

General Workplace Inspection Checklist

This checklist is intended to be used as a safety inspection for general workplace buildings and offices. The checklist includes the Occupational Safety and Health Administration (OSHA) requirements, generally accepted safe workplace practices, and voluntary action. Please refer to osha.gov/laws-regs for more information on specific standards.

Inspection Completed By:	
Title:	
Phone Number:	
Email Address:	
Location of Facility:	
Date:	

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A. Building Overview				
1. How old is the building?				
2. Were any major renovations done? If so, when?				
3. What number of occupants was the building designed for?				
4. What is the number of occupants in the building?				
B. Employer Posting/Recordkeeping				
Employers are required to keep certain documents, records, and information posted so that all boards that may also convey emergency messages, announcements, and other important infor often still have a right to view the requested information.				
orten still have a right to view the requested information.	YES	NO	Citation	Location/Notes
1. If you're covered by public sector OSHA, is the OSHA poster displayed in a	TLS	NO		Location/Notes
prominant location where employees are likely to see it?			link to poster	
2. Are emergency telephone numbers posted where they can be readily found in case				
of emergency?			<u>1910.165(b)(4)</u>	
3. Are Safety Data Sheets in an area accessible to workers without requesting them			1910.1200 App D	
from management?			<u>1910.1200 App D</u>	
4. Have workers been trained in Hazard Communication if exposed to any chemicals			1910.1200(h)(1)	
used in the course of their job?			<u>1910.1200(II)(1)</u>	
5. Are any environmental or biological reports conducted available for review by			<u>1910.1020(e)(2)(iii)</u>	
employees?			<u>(A)</u>	
6. Are there postings and/or warnings in your workplace for hazardous areas (x-rays,				
electricity, flames)			<u>1910.1200(g)(8)</u>	
7. If required in your workplace, are injury or illness records (OSHA 300 logs, but			Link to OSHA 300	
sometimes called something else depending upon the state) maintained and made			Logs	
available to employees?				
8. If required, is the summary of injury and illnesses for your workplace posted every			1904.32(b)(6)	
February 1 - April 30 each year?				
9. Is the OSHA 300A Summary of Work-Related Injuries and Illnesses signed by a			1904.32(b)(3)	
ranking manager?				
10. Are procedures in place to maintain records for emergency response drills,				
incident logs, safety inspections, and/or accident investigations?				

C. Training				
	YES	NO	Citation	Location/Notes
1. At initial hire have all new employees received safety orientation training?			<u>1910.9(b)</u>	
2. Do employees participate in regularly scheduled safety meetings?				
3. Are adequate training resources available? (questions for specific trainings maybe)				
4. Is it documented that all employees have received required training?				
5. Do all employees receive refresher training when required?				
6. Have employees received instructions on procedures to report unsafe conditions,				
defective equipment, and unsafe acts?				
D. Safety and Health Programs				
	YES	NO	Citation	Location/Notes
1. Do you have an active safety and health program in operation?				·
2. Is one person responsible for the overall activities of the safety and health program?				
3. Do you have a safety committee or group made up of management and labor				
representatives that meets regularly and reports in writing on its activities?				
4. Do you have a working procedure for handling in-house employee complaints				
regarding safety and health?				
5. Are you keeping your employees advised of the successful effort and				
accomplishments you and/or your safety committee have made in assuring they will				
have a safe and healthful workplace?				
6. Have you considered incentives for employees or workgroups who have excelled in				
reducing workplace injury/illnesses?				
E. Employee First Aid				
	YES	NO	Citation	Location/Notes
1. Have all employees who are expected to respond to medical emergencies as part of				Estation, Notes
their work:			<u>1910.151(b)</u>	
(a) are certified in first-aid training;				
(b) had hepatitis B vaccination made available to them;				
(c) had appropriate training on procedures to protect them from bloodborne pathogens,				
including universal precautions; and				
(d) have available and understand how to use appropriate personal protective				
equipment to protect against exposure to bloodborne diseases?				
2. Are first-aid kits easily accessible to each work area, with necessary supplies available,				
periodically inspected, and replenished as needed?				
3. Are there advanced bleeding control measures available such as a touniquet?				
4. Are any employees CPR certified?				

