of these checks kept ? _____
- 3.1.21 Are defects in exhaust equipment reported to supervisors ? _____

3.2. Flammable Substances

- 3.2.1. Are containers of flammable substances clearly marked with the name of the contents ? _____

Answer YES, NO or NOT APPLICABLE

- 3.2.2. Are containers kept in approved storage cabinets ? _____
- 3.2.3. Are storage cabinets clearly marked with a "Highly Flammable" sign ? _____
- 3.2.4. Is the total quantity of flammable substances in the area less than 50 litres ? _____
- 3.2.5. Is the quantity of flammable substances in the work area limited to one day's requirements ? _____
- 3.2.6. Is the total quantity of petroleum spirit stored less than 5 litres ? _____

3.3. Biological

- 3.3.1. Have risk assessments been undertaken on all activities, experiments and work area ? _____
- 3.3.2. Are bench surfaces impervious to water and resistant to acids, alkalis, solvents and disinfectants ? _____
- 3.3.3. Are 'Biohazard' and other relevant warning signs displayed in the area ? _____
- 3.3.4. Is access restricted to authorised personnel only ? _____
- 3.3.5. Are biological agents stored correctly ? _____
- 3.3.6. Are decontaminated and disinfection procedures in place and are they enforced ? _____
- 3.3.7. Have safe working procedures and local safety rules been established and are these effective ? _____

- 3.3.8. Are all personnel aware of the procedures for handling and processing samples ? _____
- 3.3.9. Have all relevant personnel undergone health surveillance including appropriate vaccinations ? _____
- 3.3.10. Is all work in areas where animals are housed or handled carried out in accordance with the University's Code of Practice for Reducing Exposure to Animal Allergens ? _____
- 3.3.11. Is all work involving genetic modification activities carried out in accordance with the University's Code of Practice for Genetic Manipulation Activities ? _____
- 3.3.12. Are all contaminated wastes disposed of in the correct manner ? _____

(Note: See also COSHH Checklist).

3.4. Ionising Radiations

- 3.4.1. Are all persons using ionising radiations registered with the Departmental Radiation Protection Supervisor and the University Radiation Protection Adviser ? _____

Answer YES, NO or NOT APPLICABLE

- 3.4.2. Is all work with ionising radiations (including Undergraduate Practicals) registered with the DRPS and URPA ? _____
- 3.4.3. Are all areas where ionising radiations are used designated ? _____
- 3.4.4. Are all entrances to areas where ionising radiations are used correctly signed ? _____
- 3.4.5. Are doors of refrigerators, freezers, safes etc used for storage of radioactive materials provided with a sign indicating the presence of radioactive material ? _____
- 3.4.6. Are all radioactive materials stored correctly ? _____
- 3.4.7. Is the system for ordering radioactive materials adhered to ? _____
- 3.4.8. Are copies of the following displayed in the area ? _____
- i) Registration under Section 7 of the Radioactive Substances Act 1993 ? _____
 - ii) Certificate of Authorisation for the Accumulation and Disposal of Radioactive Waste under Sections 13 and 14 of the Radioactive Substances Act 1993 ? _____
 - iii) The work area Local Rules ? _____
 - iv) University Code of Practice for the Use of Ionising Radiations ? _____
 - v) Safe systems of work applicable to the area ? _____
 - vi) Risk Assessments ? _____
- 3.4.9. Are all containers of radioactive materials labelled to show:-
- i) Nuclide ? _____

- ii) Compound ? _____
- iii) Activity ? _____
- iv) Date ? _____
- v) Name of User and/or identification number ? _____

3.4.10. Are stock and waste records up to date ? _____

3.4.11. Is the waste kept within the limits laid down by the URPA ? _____

3.4.12. Are records of monitoring kept in the area ? _____

3.4.13. Are quarterly monitoring surveys of the work areas carried out by a competent person ? _____

3.4.14. Is the transport and movement of radioactive materials carried out in accordance with University guidelines ? _____

3.4.15. Are procedures in place for dealing with accidents/spillages involving ionising radiations ? _____

3.4.16. Are physical checks of stock materials carried out on a regular basis ? _____

3.4.17. Are all accidents/spillages reported to the DRPS and URPA ? _____

3.4.18. Have all workers attended a course on Radiation Protection ? _____

3.5. Lasers

Answer YES, NO or NOT APPLICABLE

3.5.1. Are all lasers in the Department registered with the Departmental Laser Safety Officer and the University Radiation Protection Adviser ? _____

