



Health and Safety/Fire Safety - Workplace Inspection Checklist

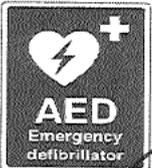
Location	Enter location <u>SVRU</u>	Dept (if app)	Enter department
Completed by	Completed by <u>Ross McCallum</u>	Date	Enter date

SVRU - JAMES MILLER HOUSE - GURSCOV. 19-01-2024.

Management of Health and Safety

No.	Issue	Y	N	Comments
1.	The health & safety notice board should display the following safety notices. These must be completed and accurate: <ul style="list-style-type: none"> Emergency Fire Evacuation Plan (EFEP) ✓ H & S Policy Statement ✓ H & S at Work Law Poster ✓ Fire Policy Statement ✓ Fire Warden Names - [redacted] [redacted] First Aider Names <u>TBC</u> First Aid Box Locations ✓ 	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments <u>Kitchen</u> Notice board loci Fire warden names ✓ rec First Aider <u>rec</u> *Actions - F.Aider to be identified
2.	Has a first aid risk assessment for location been undertaken?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments <u>unknown</u>
3.	Based on the first aid risk assessment findings, is there sufficient, trained first aid personnel or nominated persons for the maximum number of people in the property at any given time? (First Aid at Work National Guidance) Note: < 25 people – one appointed person >25 & <50 people – first aider trained in Emergency First Aid at Work >50 people - one first aider trained in Emergency First Aid at Work for every 100 employed with cover for absences	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments Action - F.A. to be updated.
5.	Based on the first aid risk assessment findings, are there sufficient numbers of first aid boxes available and locations identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
6.	Based on the first aid risk assessment findings, are first aid boxes adequately stocked and is all sterile equipment within expiry date? HSE - What to put in your first aid kit	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
7.	Is an Automated External Defibrillator (AED) present? If yes, answer Q. 7a to 7f.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments

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	If no, proceed to Q. 8			
7a.	Who is responsible for servicing the AED?	Enter details		
7b.	Is the AED in a visible location and easily accessible?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments
7c.	Does the AED have the appropriate signage? 	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments N/A
7d.	Is the AED light at 'green' (ready to use)? If red, requires attention	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments
7e.	Is the AED battery light illuminated indicating full power?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments
7f.	What is expiry date on pads? (<1 month left, order new pads – via BSU)	Enter details of expiry date		
8.	Risk assessments for specific work activities must be undertaken. Are these undertaken? If yes, where are these located and how are they accessed by officers and staff?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments N/A.
9.	Are the 3 compliance logbooks available at the front counter/reception, or in a central location: Asbestos Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
9a.	Water Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Who is responsible for sentinel flushing and temperature checking?	Enter details [REDACTED]		
	Are the logbooks dated and signed for monthly flushing and temperature checking?	<input type="checkbox"/>	<input type="checkbox"/>	Enter details
9b.	Fire Safety Logbook	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter details

Fire Safety				
The forms detailed below must all be contained within fire safety logbook in Q.9b.				
No.	Issue	Y	N	Comments
10.	Are there records of weekly fire alarm checks and are fire alarm call points rotated? (Fire Safety Form 2 - 076-015)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
11.	Are 6 monthly fire evacuation drills undertaken and documented? (Fire Safety Form 4 - 076-017)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments by building management company.