F. General Building Conditions/Cleanliness				
Outdoor Conditions:	YES	NO	Ciation	Location/Notes
. Are outside lights adequate?				
2. Is the parking lot area free of any safety concerns? (i.e. overgrown landscaping,				
uneven pavement, traffic hazards)				
3. Are the entrances to the building clearly visible from the street?				
Is video surveillance provided outside the building?				
Sanitation:	YES	NO	Citation	Location/Notes
1. Is potable water available at your worksite?			<u>1910.141(b)(1)(i)</u>	
2. Are adequate toilets available for men?			<u>1910.141(c)(1)(i)</u>	
3. Are adequate hand washing facilities equipped with hot and cold running water, hand			<u>1910.141(d)(2)</u>	
soap, and towels or driers available in men's restrooms?				
4. Are adequate toilets available for women?			<u>1910.141(c)(1)(i)</u>	
5. Are adequate hand washing facilities equipped with hot and cold running water, hand			<u>1910.141(d)(2)</u>	
soap, and towels or driers available in women's restrooms?			<u>1910.141(0)(2)</u>	
5. Are there gender-neutral/multi-gender bathrooms available?				
7. Is there adequate hand washing facilities equipped with hot and cold running water,				
nand soap, and towels or driers in gender-neutral/multi-gender bathrooms?			<u>1910.141(d)(2)</u>	
G. Walking/Working Surfaces				
	YES	NO	Citation	Location/Notes
1. Are stairs and walkways kept clear of boxes, equipment, cables, and other obstacles?				
			<u>1910.22(a)</u>	
2. Are aisles, doorways, and corners free of obstructions to permit visibility and				
novement?			<u>1910.22(a)</u>	
 Is the lighting in work areas and walkways adequate? 			<u>1915.82(a)(1)</u>	
			(a)(_)	
4. Are all work areas clean and orderly?			<u>1910.22(a)(1)</u>	
5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance,			<u>1910.22(a)(1)</u> 1910.22(a)(2)	
5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance, and safety mats in the kitchen area?				
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5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance, and safety mats in the kitchen area? 5. Are damaged exterior walking surfaces repaired properly, covered, or otherwise made safe?			<u>1910.22(a)(2)</u> <u>1910.22(d)(2)</u>	
5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance, and safety mats in the kitchen area? 5. Are damaged exterior walking surfaces repaired properly, covered, or otherwise made bafe? 7. Are damaged walking surfaces repaired properly, covered, or made safe?			<u>1910.22(a)(2)</u> <u>1910.22(d)(2)</u> <u>1910.22(d)(2)</u>	
 5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance, and safety mats in the kitchen area? 6. Are damaged exterior walking surfaces repaired properly, covered, or otherwise made safe? 7. Are damaged walking surfaces repaired properly, covered, or made safe? 8. Are interior walkways and stairs free from damaged tiles, carpet, etc? 			<u>1910.22(a)(2)</u> <u>1910.22(d)(2)</u> <u>1910.22(d)(2)</u> <u>1910.22(a)(2)</u>	
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 5. Are wet surfaces covered with non-slip materials? e.g. walk-off mats at the entrance, and safety mats in the kitchen area? 6. Are damaged exterior walking surfaces repaired properly, covered, or otherwise made safe? 7. Are damaged walking surfaces repaired properly, covered, or made safe? 8. Are interior walkways and stairs free from damaged tiles, carpet, etc? 			<u>1910.22(a)(2)</u> <u>1910.22(d)(2)</u> <u>1910.22(d)(2)</u> <u>1910.22(a)(2)</u>	

