# Health and Safety Inspection

## Inspection Checklist and Action Plan

Heads of Department[[1]](#footnote-1) must ensure that the areas under their control are inspected at least annually[[2]](#footnote-2). Inspections must include a check that health and safety records are up to date as well as a physical inspection.

The following are provided to assist you with your inspection:

* Paperwork and management system inspection: This checklist should be used by all departments. It will help you to check you have appropriate systems and records in place to meet the University’s and legal requirements.
* Physical inspection: This checklist can be used to inspect all areas. It will help you to confirm that your management systems are working.
* Action Plan: Where you have identified issues from your inspection, transfer them to the action plan. Someone must be given responsibility for monitoring the Plan, to ensure action is taken.

Please ensure that you invite a Union appointed Safety Representative to accompany you on inspections. You should do this by e-mailing the Safety Representatives for Unite, UCU and Unison at least two weeks before the proposed inspection date. Details of current Safety Representatives can be found by following the Help and Advice link on the University’s [Health and Safety](https://www.essex.ac.uk/health-safety/) website.

If you need the assistance of a Health and Safety Advisor during the inspection, please contact WHSW (Workplace Health, Safety and Wellbeing) at least a month before the proposed inspection date. (E-mail safety@essex.ac.uk or extn: 2944)

Note: The checklists can be used for whole department or, for larger departments, sections / units within it. You may find it useful to use the Paperwork and Management Systems Inspection Checklist for larger areas, but for physical inspections divide the area into smaller units and use a different Physical Inspection Checklist for each.

### Reporting on Inspections

Following your inspection, you must send a copy of your inspection action plan to:

* WHSW
* The Union appointed safety representative that attended the inspection
* The relevant Faculty Manager (Academic Departments)

NB: The completion of annual inspections is reported to the University’s Health and Safety Group, USG and Council. Departments must complete their inspection submit their Action Plans to WHSW by the end of July, so that WHSW can confirm inspections have taken place and report on significant findings as part of the annual health and safety reporting process.

### Higher Risk Areas

Additional checklists are available for higher or more complex risk areas. You may want to use them as a basis for developing your own checklists based on your health and safety standards, which WHSW can support you with. You will find them on the [Health and safety inspection](https://www.essex.ac.uk/health-safety/management/inspection.aspx) website.

### High Priority Actions

If you have identified a high priority action during the inspection, this will need to be addressed as soon as possible. It is expected that they will be resolved within three months of the inspection. If this is not possible action should be taken to manage the risk. High priority actions are defined as:

* If the identified action is an immediate high risk then mitigations must be put in place immediately or, the area must be taken out of commission or, if it is a process then the process must be suspended.
* Substantial efforts are required to reduce the risk.
* Considerable resources might have to be allocated to additional controls.
* Considerable effort is required to maintain existing controls rigorously and keep under regular review until the risk is reduced.

Medium priority items should be addressed within six months and low priority within 9 months. The aim being when inspection comes around, all actions have been closed from the previous inspection and evidenced on the updated action plan.

## Health and Safety Paperwork and Management System Inspection

|  |  |
| --- | --- |
| **Areas/Activities inspected:** |  |
| **Inspection carried out by:** |  | **Date:** |  |
| **Document / System** | **Y / N/ Part / NA (or date)** | **Comments** |
| Is the Departmental Health and Safety Management Statement up to date? *Date last reviewed:*  |  |  |
| Date and recent example of health and safety communication via a team meeting. |  |  |
| Date and subject of last health and safety bulletin communicated to relevant staff.  |  |  |
| Date employees were last reminded of emergency arrangements and how to report hazards, accidents or health and safety concerns. |  |  |
| Are there records to confirm new employees have received health and safety induction? ***Date last induction:**** Are H&S induction forms fully completed and signed off by employee and manager?
 |  |  |
|  |
| How does the department ensure that employees complete their essential H&S and fire safety training? |  |  |
| Do you have sufficient trained fire evacuation stewards and evacuation chair operators? |  |  |
| How does the department control the use of prohibited electrical items? |  |  |
| Do you have records to show that portable electrical appliances have been inspected and, where appropriate, tested at the required frequency?  |  |  |
| Is the inspection record for work equipment used by the Department (e.g. stepladders, trolleys) up to date? ***Date last inspected:*** |  |  |
| Have actions from the previous inspection been regularly reviewed (eg every 3 months), high priority actions addressed in good time and action plan updated? |  |  |
| **Risk Assessments** |
| Is there a list of risk assessments held in the department and is this up to date? |  |  |
| Are the following risk assessments in place and up to date:* Offices and other low risk areas *Date last reviewed*:
* Driving for work

