

Monthly Specific Item Checklists

The purpose of this document is to provide an overall list of inspections, by category, to assist with safety inspections/audit needs of WTCS Districts. The following checklists are recommended by the WTCS Safety Council to be implemented and should be completed on a monthly basis as a supplement to the “General Safety Survey” or program specific safety surveys (which are to be completed on a semester basis). Any exposures noted should be addressed promptly and supporting documentation should be included with the checklist and returned to the appropriate office. In addition, each checklist identifies staff/offices which are anticipated to conduct the inspections; specific protocol will vary depending on District needs.

1. Slip and Fall Prevention- January
2. Worker Safety/ OSHA Compliance - February
3. HVAC/ Electrical- March
4. Swimming Pool- April
5. Recreational Equipment- May
6. Life Safety- June
7. Security- July
8. Vehicle safety- August
9. Key Control- September
10. Risk Management Controls October
11. Fire Prevention- November
12. Emergency Preparedness- December

This is for use by the WTCS Safety Council Districts to incorporate into their internal procedures as deemed necessary. The information contained in this document was originally developed from materials provided by St. Paul. There is no guarantee of results and assume no liability in connection with either the information contained in, or the suggestions made in this publication. Moreover, it cannot be assumed that every acceptable safety procedure is included, or that abnormal or unusual circumstances may not warrant or require other precautions

January Safety Checklist-

SLIP AND FALL PREVENTION

To be completed by: Environmental Health & Safety (EH&S) & Facilities staff; return to EH&S Office.

Yes No N/A

Exterior

- Sidewalks in good condition and free of tripping hazards.
- Exterior steps and ramps in good condition and free of tripping hazards.
- Handrails for steps and ramps sturdy and fastened securely.
- Exterior lighting adequate at night.
- All lights in working order.

Interior

- Carpet free of tares and raised areas.
- Floor mats secured at corners, no raised edges.
- Floor mats on slick surfaces have non-slip.
- Wet floor cones in use and available for floor cleaning.
- Prompt spill clean-up procedures in place.
- Common areas clear of debris.
- Aisle ways maintained in exercise and common areas (minimum 36").

Maintenance area

- Floor free of oil spills.
- Proper storage in racks and shelving.
- Adequate aisle space and work area.

Parking lots.

- In good condition and free of tripping hazards.
- Well lighted over all areas at night
- All lights in working order.
- Traffic control signs in place and readable.
- Speed bumps in good condition contrasting paint visible.
- Oil spots cleaned from parking lot.

Inclement weather

- Adequate supply of sand and salt for icy steps, walks, and the parking lot.
- Dedicated staff responsible for ice and snow removal and salt dispersing.
- Storm drains operate properly, no standing water in the parking lot.

Guardrails and ladders

- Stairways equipped with standard railings; clear of trash.
- Guardrails greater than 36 inches high with balusters less than 4 inches.
- Ladders free from defects and equipped with safety tee, blocked, cleated, or otherwise secured.
- Ladder bases out from wall ¼ working length of ladder.
- Straight ladders extend at least 3 feet above the entrance surface and tied off.
- Scaffolding (more than 7 feet high) equipped with guardrails, toe boards; and fully planked.

Accident investigation- *Review all incident investigation forms within the past year involving slip and falls*

- Corrective action noted and taken to address each slip and fall incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

March Safety Checklist

HVAC/ ELECTRICAL

To be completed by: Environmental Health & Safety (EH&S) & Facilities staff; return to EH&S Office.

Yes No N/A

HVAC

- Heating system cleaned and serviced by a competent heating contractor within past 12 months.
- Air conditioning system cleaned and serviced by a competent serviceman within past 12 months.

Electrical

- Visible wiring unfrayed, in good condition and properly grounded.
- No cords with splices or tape repairs (replaced with undamaged cords).
- Switch panels and fuse boxes closed.
- Switch panels and fuse boxes not hot.
- Fuse box/circuit breaker switches labeled.
- Extension cords are proper type and in good condition. (Avoid light duty household types).
- Extension light sockets insulated.
- Portable tools grounded or double insulated.
- Lines marked for voltage.
- Lock-out devices provided and used.
- Clear access to power panel boxes.
- Ground fault interrupter circuit/explosion proof.