Walking/Working Surfaces Cont.	YES	NO	Citaiton	Location/Notes
11. Are spilled materials cleaned up immediately?			1910.141(a)(3)(ii)	•
12. Are cleanup supplies for spills readily available?				
13. Is a warning sign available in case of spills?				
			1910.145(c)(2)(i)	
14. Are trip hazards clearly marked?			<u>1910.144(a)(3)</u>	
15. Are standard stair rails or handrails on all stairways having four or more risers?			1010 25(1-)(1)	
			<u>1910.25(b)(1)</u>	
16. Are steps on stairs and stairways designed or provided with a surface that renders			Frank also at a firm of the second	
them slip-resistant?			Fact sheet of requirement	
17. Are floors clear of slip and trip hazards, e.g., extension cords, torn carpet, uneven			1010 22(-)(2)	
surfaces, cracks, holes, etc.?			<u>1910.22(a)(3)</u>	
18. Is the material on elevated surfaces stacked in a manner to prevent it from falling?				
			<u>1910.176(b)</u>	
H. Exits/Corridors - 1910 Subpart E				
	YES	NO	Citation	Location/Notes
1. Are all exits marked with an exit sign and illuminated by a reliable light source?	115	NO	Citation	Locationy Notes
1. Ale all exits that ked with all exit sign and indiminated by a reliable light source:			1910.37(b)	
2. Are the directions to exits, when not immediately apparent, marked with visible signs?			<u>1510.37(b)</u>	
2. Are the directions to exits, when not initialities apparent, marked with visible signs.			1910.37(b)(2)	
3. Are doors, passageways, or stairways, that are neither exits nor access to exits, and			<u>1510.07(0)(2)</u>	
could be mistaken for exits, appropriately marked "NOT AN EXIT," "TO BASEMENT,"			<u>1910.37(b)(5)</u>	
"STOREROOM,"etc.?			<u>1910.37(0)(37</u>	
4. Are exit signs provided with the word "EXIT" in lettering at least 5 inches (12.70				
centimeters) high and the stroke of the lettering at least I/2-inch (1.2700 centimeters)			1910.37(b)(7)	
wide?				
5. Are all exits kept free of obstructions?			1910.37(a)(3)	
6. Are there sufficient exits to permit prompt escape in case of emergency?			<u>1910.36(b)</u>	
7. Are special precautions taken to protect employees during construction and repair				
operations?			<u>1910.37(d)(3)</u>	
8. Are exit doors fire rated with 2 hours of protection? (look at interior door jams for				
ratings)			<u>1910.36(a)(2)</u>	
9. Are exterior doors fully tempered and meet the safety requirements for human				
impact?				
10. Are exit doors openable from the direction of exit travel without the use of a key or				
any special knowledge or effort when the building is occupied?			<u>1910.36(d)</u>	
11. Is panic hardware installed on all exit doors?			1010 26(4)(1)	
			<u>1910.36(d)(1)</u>	
12. Is propping open exterior doors a common practice?			<u>1910.36(a)(3)</u>	
13. Where exit doors open directly onto any street, alley, or other areas where vehicles				
may be operated, are adequate barriers and warnings provided to prevent employees			<u>1910.36(c)</u>	
from stepping into the path of traffic?				
14. Do doors along the exit route swing out?			<u>1910.36(e)(2)</u>	