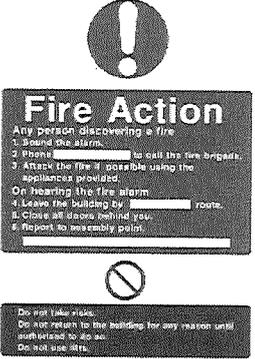
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12.	What date was the last Fire Risk Assessment (FRA) undertaken? (Can be requested from estates)	Enter comments <i>Building management company</i>	
13.	Have all the allocated actions from the FRA been progressed?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Enter comments <i>Emergency</i>
14.	Is the Emergency Fire Evacuation Plan (EFEP) in place for the building?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
15.	Has the EFEP been reviewed within 12 months? (EFEP Template - 076-034)	<input type="checkbox"/>	<input type="checkbox"/> Enter comments <i>Building management company</i>
16.	Have Personal Emergency Evacuation Plans (PEEP) ((PEEP Template - 076-033) been carried out for any building user who requires assistance to evacuate?	<input type="checkbox"/>	<input type="checkbox"/> Enter comments <i>N/A.</i>
17.	If a PEEP is required, has it been reviewed within 12 months?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Enter comments <i>N/A.</i>
18.	Are all fire escape routes including stairwells, and emergency exits kept clear of all items?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
19.	Are combustible items kept in appropriate locations, e.g; - flammable items kept in fire resistant containers. - Paper not stored next to printers	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
20.	Are waste by-products controlled, and kept in appropriate locations away from ignition sources and not allowed to accumulate?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
21.	Are heaters (fixed and mobile) free of dirt, damage and kept clear of combustible items?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
22.	Is cooking equipment clean, free of damage and kept clear of combustible items?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
23.	Are fire doors kept closed and not wedged open?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
24.	Are there gaps around the fire door frame and are seals/hinges fitting correctly?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
25.	Does the fire door closer shut the door?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
26.	Is there any visible damage (from wear and tear) to the fire door and/or closer?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Enter comments
27.	Are all fire exits in good condition and open in a single movement? (Keys are not acceptable for opening fire exits except custody suites)	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
28.	Fire safety equipment last test/inspection dates (annual):	Enter details <i>Feb 2024 .</i>	
	Alarm sounders	Enter details <i>Weekly</i>	
28a.	emergency lighting	Enter details <i>Weekly</i>	

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*building management company
 NSIC has been ruled on NSIC reg.*

28b.	smoke and heat detectors	Enter details	
28c.	fire extinguishers (If lapsed, contact estates)	Enter details	
29.	Are fire extinguishers available within fire escape routes?	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
30.	Is there a fire assembly/muster point identified? This must be in a safe place, clear of the building and away from traffic routes.	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments
31.	Are fire action notices located at each emergency final exit and all call points? 	<input type="checkbox"/>	<input type="checkbox"/> Enter comments
32.	Is there clear access for SFRS vehicles? e.g. no parking in restricted areas	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments <i>STREET PARKING.</i>
33.	Who within the building has been briefed on the general understanding of the fire alarm panel and zoning diagrams?	Enter details <i>GT ROS MCCAWM</i>	
34.	Where required, is fire safety signage present and legible: Prohibition signs e.g., "no smoking or vaping" 	<input checked="" type="checkbox"/>	<input type="checkbox"/> Enter comments

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<p>35.</p>	<p>Mandatory signs e.g., "Fire door. Keep shut"</p> 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Enter comments</p>
<p>36.</p>	<p>Warning signs e.g., plant rooms, electrical cupboards or rooms protected by inergen gas</p> 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Enter comments</p> <p>###</p> <p>Sign e electrical Cupboard up + visible. ✓</p>
<p>37.</p>	<p>Fire exit signs These indicate the direction of final exits</p> 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>Enter comments</p>

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38.	Fire equipment signs 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
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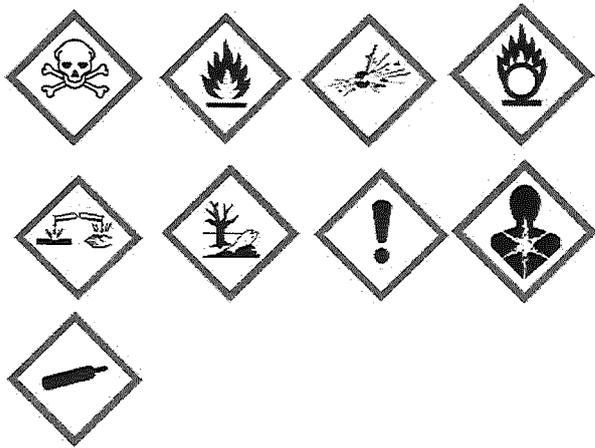
Electric Vehicles/Bikes/Scooters/Mobility Scooters				
No.	Issue	Y	N	Comments
39.	Are there designated charging stations?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments
40.	Are charging stations free of all obstacles and unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments
41.	Is there an identified storage area out with and detached from the main building for E-bikes, E-scooters & Mobility Scooters	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments
42.	Is there an identified storage area out with and detached from the main building for E-batteries	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments

