Office Self-Inspection Checklist

All College of Chemistry workspaces must be inspected at least annually as part of Cal/OSHA’s requirement for an effective Injury and Illness Prevention Program (IIPP). This self-inspection form will help document safety inspections in offices, receiving areas, and other common areas, and will assist departments in identifying and correcting many common unsafe practices and conditions. This form is not for use in shops, laboratories, or other areas containing hazardous materials. The unsafe practices and conditions identified in this form are prohibited by state laws or campus policies, or are not generally accepted safe workplace practices.

After completing the self-inspection form, share the results with your supervisor. Correct each identified deficiency as soon as possible and document correction on the form. Keep the original self-inspection form on file so that it will be available if requested by Cal/OSHA or campus oversight groups. Please forward a copy of the completed checklist to Michael Kumpf, 317 Lewis (or place in his mailbox in the Department of Chemistry faculty mailroom).

DATE: ___ / ___ / ____
BUILDING: ______________________________ ROOM: _______________________
Inspector’s Name: __________________ Inspector’s Signature: ________________
Supervisor’s Name: __________________ Supervisor’s Signature: ________________

Answer each question by circling “YES” (satisfactory), “NO” (needs correction), or “N/A” if the question does not apply to your workspace. Use the “Additional Comments” area at the end of the checklist to note any safety concern you may have that is not adequately represented in the checklist or to clarify additional information about particular checklist items.

1. Are you and your co-workers in the workspace aware of the College’s Emergency Response Plan (i.e. evacuation procedures, what to do in case of fire, etc.)?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)
   
   Corrective Action(s): Contact your supervisor to arrange for safety training
   Completion Date: ____________________________.

2. Have you and your co-workers in the workspace received safety training about the College’s Injury & Illness Prevention Program?
Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

**Corrective Action(s):** Contact your supervisor to arrange for safety training.
**Completion Date:** ________________________________.

3. Are fire alarm pull boxes clearly identifiable and unobstructed?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Fire alarm pull boxes are located in hallways typically near the stairway. Clear area of obstructions. Call College Physical Plant (2-5231) if help is needed clearing hallway area.
   **Completion Date:** ________________________________.

4. Are portable fire extinguishers in the immediate workspace mounted and unobstructed?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Check extinguishers actually in the workspace (if any) and those in the hallway immediately outside of the workspace. Clear area in front of extinguishers of obstructions. Contact College Physical Plant (2-5231) to get fire extinguishers mounted or for help clearing hallway areas.
   **Completion Date:** ________________________________.

5. Are fire extinguishers tagged with current annual inspections?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Contact College Physical Plant (2-5231) to check on status of inspection.
   **Completion Date:** ________________________________.

6. Do self-closing devices and door latches on fire-rated doors work freely?
   (Doorstops are not permitted.)
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Contact College Physical Plant (2-5231) to arrange for door repairs.
   **Completion Date:** ________________________________.

7. Are there at least 18 inches (47 cm) of vertical clearance maintained between all stored items and the ceiling?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Remove stored items that do not meet the above criteria.
   **Completion Date:** ________________________________.

8. Are electrical panels accessible?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)

   **Corrective Action(s):** Clear area in front of electrical panels by 36 inches.
   **Completion Date:** ________________________________.

9. Are aisles, exits, and adjoining hallways maintained free of obstructions so that the area is easily evacuated or accessed in case of an emergency?
   Yes (Satisfactory)  No (Needs Correction)  N/A (Not Applicable)
Corrective Action(s): Remove obstructions from aisles, exits, and adjoining hallways. Contact College Physical Plant (2-5231) if help is needed cleaning adjoining hallways.
Completion Date: ________________________________.

10. Are combustible materials, such as paper, cardboard and wood, kept to a minimum?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Remove or recycle all combustible material that is not necessary (i.e. old newspapers, journals)
   Completion Date: ________________________________.

11. Does all electrical equipment (e.g., copiers and computers) have 3-prong grounded plugs?
(Ensure that the grounding prong has not been removed, and that 3-prong to 2-prong adapters are not used.)
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Contact your supervisor to replace very old ungrounded electrical equipment with newer 3 prong grounded equipment.
   Completion Date: ________________________________.

12. Are extension cords: 1). In good condition (e.g., no breaks or exposed wiring); 2). Used only as temporary wiring (less than 30 days); and 3). Not connected in series?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Do not connect extension cords in series. Dispose of or repair (contact College Electric Shop 2-4594) all electrical cords that are not in good condition, and replace those in use more than 30 days with permanent wiring. Contact the College Electrical Shop if additional electrical outlets are needed.
   Completion Date: ________________________________.

13. Is all equipment and furniture present in the workspace in good and safe operating condition (i.e. not broken, adequately guarded or not otherwise dangerous)? (Example: A papercutter that does not have a guard to keep fingers away from the blade is not in good and safe operating condition).
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Contact your supervisor to arrange for replacement or repair of equipment or furniture.
   Completion Date: ________________________________.

14. Are furniture and equipment over 4 feet tall braced to prevent tipping in an earthquake?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Contact the College Woodshop (2-2079) for assistance in installing seismic restraints, or remove items in question.
   Completion Date: ________________________________.

15. Do shelves in the immediately work area that contain heavy items such as textbooks, boxes or computer equipment have earthquake lips/barriers to prevent materials from falling off and hitting someone during an earthquake?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)

   Corrective Action(s): Contact the College Woodshop (2-2079) for assistance in installing seismic restraints on shelving that
presents a seismic hazard to the occupants of the workspace.
Completion Date: ________________________________.

16. Are all work areas adequately illuminated?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)
   
   Corrective Action(s): Contact College Physical Plant (3-2079) to repair lighting systems or to replace light fixtures. If you are concerned that fully operational lighting systems are not adequate for your work, please contact ccEHS&S (3-0526) for a lighting survey.
   Completion Date: ________________________________.

17. Have computer workstations been ergonomically evaluated for all employees who spend 4 or more hours at their computer each day?
   Yes (Satisfactory)    No (Needs Correction)    N/A (Not Applicable)
   
   Corrective Action(s): Contact your supervisor to have a trained workstation evaluator assess the workstation.
   Completion Date: ________________________________.

Additional Comments (For clarification on particular checklist items, please refer to the checklist number):