	YES	NO	Citation	Location/Notes
. Are buildings inspected regularly for conditions that may lead to indoor air quality roblems?				
. Is the maintenance schedule updated to show all maintenance performed on the uilding systems?				
. Are radiators or thermostats, if present, set so that the temperatures can be ontrolled in individual rooms?				
. Are thermostats within the recommended range of 68– 78°F?				
. Is relative humidity within the recommended levels of 40–60 percent?				
. Do you observe any dampness, water stains, water leaks, and/or discoloration?				
. Are ceiling tiles intact, undamaged, and in place?				
. Are all windows unbroken and free from any type of damage?				
. Are water leaks that could promote the growth of biologic agents promptly repaired?				
0. Are damp or wet materials that could promote the growth of biologic agents romptly dried, replaced, removed, or cleaned?				
 Are there indications of hidden mold due to unpleasant odors or consistent occupant ealth complaints? 				
2. Is the building free from any damp, moldy, and musty smell?				
3. Are vents clean and unobstructed?				
4. If buildings do not have mechanical ventilation, are windows, doors, vents, stacks, nd other portals used for natural ventilation operating properly?				
5. Is there adequate airflow from clean to dirty areas, such as kitchens, cafeterias, yms, or locker rooms?				
6. Is there a maintenance schedule for the HVAC system? Is the schedule in accordance vith the manufacturer's recommendations or accepted practice for the HVAC system?				
7. Is the space containing the HVAC system clean and dry?				
8. Has the building been tested for radon?				

J. PPE and Infectious Disease				
			o ''	
1. Are employers assessing the workplace to determine if hazards that require the use of	YES	NO	Citation	Location/Notes
personal protective equipment (e.g. head, eye, face, hand, or foot protection) are protective to be present?			<u>1910.132(d)(1)</u>	
2. If hazards or the likelihood of hazards are found, are employers selecting and having				
affected employees use properly fitted personal protective equipment suitable for protection from these hazards?			<u>1910.132(d)</u>	
B. Has the employee been trained on PPE procedures, i.e. what PPE is necessary for a job ask, when they need it, and how to properly adjust it?			<u>1910.132(f)</u>	
I. Are protective goggles or face shields provided and worn where there is any danger of lying particles or corrosive materials?			<u>1910.133(a)(1)/(a)(2)</u>	
5. Are approved safety glasses required to be worn at all times in areas where there is a isk of eye injuries such as punctures, abrasions, contusions, or burns?			<u>1910.133(a)(1)</u>	
5. Are employees who need corrective lenses (glasses or contacts) in working environments having harmful exposures, required to wear only approved safety glasses, protective goggles, or use other medically approved precautionary procedures?			<u>1910.133(a)(3)</u>	
7. Are protective gloves, aprons, shields, or other means provided and required where employees could be cut or where there is reasonably anticipated exposure to corrosive iquids, chemicals, blood, or other potentially infectious materials?			<u>1910.1030(d)(3)(i)</u>	
3. Are hard hats provided and worn where the danger of falling objects exists?			<u>1910.135(a)(1)</u>	
9. Are hard hats inspected periodically for damage to the shell and suspension system?			<u>1910.135(b)(1)</u>	
10. Is appropriate foot protection required where there is the risk of foot injuries from hot, corrosive, poisonous substances, falling objects, and crushing or penetrating actions?			<u>1910.136(a)</u>	
11. Are all employees using respiratory protection properly trained and authorized?			<u>1910.134(c)(1)(viii)</u>	
12. Is personal protective equipment readily available for all personnel including visitors to the area?				
13. Is all protective equipment maintained in a sanitary condition and ready for use?			<u>1910.132(a)</u>	
14. Where food or beverages are consumed on the premises, are they consumed in areas where there is no exposure to toxic material, blood, or other potentially infectious materials?			<u>1910.141(g)(2)</u>	
15. Is protection against the effects of occupational noise exposure provided when sound levels exceed those of the OSHA noise standard?			<u>1910.95(c)(1)</u>	
16. Are adequate work procedures, protective clothing, and equipment provided and used when cleaning up spilled toxic or otherwise hazardous materials or liquids?				
17. Are there appropriate procedures in place for disposing of or decontaminating personal protective equipment contaminated with, or reasonably anticipated to be contaminated with, blood or other potentially infectious materials?			<u>1910.120(g)(5)(v)</u>	

