

**CHECK LIST FOR THE IDENTIFICATION OF POSSIBLE OCCUPATIONAL HEALTH AND SAFETY ISSUES AT THE WORK PLACE**

<b>PART A: BUILDING INFRASTRUCTURE</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
1.	Are the floors in good condition, without any irregularities that can cause staggers, trips or falls?		
2.	Is the ceiling and the walls clean without any mould?		
3.	Are there any windows that can open to the outside environment?		
4.	Is the opening of the windows prevented by the existence of shelves and cabinets?		
5.	Are there corridors that are kept clean and have adequate width for the safe movement of people?		
6.	Are the stair cases free of stored material?		
7.	Is the general housekeeping of the work places adequate?		
8.	Do you notice any crowding of people?		
9.	Are there any high shelves not easily reachable?		
10.	Is there a staircase?		
11.	Are there any steps due to the difference in height of the floors?		
12.	Is the entrance for the customers constructed in such a way so that there is risk of falls due to staggering and slipping?		
13.	Is there a basement?		
14.	Is there a mezzanine?		
15.	If yes, is it used only as a store?		
16.	Is there a spiral staircase?		
17.	If yes, is it covered so that the users are protected from indiscrete view?		
18.	Is there a boiler room?		
19.	Is there a lift?		
20.	If yes, is it in good working condition and maintained routinely?		

21.	The goods lifts (if they exist) are they easily distinguished from the personnel lifts and there is a label forbidding its use from carrying people?		
22.	Is the storing carried out so that there is no risk of falling objects?		
23.	Are the closed store rooms ventilated adequately?		
24.	The floors are non slip without surface irregularities?		
25.	Are there floor carpets?		
26.	Do the window panes (internal and external) carry an easily distinguishable sign so that crashing into them is avoided?		
27.	Is the general maintenance of the building judged as adequate?		

<b>PART B : HEALTH AND HYGIENE</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
28.	Are there hygiene facilities separate for each gender and adequate in number?		
	- Are they properly labelled?		
	- Are they kept clean?		
	- Do they provide visual and sound isolation from the work places?		
29.	Is the lighting adequate?		
30.	Is the ventilation adequate?		
31.	Is the temperature adequate?		
32.	Is the internal living condition generally adequate?		
33.	Is the level of noise adequate?		
34.	Is potable water provided and in adequate quantities?		
35.	Is the kitchen maintained in good condition with respect to cleanliness and hygiene?		
36.	Is the handling of cleaning chemicals safe?		
37.	Are there any problems as a result of the drainage system?		
38.	Is there a First Aid Kit available containing all the necessary material?		
39.	Are there any pest control procedures in place?		
40.	Is the general condition of cleanliness adequate?		

<b>PART C : FIRE SAFETY</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
41.	Are there appropriate and in adequate numbers fire extinguishers. Are they adequately maintained and positioned in easily reachable places?		
42.	Is the maximum distance between two fire extinguishers more than 30m?		
43.	Is there a smoke detection and alarm system?		
44.	Is there a nominated person for testing the operation of the alarm system?		
45.	Do they use small LPG units for making coffee?		
46.	Are the electrical appliances (other than the fax machine, refrigerators and computers) switched off after work?		
47.	Are there adequate escape means in case of fire (emergency exits that open towards the outside and without any obstacles?		
48.	Is there appropriate signage indicating the emergency exits?		
49.	Is there a fire safe store that satisfies the relevant requirements?		
50.	Is the strict no smoking policy in the work place implemented?		
51.	Is there risk of fire spreading from nearby third party premises (e.g. restaurants, workshops, etc.)		
52.	Is there a diesel or LPG tank nearby?		
53.	Are the computer and telephone system rooms covered by an automatic fire fighting system?		
54.	Is the Fire and Earthquake Emergency Plan posted on easily visible places in the work place?		
<b>PART D : ERGONOMICS</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
55.	Are the chairs of an ergonomic design with adjustable seat and back rest?		
56.	Do the personnel know how to adjust their seat?		
57.	Are the chairs in good condition?		
58.	Are the offices tidy?		

59.	Are the VDUs at the correct distance from the eyes of the user (between 45 and 60cm)		
60.	Are the VDUs correctly adjusted in relation to the position of the user (inclination, height, reflections)?		
61.	Is the cash counter (where applicable) in good condition and tidy?		
<b>PART E : ELECTRICITY</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
62.	Are there electrical appliances in use that have been brought in by the employees?		
63.	Do the employees make use of electric heater for the preparation of coffee?		
64.	If yes, is it of an approved type?		
65.	Is the use of wiring appropriate?		
66.	Is the visual condition of the wiring adequate?		
67.	Is there use of multi supply sockets?		
68.	Are there any worn wires or faulty electrical equipment?		
<b>PART F : ENVIRONMENT – WASTE MANAGEMENT</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
69.	Is the management of waste (paper etc) satisfactory?		
70.	Are the areas out and around of the building clean without any waste material?		
71.	Is waste paper sent to recycling?		
<b>PART G : SUBCONTRACTORS</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
72.	Is the work of the subcontractors carried out according to a written procedure?		
73.	Is it assured that the work of the subcontractors, including the window cleaning activities is carried out in a safe manner for the personnel and the customers?		
74.	The carrying out of hot work (welding, use of grinders etc. ) is a serious cause of fire. Are there procedures for the safe execution of such activities?		

<b>PART H : CUSTOMERS</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
75.	Is the customer entrance safe without any hazards that could cause trips, staggers and falls?		
76.	Is the customer area safe even for small children and for people with health problems?		
77.	Is there labelling for disabled persons?		
78.	Is there appropriate access for disabled people?		
79.	Do the ATMs provide access for disabled people?		
<b>PART I : PARKING AREAS – VEHICLES – NEARBY PREMISES</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
80.	Is there adequate parking space for the employees?		
81.	If not, are there any other arrangements?		
<b>PART K : SAFETY COMMITTEE</b>		<b>YES/ NO</b>	<b>IF NO THE PROPOSED ACTIONS FOR MANAGING RISK</b>
82.	Is the Unit included in the ones that they will not have to initiate a safety committee?		
83.	If not, is there a safety committee and in operation?		

Comments: If this space is not enough write your comments on attached sheet.

**Review Scale**

**How do you find the general level of the working conditions of this Unit?**

☹ Bad	Medium	Adequate	Good	☺ Very good
1	2	3	4	5

Note ✓ in the appropriate box

Completed by : ..... .....  Date: .....
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Comments: ( in case the space in the questionnaire is not enough)

Completed by:

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Date: .....