3.5.2. Is all work with lasers registered with the DLSO and URPA ? _____

3.5.3. Are laser users registered with the DLSO and URPA ? _____

3.5.4. Have safe systems of work/local rules been drawn up for all classes of lasers ? _____

3.5.5. Are copies of the safe systems of work:-

- i) Kept by user ? _____
- ii) Kept by their Supervisors ? _____
- iii) Posted in areas where lasers are used ? _____

3.5.6. Are all areas where lasers are used designated ? _____

3.5.7. Are laser warning signs displayed at the entrance to the designated area ? _____

3.5.8. Are all lasers labelled to show:-

- i) The class of laser ? _____
- ii) Any basic precautions which are necessary ? _____
- iii) The lasers characteristics ? _____

3.6. Noise

- 3.6.1. Have assessments been carried out in situations where persons are likely to be exposed to noise levels exceeding 85 decibels ? _____
- 3.6.2. Are records of these assessments kept in the Department ? _____
- 3.6.3. Are assessments reviewed on a regular basis ? _____
- 3.6.4. Has suitable hearing protection been given to all persons who requested them who are exposed to noise levels between 85 and 90 decibels ? _____
- 3.6.5. Where persons are exposed to noise levels exceeding 90 decibels or the peak action level (200 Pascals), have measures been taken, where reasonably practicable, to reduce noise exposure other than by the use of personal hearing protection ? _____
- 3.6.6. Where 3.6.5. is not practicable, has suitable hearing protection been given to all relevant personnel and steps taken to ensure that they are worn ? _____
- 3.6.7. Are hearing protectors issued on an individual basis ? _____
- 3.6.8. If not, are protectors properly disinfected before being worn by another person ? _____
- 3.6.9. If damaged, are they repaired or replaced ? _____
- 3.6.10. Have hearing protection zones been established where persons are exposed to noise levels exceeding 90 decibels or the peak action level ? _____

Answer YES, NO or NOT APPLICABLE

- 3.6.11. Are these zones designated by signs ? _____
- 3.6.12. Where it is not reasonably practicable to mark zones (ie where persons are mobile with noisy equipment) have:-
- i) Warning signs been attached to the equipment ? _____
 - ii) Persons been given clear instructions about the jobs on which hearing protectors must be worn ? _____
- 3.6.13. Have all persons exposed to noise levels above 85 decibels been given:-
- i) Information on the risks to hearing ? _____
 - ii) The action necessary to minimise those risks ? _____

3.7. Electricity

- 3.7.1. Have all items of fixed electrical equipment been tested and inspected periodically for electrical safety (including 3-phase equipment) ? _____
- 3.7.2. Have all items of portable electrical appliances been tested and inspected periodically for electrical safety ? _____

- 3.7.3. Are safety check labels in date ? _____
- 3.7.4. Are staff and students aware of their obligation to visually inspect all items of equipment prior to use ? _____
- 3.7.5. Are there adequate electrical sockets ? _____
- 3.7.6. Are all items of machinery and fixed equipment isolated by either/and/or:-
 i) emergency stop controls ? _____
 ii) isolation switchgear ? _____
 iii) stop control on equipment/machinery body ? _____
- 3.7.7. Have electrical isolators been labelled as to what they control ? _____
- 3.7.8. Does the electrical system/wiring look sound and in good condition ? _____
- 3.7.9. Are all appliances complete, no missing parts ? _____
- 3.7.10. Where working on live electrical equipment is carried out:-
 i) Is the circuit in the area protected by a residual current device and/or an isolating transformer ? _____
 ii) Is all metal work in the vicinity of the test bench earthed or covered with insulating material ? _____
 iii) Is the person engaged in live electrical testing in sight communication with a second person who is capable of isolating the supplies to the test bench in the event of an emergency ? _____
 iv) Are all persons engaged in live electrical testing trained in resuscitation techniques ? _____
 v) Have rubber mats been provided on the floor immediately surrounding 'live' work stations ? _____