COVID/Infectious Disease				
		I		
	YES	NO	Citation	Location/Notes
L. Does your employer require that masks be worn in the building?			<u>1910.502(f)(1)(i)</u> 1910.502(f)(1)(i)	
 Does your employer provide PPE and masks for employees and guests? Do you have a COVID-19 plan that was developed in consultation with nonmanagerial 			<u>1910.502(1)(1)(1)</u>	
employees?			<u>1910.502(c)(1)</u>	
4. If you are claiming exemption under 1910.502(a)(4) from providing controls for fully vaccinated employees in a well-defined area(s) of the workplace where there is no reasonable expectation that any person with suspected or confirmed COVID-19 will be present, do you have policies and procedures in place to determine employees' vaccination status?			<u>1910.502(a)(4)</u>	
5. Have you shared your COVID-19 plan with all other employers at your worksite(s) and coordinated to ensure all workers are protected?			<u>1910.502(c)(7)(ii)</u>	
6. Do you have a policy to screen and triage all clients, patients, residents, delivery people, visitors, and other non-employees entering settings where direct patient care is provided for people who may have symptoms of COVID-19?			<u>1910.502(d)</u>	
7. Do you have a health screening protocol for screening employees before each work day and each shift?			<u>1910.502(d)(3)</u>	
8. Do you have a log for recording all employee instances of COVID-19?			<u>1910.502(q)(2)(ii)</u>	
9. Do you have a policy that requires employees to notify you when they are COVID-19 positive or have been told by a licensed healthcare provider that they are suspected of having COVID-19?			<u>1910.502(l)(3)(i)</u>	
10. Does the policy require employees to notify you if they are experiencing COVID-19 like symptoms including: § A recent loss of taste and/or smell with no other explanation § A fever of at least 100.4°F with a new unexplained cough associated with shortness of breath			<u>1910.502(l)(2)</u>	
11. Do you have a policy that notifies employees within 24 hours, if required to do so, when they have been exposed (through close contact or by working in the same well- defined portion of a workplace during a person's potential transmission period) to a COVID-19 positive person who has been in the workplace?			<u>1910.502(l)(2)</u>	
12. Do you have a policy for employee COVID-19 testing, including providing time off and payment for the test? (Note: employers are not required to conduct testing)			<u>1910.502(l)(1)</u>	
13. Do you have policies to remove employees who have COVID-19, are suspected to have COVID-19, are experiencing certain symptoms of COVID-19, or have been in close contact with a COVID-19 positive person in the workplace, until they can return as provided for by the standard, and, for employers with more than 10 employees, to provide medical removal protection benefits to such employees where required to do so			<u>1910.502(l)(4)(i)</u>	
14. Do you have policies and procedures for adhering to Standard and Transmission- based Precautions in accordance with CDC's "Guidelines for Isolation Precautions"?			<u>1910.502(l)(6)</u>	
15. Does your employer have a plan to support COVID-19 vaccination by providing each employee reasonable time and paid leave for vaccination and any side effects experienced following vaccination?			<u>1910.502(m)</u>	