***Where required date of last licence / insurance check:**** DSE assessments for employees required to use computers

***Date of last DSE assessment*:**  |  |  |
| Are risk assessments carried out for the following when required?* New and expectant mothers
* Field trips / outings with students
* Overseas visits
* One off activities / events
 |  |  |
| Have manual handling activities been reviewed following the guidance in the Manual Handling Health and Safety standard? |  |  |
| **Other items** |
| If there any significant changes to work activities for the forthcoming year that will require risk assessment during planning, has the responsible person contacted WHSW? |  |  |

## Physical Inspection: All Areas/Activities

NB: If inspecting a large department, section or unit, you may find it easier to divide the area into smaller units or work areas and use a separate physical inspection checklist for each.

|  |  |
| --- | --- |
| **Areas/Activities inspected:** |  |
| **Inspection carried out by:** |  | **Date:** |  |
| **Item** | **🗹, 🗷 or NA[[3]](#footnote-3)** | **Comments** |
| Health and Safety Law Poster(s) (2009 edition) displayed prominently with up to date information on it? (Available from the WHSW) |  |  |
| Is the health and safety information displayed on the notice board up to date? (Refer to list in Managing Safety Code of Practice) |  |  |
| Have little used water outlets or systems that hold or circulate water been identified and included as part of the departmental legionella management system? |  |  |
| Are there any slip, trip or striking hazards?* Trailing leads, damaged floor surfaces
* Floor boxes damaged, used or positioned incorrectly
* Wet or contaminated floors
* Untidy work areas / obstructions in access routes
 |  |  |
| Are there any electrical hazards?* Failed electrical items still being used or remaining in rooms.
* Damaged, casing, leads, plugs
* Daisy chaining extensions
* Evidence of equipment not included in last inspection
* Prohibited /dangerous items, unsafe travel adaptors
 |  |  |
| Are access equipment (e.g. stepladders), trolleys tagged with last inspection date and in good condition? |  |  |
| Are there any obvious fire hazards?* Obstructions, flammable materials and ignition sources in escape routes
* Waste left around recycling bins or lids left open
* Fire doors wedged open or not closing properly
* Build-up of combustible materials
* Ignition sources (e.g. heat sources) inadequately controlled
 |  |  |
| Does furniture, fixtures and fittings appear to be in good, stable and secure condition, with materials stored safely and securely? |  |  |
| Have significant concerns about thermal environment been addressed? (Refer to thermal environment guidance on H&S website for guidance) |  |  |
| Are windows safe? Look for:* Can be opened and closed safely, no furniture obstructing
* Not a striking or falling hazard
* Where safety film is fitted, no evidence of peeling or bubbling
 |  |  |
| Employee awareness: Check: * Emergency procedures (fire responsibilities, lifts, spillages, PEEPS, first aid etc.)?
* Using computers safely
* Electrical safety (e.g. prohibited items, visual checks)
* Not using unsuitable access or work equipment
* Incident and hazard reporting procedures?
* Risk assessments and safe working procedures?
 |  |  |
| Other items noted: |  |  |

## Health and Safety Inspection: Action Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area(s) inspected:** |  | **Inspected by:**  |  | **Date:** |  |
| **Responsible manager** **(e.g. Head of Department / Section)** | **Name:** |  | **Signed:** |  | **Date:** |  |
| **Area for improvement** | **Action needed** | **Who will take action** | **Priority****H, M , L** | **Target Date** | **Date achieved** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |
| --- | --- |
| **This action plan will be reviewed by (name and job role):** |  |
| **Planned review dates:** |  |  |  |  |  |  |  |
| **Once reviewed initial to confirm:** |  |  |  |  |  |  |  |

 9

1. References to department includes faculty teams, school, section, business or centre [↑](#footnote-ref-1)
2. See Code of Practice: Managing Health and Safety [↑](#footnote-ref-2)
3. **Acceptable 🗹; Action needed 🗷; Not applicable: NA** [↑](#footnote-ref-3)