Work Area Safety Inspection hecklist - V2

Document No.

v16052014

Conducted on

12 Dec 2016 10:55 AM

Select Area to be Inspected

HRU.floor

Location

Proposed Action, not nested

Name of person completing the checklist

David Lloyd-Jones

Email of person submitting checklist (for email notification)

a

Email of Supervisor (for email notification)

q

Names of personnel involved in inspection

david

Completed on

12 Dec 2016 10:57 AM

Score

17/23.0 - 73.91%

Disclaimer

The assessors believe the information contained within this risk assessment report to be correct at the time of printing. The assessors do not accept responsibility for any consequences arising from the use of the information herein. The report is based on matters which were observed or came to the attention of the assessors during the day of the assessment and should not be relied upon as an exhaustive record of all possible risks or hazards that may exist or potential improvements that can be made.

Information on the latest workers compensation and OHS / WHS laws can be found at the relevant State WorkCover / WorkSafe Authority.

Confidentiality Statement

In order to maintain the integrity and credibility of the risk assessment processes and to protect the parties involved, it is understood that the assessors will not divulge to unauthorized persons any information obtained during this risk assessment unless legally obligated to do so.

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Work Environment - 4/5 80.00%

Question	Response	Details	
Office equipment			
Check if this category is NOT applicable.			
Is equipment such as photocopiers, printers etc. located at a reasonable distance from staff?	Yes		
Review relocation options			
Has broken or faulty equipment been disposed?	Yes		
Contact Central Services on ext. 7485			
Are guillotines and shredders operated safely and regularly maintained?	Yes		
Make manufacturers advice regarding the safe operation of machines			
Slips and trips, electrical and lighting			
Tick if this category is NOT applicable.	$\overline{\mathbf{V}}$		

Health and Safety Management - 2/2 100.00%

Question	Response	Details
Consultation and Communication		
Check if this category is NOT applicable.	\vee	
Training and Induction		
Check if this category is NOT applicable.		

Hazard Programs - 4/4 100.00%

Question	Response	Details
Manual Handling		
Check if this category is NOT applicable.	\vee	
Computer and Workstation Setup		
Check if this category is NOT applicable.	\vee	
Cash handling		
Check if this category is NOT applicable.	\vee	
Working alone		
Check if this category is NOT applicable.	$oxed{oxed}$	

UTS Health and Safety Procedures - 3/3 100.00%

Question	Response	Details		
Emergencies				
Check if this category is NOT applicable.	V			
Accident / Incident and Hazard Response				
Check if this category is NOT applicable.	\vee			
First Aid				
Check if this category is NOT applicable.				

Sign off

Questio	n	Resp	onse			Details
Person completing this inspection						
Name:		David Lloyd-Jones				
Signature:						

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