K. Hazard Communication				
	YES		C'h hi an	Landa Autor
1. Is there a list of hazardous substances used in your workplace?	YES	NO	Citation <u>1910.1200(e)(1)(i)</u>	Location/Notes
 Is there a written hazard communication program dealing with Material Safety Data Sheets (MSDS), labeling, and employee training? 			<u>1910.1200(e)(4)</u>	
3. Is each container for a hazardous substance (i.e., vats, bottles, storage tanks, etc.) labeled with product identity and a hazard warning (communication of the specific health hazards and physical hazards)?			<u>1910.1200(b)(3)(i)</u>	
4. Is there a Material Safety Data Sheet readily available for each hazardous substance used?			<u>1910.1200(g)(7)(iii)</u>	
5. Is there an employee training program for hazardous substances?			<u>1910.1200(h)(1)</u>	
6. Do employees know where they can see the employer's written hazard communication program and where hazardous substances are present in their work areas? 7. Are employees trained in whom to contact and what to do in an emergency?			<u>1910.1200(h)(2)(iii)</u>	
Bloodborne Pathogens: 1. Is there a current written exposure control plan for occupational exposure to bloodborne	YES	NO	Citation	Location/Notes
pathogens and other potentially infectious materials, where applicable?			<u>1910.1030(c)(1)(i)</u>	
2. Is the plan reviewed annually?			<u>1910.1030(c)(1)(iv)</u>	
3. Is the plan accessible to all employees?			<u>1910.1030(c)(1)(iii)</u>	
4. Has the employer provided the appropriate personal protective equipment, ensured its use, and made it accessible?			<u>1910.1030(d)(3)(i)</u>	
5. Has the employer instituted engineering controls (i.e., sharps containers)? Are these controls examined, maintained, or replaced regularly to ensure effectiveness?			<u>1910.1030(d)(2)</u>	
6. Has the employer made employees aware of workplace practices (i.e., handwashing, no eating/drinking in areas of potential exposure, proper handling/disposal of sharps, handling of contaminated laundry)?				
7. Does the employer have a written schedule for decontaminating areas, items, or surfaces?			<u>1910.1030(d)(4)(i)</u>	
8. Has the employer provided red bags/biohazard labeled bags for items considered regulated (infectious) waste? Are sharps containers puncture-resistant, red in color, or labeled with the biohazard sign?			<u>1910.1030(d)(4)(iiii)</u>	
9. Has the employer offered (free of charge) the Hepatitis B vaccination series to employees with occupational exposure? Signed declination forms? Was antibody testing done one to two months after the completion of the three-dose vaccination series for healthcare workers who have ongoing contact with patients or blood and are at continued risk for percutaneous injuries with sharp instruments or needlesticks be tested for antibody to Hepatitis B surface antigen?			<u>1910.1030(f)(1)(i)</u>	
10. Does the employer have a post-exposure follow-up program for those employees experiencing an exposure incident?			<u>1910.1030(f)(3)</u>	
11. Does the employer provide a confidential medical evaluation documenting the circumstances of exposure, identifying and testing the source individual if feasible, testing the exposed employee's blood upon consent, post-exposure prophylaxis, counseling, and evaluation of reported illnesses? Health care professional's written opinion as per the standard?			<u>1910.1030(f)(3)</u>	
12. Has the employer established a Sharps Injury Log for the recording of percutaneous injuries from contaminated sharps? [Does not apply to employers with fewer than 10 employees.] Does the log include at least the minimum information required; i.e., type/brand of device involved in the incident, the department/work area where the incident occurred, and an explanation of how the incident occurred?			<u>1910.1030(h)(5)(i)</u>	

