

Health, Safety and Environment (HSE) Workplace Safety Inspection Checklist

This checklist has been designed in order to achieve some consistency of content for HSE standards across the University. It consists six (6) parts, namely (A) Safety Administration, (B) Infrastructure, (C) Firefighting system, (D) Electrical system, (E) General Lighting and (F) First Aid.

It is designed to be used at KCDIO level, being completed by staff / SLOs who are familiar with the process / product / service. Once the initial inspection has been undertaken it is to be discussed with the Dean / Director / HOD / KCDIO's SHC / KCDIO's HSE Team and any remedial actions agreed before being filed in the KCDIO that it describes.

The findings of workplace inspection report to be submitted to OSHBE and relevant department which will take action from the findings (e.g. Development Division, DBSB, KCDIO end user and etc.) within fourteen days after inspection has been carried out and must be approved by Dean / Director / HOD.

The status of the findings shall be updated within fourteen days from report issued to relevant department.

The Dean / Director / HOD / SHC / HSE Team of KCDIO will be responsible for ensuring that any agreed remedial action is completed. Findings from the inspection will be used to assist in reviewing the HSE risk assessments and the HSE risk register.

The frequency of workplace inspection shall be conducted **at least once in every three (3) months**. The check list should be used to support the HSE Risk Assessment and ensure that the control measures defined in the assessment are in place and are working.

The records of inspection shall be documented and accessible.

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KCDIO	
DEPARMENT	
LOCATION	
DATE	

<u>ATTENDANCE</u>		
No.	Name	Post
1.		
2.		
3.		
4.		
5.		

NO.	ITEMS	YES	NO	NA	REMARKS (if no, please state the reasons / issues)
A.	SAFETY ADMINISTRATION				
1.	Safety policy is accessible, displayed and communicated to staff, contractors and students.				
2.	Safety logbook is updated once in three months. What to update? (Inspection, Training, Meeting, Programme and Others)				
3.	Safety corner information is updated What to update? (OSH Posters, Brochure, KCDIO Org. Chart, ERT Org. Cht. Emergency Contact Number and Others. <i>Note: To be updated at least once in three month.</i>				
4.	Safety and Health Committee / Team has been established				
5.	Safety and health meeting is conducted <i>Note: 1. Once in three months for Safety and Health Committee 2. Once in six month for Safety and Health Team</i>				
6.	Aware of IIUM HSEMS manual				
7.	OSH risk assessment has been conducted in your workplace				
8.	Know how to notify any incident occurred in KCDIO				
9.	Evacuation layout plan is available and displayed at strategic location				

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NO.	ITEMS	YES	NO	NA	REMARKS (if no, please state the reasons / issues)
B. INFRASTRUCTURE					
B1. Internal Building					
10.	Entry and across pathway kept clear				
11.	No electrical leads crossing pathway				
12.	Unobstructed view at intersections towards moving object?				
13.	Stairs / rises good condition				
14.	Safety lines / marked available?				
15.	Validity of lift permit (PMA)				
16.	Good ceiling condition?				
17.	Access to and egress from building is adequate and unobstructed? <i>Note: E.g. offices, classrooms, laboratory and etc.</i>				
18.	Adequate ventilation e.g. not stuffy?				
B2. External Building					
19.	Aware who is/are door locked key keeper?				
20.	Good drain cover condition?				
21.	Good mandatory signage display / condition?				
22.	Safety assembly point available?				
C. FIRE FIGHTING SYSTEM					
23.	Hose reel in working condition				
24.	Unobstructed Hose reel room				
25.	All Exit Light are functioning				
26.	All Emergency Light are functioning				
27.	Fire alarm bell in good condition				
28.	Adequate direction signage for fire exits				
29.	Exit doors easily opened from inside				
30.	Exit routes clear from obstructions				
31.	Fire alarm system functioning correctly				
32.	Fire evacuation plan available and displayed				
33.	Fire extinguisher validity date?				

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NO.	ITEMS	YES	NO	NA	REMARKS (if no, please state the reasons / issues)
D. ELECTRICAL SYSTEM					
34.	No broken/damaged plugs, socket or switches				
35.	Electrical riser room is locked.				
36.	Portable plug-in electrical office and kitchen equipment (e.g. power cords, projectors, toasters, kettles) have been tested and tagged i.e. SIRIM sticker or other approved type.				
37.	Electrical appliances are kept clear and away from wet condition				
38.	Power leads are in good condition e.g. not frayed or damaged				
E. GENERAL LIGHTING					
39.	Adequate illumination				
40.	No light reflection from walls and ceiling				
41.	Good light fitting condition and clean				
F. FIRST AID					
42.	First-aid kit is available				
43.	First-aid kit contents is not expired				
44.	No oral medicine in First-aid kit box				
45.	Easy to access by staff				
46.	Person in-charge of First-aid box has been assigned				
47.	First-aid logbook is available and updated				
48.	Emergency contact number is displayed				
49.	Familiar with emotional First-aid?				
50.	Any of KCDIO staff have competency in First-aid				
	Total = _____ [(Yes – No)/(50 – NA) X 100]				

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Inspected by (SLO / Inspector)	Checked by (Deputy Director / Asst. Director)
Post		Post	
Signature		Signature	
Date		Date	

Approved by (Dean / Director / HOD)
Post	
Signature	
Date	