Housekeeping				
No.	Issue	Y	N	Comments
43.	Is access and egress free of hazards to and from all buildings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
44.	Where applicable, are pedestrian and vehicle routes delineated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
45.	Are arrangements for snow and ice clearance adequate?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments N/A.
46.	Where applicable, are supplies of salt/grit available?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments N/A.
47.	Are arrangements for waste disposal, including biohazards, adequate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
48.	Are general cleaning standards adequate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments

Plant and Equipment				
No.	Issue	Y	N	Comments
49.	Is storage/shelving/racking free of damage and defects?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
50.	What is the Safe Working Load for the storage/shelving/racking?	Enter comments		
51.	Are the heaviest items stored on the lower shelves/racks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments

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52.	Are storage/shelving/racking units easily accessible? (area clear and means of accessing height available)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments	
53.	Are ladders visually inspected and documented?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments	
54.	What is the PAT date on equipment?	Enter comments			
55.	When was Fixed Wire Testing (FWT) last completed? (Report available from estates)	Enter comments			TBC.
56.	From FWT report, have all actions been progressed?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	
57.	Are pedestrian routes free from trailing cables?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments	
58.	Are electrical extension bars and cable reels used appropriately?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments	
59.	Are electrical accessories such as sockets and switches free from defects, damage or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments	
60.	Are there any hazardous substances stored within the premises? 	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	NIA.
60a.	If yes, are COSHH (Control of Substances Hazardous to Health) Risk assessments available?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	NA.
60b.	Are the hazardous items stored in appropriate locations? (Refer to COSHH Risk Assessment or Safety Data Sheets)	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	NA.
61.	When was the passenger and/or service lifts last inspected?	Enter comments			NA.
62.	Is internal emergency communication system within the lift(s) in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	NA.
63.	Is the relevant equipment checklist for vehicles undertaken? <u>Operational Marked Vehicle Checklist</u> <u>Operational Unmarked Vehicle Checklist</u>	<input type="checkbox"/>	<input type="checkbox"/>	Enter comments	NA.

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Environment/Welfare				
No.	Issue	Y	N	Comments
64.	Are there any issues with lighting in any areas?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments
65.	Is the working environment temperature in excess of 13°C for warehouses or 16°C for offices?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments
66.	Are windows in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
67.	Where required, are blinds in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
68.	Are rooms of sufficient size for the functions undertaken?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
69.	Are toilet and shower facilities clean and in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
70.	Is a rest room or canteen available for breaks and is it in good condition?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments No canteen.
71.	Are there any issues with vermin e.g. rats, mice, biting insects, seagulls?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Enter comments

Food Safety				
General hygiene requirements apply				
72.	Is food storage appropriate (cool, dry area and off ground for ambient)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
73.	Are fridges kept clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
74.	Are sporks and utensils sterilised and cleaned after use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
75.	Is anti-bacterial cleaning products available for cleaning surfaces/equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments
76.	Are all parts of the food preparation area in good condition, clean and hygienic?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Enter comments

Health & Safety Training		
Contact BSU or LTD for confirmation		
No.	Issue	Comments
77.	How many staff are trained to carry out Health & Safety/Fire (6 monthly) Workplace Inspections?	Enter details Awaiting Training
78.	How many staff are trained to carry out risk assessments?	Enter details Awaiting Training

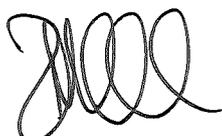
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79.	How many staff are trained in manual handling?	Enter details Police officers As per OST.
80.	How many staff are trained in COSHH Awareness?	Enter details Ø.
81.	How many staff are trained in Asbestos Awareness?	Enter details Ø.
82.	How many staff have completed the mandatory Fire Safety Moodle module 1?	Enter details All.
83.	How many staff have completed Fire Safety Moodle module 2? (Fire wardens)	Enter details 2.
84.	If identified from a PEEP, how many staff are trained in the use of evacuation chairs?	Enter details Ø.

ACTIONS -

- ① first AIDERS - To be confirmed + signs put up
- ② BMV + EMV - TO be trained re: H&S / FS.

 . CI / Deputy Head of SVRM
19-01-26.