Hazardous Substances:	YES	NO	Citation	Location/Notes
1. Are hazardous substances properly labeled?			<u>1910.1200(f)(6)</u>	
2. Are hazardous substances properly stored?			<u>1910.1200(e)(2)</u>	
3. Do procedures exist for the safe use and disposal of hazardous substances?			<u>1910.1200(g)(2)(xiii)</u>	
4. Are eye wash stations readily available and easily accessible to employees?			<u>1910.151(c)</u>	
5. Are all cleaning products properly and clearly labeled?			<u>1910.1200(f)(6)</u>	
L. Electrical				
	VEC	NO	Charles	La calta di Marta da
A second second second second second second by a different for second se Second second sec	YES	NO	Citation	Location/Notes
1. Are all cords, plugs, and sockets in good condition, i.e., not frayed, exposed, cracked, etc.?			<u>1910.334(a)(2)</u>	
2. Has electrical equipment been inspected, tested, and tagged in accordance with company policies and regulations?			<u>1910.334(c)(2)</u>	
3. Do extension cords being used have a grounding conductor?			1010 224/a)/2)/i)	
4. Are extension cords used in lieu of fixed wiring?			<u>1910.334(a)(3)(i)</u>	
5. Are all electrical panels secured?			1910.303(g)(1)(vii)	
6. Is there a maximum of one power strip per electrical receptacle is used? (no daisy			<u>1910.303(g)(1)(VII)</u>	
chains)				
7. Are there any outlets that are overloaded?				
8. Have all electrical circuits been identified?				
9. Have Ground Fault Interrupters been provided on circuits in proximity to water?			<u>1910.334(a)(4)</u>	
10. Are portable power tools in adequate condition?			<u>1910.242(a)</u>	
11. Are all electrical items in adequate condition?			1910.303(b)(1)	
12. Have switches and circuits/circuit breakers been identified and are they in working				
condition?				
13. Are electrical appliances such as vacuum cleaners, polishers, and vending machines grounded?				
14. Are all disconnecting switches and circuit breakers labeled to indicate their use or				
equipment served?				
15. Are electrical enclosures such as switches, receptacles, and junction boxes, provided			1910.305(b)(2)(i)	
with tight-fitting covers or plates?			<u>1910.303(0)(2)(1)</u>	
16. Are electrical closets free of storage?				
17. Are space heaters equipped with a multi-directional tip-over switch?				
18. Are space heaters equipped with an overheat sensor?				

M. Portable Ladders - 1910.23(b) and (c)				
	YES	NO	Citation	Location/Notes
1. Are all ladders maintained in good condition, joints between steps and side rails tight,				
all hardware and fittings securely attached, and moveable parts operating freely without			<u>1910.23(c)(1)</u>	
binding or undue play?				
2. Are non-slip safety feet provided on each ladder?			<u>1910.23(b)(5/6)</u>	
3. Are non-slip safety feet provided on each metal or rung ladder?			<u>1910.23(c)(9)</u>	
4. Are ladder rungs and steps free of grease and oil?				
5. Is it prohibited to place a ladder in front of doors opening toward the ladder except			<u>1910.23(c)(7)</u>	
when the door is blocked open, locked, or guarded?			<u>1910.25(c)(7)</u>	
6. Is it prohibited to place ladders on boxes, barrels, or other unstable bases to obtain			<u>1910.23(c)(13)</u>	
additional height?			<u>1910.23(0)(13)</u>	
7. Are employees instructed to face the ladder when ascending or descending?			<u>1910.23(b)(11)</u>	
8. Are employees prohibited from using ladders that are broken, missing steps, rungs, or				
cleats, broken side rails, or other faulty equipment?			<u>1910.23(b)(10)</u>	
9. Are employees instructed not to use the top step of ordinary stepladders as a step?				
			<u>1910.23(c)(8)</u>	
10. When portable rung ladders are used to gain access to elevated platforms, roofs,				
etc., does the ladder always extend at least 3 feet (0.9144 meters) above the elevated			<u>1910.23(c)(11)</u>	
surface?				
11. Is it required that when portable rung or cleat-type ladders are used, the base is so				
placed that slipping will not occur, or it is lashed or otherwise held in place?			<u>1910.23(c)(9)</u>	
12. Are portable metal ladders legibly marked with signs reading "CAUTION" - Do Not			<u>1917.119(f)(3)</u>	
Use Around Electrical Equipment" or equivalent wording?			<u>1917.119(1)(5)</u>	
13. Are employees prohibited from using ladders as guys, braces, skids, gin poles, or for			<u>1910.23(b)(8)</u>	
other than their intended purposes?			<u>1910.23(b)(0)</u>	
14. Are employees instructed to only adjust extension ladders while standing at a base				
(not while standing on the ladder or from a position above the ladder)?			<u>1910.23(c)(6)</u>	
15. Are metal ladders inspected for damage?			<u>1910.23(b)(9)</u>	
16. Are the rungs of ladders uniformly spaced at 12 inches, (30.48 centimeters) from				
center to center?			<u>1910.23(b)(3)</u>	

