

HAZARD SURVEILLANCE AND SAFETY INSPECTION CHECKLIST

PURPOSE: This form will be used by the unit safety representative and supervisors quarterly. If a deficiency and/or hazard exists, *specifically* identify the location(s) and action(s) taken for correction. Forward a copy of the completed checklist to the MEDDAC Safety Manager and retain one copy on the unit.

UNIT / AREA INSPECTED:	BLDG NR:	PHONE:
INSPECTOR'S NAME:	DATE OF INSPECTION:	

ITEMS	YES	NO	N/A	LOCATION / ACTION
SECTION I - SAFETY AND PATIENT SAFETY				
A. Are there any trip hazards; e.g., telephone/power cords across walkways, and are carpets secure?				
B. Are rest room grab bars intact?				
C. Are call systems functional? (Patient rooms, cubicles and bathrooms.)				
D. Are patient equipment alarms on medical equipment in service and not "silenced"?				
E. Are sterile needles and syringes secured?				
F. Are caution signs used for wet floors?				
G. Are stools or ladders available where needed?				
H. Is DD Form 2272 (OHSa Workplace Poster) posted in the work area?				
I. Have all new employees received unit level safety orientations? Documented in 6-sided folders?				
J. Are current primary and alternate safety representative orders in the green safety binder?				
K. Are "Near Miss" forms (MEDDAC Form 756) available and visible to patients and staff?				
SECTION II - LIFE/FIRE SAFETY PREVENTION				
A. Are fire doors kept closed at all times, and not wedged open?				
B. Are main egress corridors free of chairs, equipment, debris and obstructions?				
C. Do door latching mechanisms work?				
D. Are combustible liquids stored in a flammable storage cabinet?				
E. Is there at least 18 inches clearance between ceiling and storage?				
F. Are storage rooms neat, organized, with adequate aisle space, and are doors kept closed?				
G. Are exit signs illuminated with both bulbs?				
H. Are portable space heaters prohibited in patient care areas?				
I. Are fire extinguishers inspected monthly, and are the inspections documented?				
J. Are any doors held open by unauthorized methods, such as with door stops?				
K. Are all ceiling tiles intact; none broken, soiled or missing?				
SECTION III - HAZARDOUS MATERIALS AND WASTES				
A. Do all products have adequate labeling? (A product/chemical name, manufacturer, precautions.)				
B. Are current material safety data sheets (MSDS) available in the area?				
C. Have safety shower and/or eyewash units been checked weekly and the checks documented?				
D. Is a spill kit available?				
E. Are chemicals/solutions/wastes secured in areas that are also occupied by children?				
F. Are compressed gas cylinders secured?				
G. Is required personal protective equipment (PPE) available and used in all areas?				
H. Is PPE maintained in sanitary condition and stored in a central location?				