Answer YES, NO or NOT APPLICABLE

3.8. Display Screen Equipment

- 3.8.1. Have risk assessments been carried out in accordance with the Display Screen Equipment Regulations ? _____
- 3.8.2. Have 'users' of DSE been identified ? _____
- 3.8.3. Have 'users' been informed of their rights with regard to eye or eyesight tests ? _____
- 3.8.4. Have 'users' undergone training in the use of any workstation upon which they are required to work ? _____
- 3.8.5. Has 'users' work been organised so that it is periodically interrupted by breaks or changes of activity to reduce their workload on DSE equipment ? _____

3.9. Manual Handling

- 3.9.1. Have hazardous manual handling operations been avoided as far as is reasonably practicable ? _____

3.9.2. Have all hazardous manual handling operations that cannot be avoided been assessed in accordance with the Manual Handling Regulations ? _____

3.9.3. Have all relevant personnel been trained in correct manual handling techniques ? _____

3.10. Personal Protective Equipment

3.10.1. Have all activities been assessed as to the requirement for Personal Protective Equipment (PPE) ? _____

- 3.10.2. Is appropriate PPE available in the area, where applicable ? eg:-
- safety goggles, glasses or face mask _____
 - shoes, boots or rubber boots _____
 - aprons, overalls, laboratory coats _____
 - gloves _____
 - ear/noise protectors _____
 - respiratory protection _____
 - hard hats _____
 - rubber mats _____

3.10.3. Is PPE used correctly ? _____

3.10.4. Is PPE correctly stored when not in use ? _____

3.10.5. Is PPE serviced or cleaned regularly and replaced as and when required ? _____

3.10.6. Has training been given on the correct use of PPE ? _____

3.10.7. Are reflective coats/waistcoats worn during outside hazardous activities and night work ? _____

SECTION 4: MACHINERY AND EQUIPMENT **Answer YES, NO or NOT APPLICABLE**

4.1. Have all items of machinery been assessed for compliance with the Provision and Use of Work Equipment Regulations ? _____

4.2. Have all users of machinery or equipment received instruction and training in their safe use ? _____

4.3. Does all equipment purchased after 1st January 1996 possess a "CE" mark and/or "certificate of conformity" ? _____

4.4. Are machinery and equipment regularly inspected and serviced to ensure serviceability and safety ? _____

4.5. Is a 'maintenance log' kept for workshop machinery ? _____

- 4.6. Are all rotating and moving parts adequately guarded to prevent injury to the operator or others who may come in contact, this to include:-
- i) Drill chucks on pillar drills ? _____
 - ii) Lathe chucks, where applicable ? _____
 - iii) Blades of guillotines or metal shears ? _____
 - iv) Band saw blade, including adjustable guard ? _____
 - v) pillar and bench grinders ? _____
 - vi) Motors and power take-offs ? _____
 - vii) Bridge guards on planing/thicknessing machines ? _____
 - viii) Circular saw blades ? _____
 - ix) Pulleys and belts ? _____
 - x) Sanding machines ? _____
 - xi) Spindle and planing machines ? _____
 - xii) Self-adjusting guards for cross-cutting machines ? _____
 - xiii) Swarf/chip guards ? _____
- 4.7. Are all guards inspected regularly to ensure suitability and integrity ? _____
- 4.8. Are all inter-lock guards (automatic trip-off switches fitted to guards, doors etc) inspected regularly and is a maintenance log kept to indicate serviceability ? _____
- 4.9. Is faulty machinery immediately repaired or taken out of service/isolated from supply ? _____
- 4.10. Is the mounting of abrasive wheels restricted to personnel who have received instruction and/or training in the safe mounting of abrasive wheels ? _____
- 4.11. Is there adequate emergency stop controls for the type of equipment ? _____
- 4.12. Is the equipment safe to be used in the working environment (ie wet or flammable atmosphere ? _____
- 4.13. Are the locations of all services (gas, water, etc) isolation devices known, accessible and indicated by appropriate signage ? _____

SECTION 5: OTHER HAZARDS

Checklists should be drawn up for special risks in the Department or where local arrangements are in hand for controlling hazards and risks eg

- i) Working alone/out of hours working
- ii) Visitors/Contractors
- iii) Fieldwork/Courses
- iv) Unattended experiments
- v) Supervision of students
- vi) Work from boats or rafts
- vii) Diving
- viii) Security

