# **General Inspection Summary Report**

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| --- | --- |
| **Building name and area(s) inspected:** |  |
| **Inspection completed by:** |  |
| **Date and time:** |  |
| **Inspection #:** (GI- building name- yy/mm/dd) |  |

*Inspection # must be included as these will be referred to in the JOHSC meeting minutes for any actionable items. These numbers help provide a quick reference to date and building.*

## The below General Inspection Report summarizes deficient items found during the General Inspection. This Inspection Report is to be completed during or following the General Inspection (based on individual Section Notes).

**Proceed to General Inspection Checklist for further details regarding item numbers.**

|  |  |  |  |
| --- | --- | --- | --- |
| Item # | Description of Hazard: *(specific location and/or equipment, nature of hazard - \*see below)* | | |
| Recommended Action: *(detailed action, taking account of hierarchy of controls, two or more options where appropriate)* | | | |
| Person Responsible: | | Priority Level: | Target Date: |
| Item # | Description of Hazard: *(specific location and/or equipment, nature of hazard - \*see below)* | | |
| Recommended Action: *(detailed action, taking account of hierarchy of controls, two or more options where appropriate)* | | | |
| Person Responsible: | | Priority Level: | Target Date: |
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| Item # | Description of Hazard: *(specific location and/or equipment, nature of hazard - \*see below)* | | |
| Recommended Action: *(detailed action, taking account of hierarchy of controls, two or more options where appropriate)* | | | |
| Person Responsible: | | Priority Level: | Target Date: |

**Send a copy of this report and checklist to the appropriate JOHSCs. Highlight important items that must be reviewed/discussed at next JOHSC meeting. Actionable items listed in the Inspection Report should be divided and sent only to each of the persons responsible.**

**Hazard Rating Descriptions/ Priority Table:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Priority Level** | | | **Timeline for Completion of Corrective Action** | **Timeline for Follow Up Inspection** | | | | | |
| **A (High Risk)** | | | **Immediately:** A moderate to highpotential for serious injury or loss of life and/or extensive property damage or loss (structure, equipment or material). | **Within 1-2 days** | | | | | |
| **B (Moderate Risk)** | | | **As soon as possible:** A moderate to high potential risk of causing a minor injury, illness or property damage or loss. (structure, equipment or material) | **Within 1 week** | | | | | |
| **C (Low Risk)** | | | **As soon as possible:** A potential exists for causing a non-disabling injury or non-disruptive property damage. | **Next regular inspection or further investigation required** | | | | | |
| **F. Shops / Workshops – including Tools and Equipment** | | | | | | | |
| Note: Shop / workshop personnel must be notified in advance that an inspection will be performed in their area. A shop staff member who is familiar and knowledgeable with the hazards of the work space must be involved in the inspection. Alternatively, this inspection may be performed internally but must be completed and submitted to the LST or JOHSC within one week of notification. | | | | | | | |
| Building / area(s) inspected: | | | | | | | |
| Inspector(s): | | | | Date: | | | |
| **Item #** | **General** | | | | **Y** | **N** | **N/A** |
| F-1 | Are workspaces neat, orderly and free of slipping and tripping hazards? | | | |  |  |  |
| F-2 | Is there appropriate lighting for work tasks? | | | |  |  |  |
| F-3 | Are noise levels safe such that hearing protection is sometimes required? | | | |  |  |  |
| F-4 | Is all required PPE maintained in good working order and available to all workers? | | | |  |  |  |
| F-5 | Are workers trained in correct PPE use and limitations? | | | |  |  |  |
| F-6 | Is PPE used consistently and correctly? | | | |  |  |  |
| F-7 | Is PPE inspected, fit tested (if applicable) and replaced on schedule? | | | |  |  |  |
| F-8 | Is there adequate heating and cooling? | | | |  |  |  |
| F-9 | Is air flow and ventilation (including dust removal) appropriate for work tasks? | | | |  |  |  |
| F-10 | Are electrical plugs, sockets and switches in good condition? | | | |  |  |  |
| F-11 | Do electrical control boxes have clear access? | | | |  |  |  |
| F-12 | Are circuit breakers and starter switches clearly marked? | | | |  |  |  |
| F-13 | Is piping for gas, compressed air, etc. clearly labelled? | | | |  |  |  |
| F-14 | Are compressed gases and other hazardous materials safely and properly stored / secured? | | | |  |  |  |
| F-15 | Are emergency contact numbers and procedures (including First Aid) prominently posted? | | | |  |  |  |
| F-16 | Are illuminated emergency exit signs visible and functional? | | | |  |  |  |
| F-17 | Are fire extinguishers readily accessible, unobstructed, charged and inspected within the last year? Is signage present (if not clearly visible)? | | | |  |  |  |
| F-18 | Are fire-alarm pull-stations accessible and are emergency exit doors unobstructed and functional? | | | |  |  |  |
| F-19 | Are there resources, known and available, to help workers address and prevent ergonomic issues such as overexertion, MSIs, etc.? | | | |  |  |  |
| F-20 | Are supervisors and workers aware of the requirement to have written procedures to ensure the safety of people working alone or in isolation? | | | |  |  |  |
| F-21 | Do new staff receive workplace and task-specific orientations and are records kept? | | | |  |  |  |
| **Item #** | **Shop Tools and Equipment** | | | | **Y** | **N** | **N/A** |
| F-22 | Are machine and equipment operator’s manuals available to workers? | | | |  |  |  |
| F-23 | Are lockout procedures posted and followed? | | | |  |  |  |
| F-24 | Is the maintenance log up-to-date? | | | |  |  |  |
| F-25 | Is the inspection log up-to-date? | | | |  |  |  |
| F-26 | Are warning signage for physical hazards created by equipment and processes posted, clearly visible and legible? | | | |  |  |  |
| F-27 | Are hazardous points of operation adequately guarded? | | | |  |  |  |
| F-28 | Are safeguards in place, in good condition, and cannot be easily removed by workers? | | | |  |  |  |
| F-29 | Is equipment positioned to avoid endangering other workers? | | | |  |  |  |
| F-30 | Are workers protected from materials ejected from tools or equipment? | | | |  |  |  |
| F-31 | Are equipment controls clearly labelled and within easy reach, but protected from inadvertent activation? | | | |  |  |  |
| F-32 | Are defective tools and equipment tagged and removed from service? | | | |  |  |  |
| F-33 | Are tools used for their designed purposes only? | | | |  |  |  |
| F-34 | Other issues: | | | |  |  |  |
| **Item #** | **Section / Site Inspection Notes** | | | | | | |
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