N. Emergency Preparedness						
	YES	NO	Citation	Location/Notes		
Has there been an evacuation drill in the last 12 months?	-					
. Are evacuation drills reviewed and documented?			<u>1910.38(f)</u>			
B. Have floor wardens been appointed?			<u>1910.38(e)</u>			
I. Are the names and details of office/floor wardens and emergency procedures						
displayed?						
5. Is an evacuation plan displayed?						
5. Do evacuation plans include evacuation routes plus locations where employees should			1910.389(c)			
gather after evacuation?			<u>1910.389(C)</u>			
7. Have re-entry procedures following an evacuation been developed and displayed?						
3. Has emergency evacuation training been provided to all employees?			<u>1910.38(e)</u>			
D. Fire Protection						
	YES	NO	Citation	Location/Notes		
1. Is your local fire department well acquainted with your facilities, their location, and						
specific hazards?			§ 1910.156 Fire brigades.			
2. If you have a fire alarm system, is it certified as required?			<u>1910.164(c)</u>			
3. If you have a fire alarm system, is it tested at least annually?						
4. If you have interior stand pipes and valves, are they inspected regularly?			<u>1910.164(c)(4)</u>			
5. If you have outside private fire hydrants, are they flushed at least once a year and on a						
routine preventive maintenance schedule?						
6. Are fire doors and shutters in adequate operating condition?			<u>1910.37(a)(4)</u>			
7. Are fire doors and shutters unobstructed and protected against obstructions, including						
their counterweights?						
8. Are fire door and shutter fusible links in place?						
9. Are automatic sprinkler system water control valves, and air and water pressure						
checked weekly/ periodically as required?			<u>1910.159(c)(3)</u>			
10. Is the maintenance of automatic sprinkler systems assigned to responsible persons			1910.159(c)(2)			
or to a sprinkler contractor?						
11. Are sprinkler heads protected by metal guards, when exposed to physical damage?						
12. Is proper clearance maintained below sprinkler heads?						
			<u>1910.159(c)(10)</u>			
13. Are portable fire extinguishers provided in adequate numbers and type?			<u>1910.157(c)(1)</u>			
14. Are fire extinguishers mounted in readily accessible locations?			<u>1910.157(c)(1)</u>			
15. Are fire extinguishers recharged regularly and noted on the inspection tag?			<u>1910.157(c)(4)</u>			
16. Are employees periodically instructed in the use of extinguishers and fire protection procedures?			<u>1910.157(g)(1)</u>			

P. Security Control Plan					
	YES	NO	Citation	Location/Notes	
1. Who is responsible for building Security?					
2. Are premises secure while employees are at work, e.g., during minimum staff shifts?			General Duty Clause		
3. Are security doors operational?					
I. Have employees been trained in workplace violence procedures?					
. Do you maintain a visitor record/register?					
5. Are employees easily identifiable due to badges or other visual IDs (Omitting personal nformation such as last name and home address)?					
7. Are access cards, fobs, or passwords highly secure?					
8. Are workers notified of past violent acts in the workplace?					
9. Are trained security and counseling personnel accessible to workers in a timely manner?					
10. Is there an established liaison with state police and/or local police and counseling agencies?					
11. Is there video surveillance provided inside the building?					
13. Is the surveillance system installed and up to date?					
14. Is the security light properly installed and maintained?					
L5. Are security buzzers provided?					
16. Are security officers located in the building?					
17. Are there convex mirrors available for blind spots?					
18. Is an alarm system installed and maintained?					
L9. Could someone hear a worker who calls for help?					
20. Do you check access control, surveillance, and lighting system regularly?					
21. Are waiting areas and work areas free of objects that could be used as weapons?					
22. Is the furniture in waiting areas and work areas arranged to prevent the entrapment of workers?					
23. Is there a secure place for workers to store personal belongings?					