Electrical equipment maintenance

- Equipment motors properly oiled, kept clean and ventilation unrestricted to reduce overheating.
- Electrical system checked by a licensed electrician within past 12 months.
- Unobstructed access maintained to electrical panels.
- Electrical panel doors kept closed.
- Circuit breakers free to operate (none taped or otherwise obstructed) and circuits labeled.
- Electrical equipment and appliances properly grounded.
- Wiring over ten years old has been checked by infrared scan for hot spots.

Electrical, heating and air conditioning rooms. *Inspect a random sample of apartments.*

- a. Restricted only to authorized personnel.
- b. Free of combustible storage.
- c. Stickers in place indicating "Not a storage area".
- d. Notice sent out indicating no storage in HVAC rooms.

Lighting/ Surge Protection

- All computer and electronic data equipment equipped with surge protection.
- Lightning and surge protection for HVAC equipment, pumps, and compressors.
- Lightning rods and grounding provided where needed.

Accident investigation- *Review all electrical systems property damage incidents within the past year.*

- Corrective action noted and taken to address each electrical incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

April Safety Checklist

SWIMMING POOL SAFETY

To be completed by: Environmental Health & Safety (EH&S) & Pool Director; return to EH&S Office.

Yes No N/A

Swimming pool/spa

- Pool deck and locker rooms are clean and free of debris.
- Swimming pool, spa, and whirlpool are fenced in good condition
- Fence meet height (48") and bar spacing (< 4") requirements
- Entrance gates have operational self-closing and self-latching devices
- Gate locked except during posted operating hours.
- Lifeguard always in attendance during operating hours or signs posted indicating "No Lifeguard"
- Handrails are in good condition and free of corrosion.
- Procedures to exclude glassware enforced.
- Depth markers legible on top and sides of pool
- Accurate depth marked at each 2 ft. depth change and within every 25 ft.
- Rope float separates deep from shallow water and in good condition.
- Pool deck slip-resistant and free of tripping hazards.
- Slip resistant material is in good condition on the deck, stairs, steps and ramps.
- Furniture is in good condition.
- Drain cover inside pool is present, in good condition, with proper weight and strain hole size.
- Deficiencies found on the pool areas immediately or planned (documented).
- Whirlpool/ spa temperature controls are locked

Diving board (*Facilities with diving boards must have certified life guards*)

- Depth/ board height and location evaluation and acceptability documented by a pool specialist
- Diving board and fittings in good condition.
- Non-slip surface on diving board.

Ground Fault Circuit Interrupter for pool lighting and electric system

- All outlets are GFCI and tested at least monthly
- There are no extension cords in pool area.

Maintenance checks include the following documented items:

- Daily chlorine and pH level checks.
- Daily water clarity checks.
- Weekly total alkaline level checks.
- Periodic bacteria sampling. Date of last lab test: _____
- Preventative maintenance of the water filtration and disinfection systems.
- Skimmers, strainers and filters effectively control debris.
- Swimming pool sanitizers are stored away from combustibles, oxidizing materials and other incompatible substances, such as ammonia, gasoline, paints, and detergents.

Whirlpool/ spa

- Temperature warnings, maximum 108 F degrees
- Rules Posted: Limit stay to 10 minutes, Check with physician if health problems or pregnant

Rescue equipment present and accessible:

Pool rules/ postings visible and include:

- | | |
|---|---|
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rescue tube. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Pool hours. |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Ring buoy with throw line. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No lifeguard on Duty |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Shepherd's crook. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Call 911 in case of emergency |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> First aid kit. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No diving. |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Floating backboard. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No swimming alone. |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Telephone to an outside line (not front desk). | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No running, pushing, or shoving. |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Adequate lighting and emergency lighting. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No glass. |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other equipment required by your jurisdiction. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No children without adult supervision. |

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

May Safety Checklist

RECREATIONAL EQUIPMENT

To be completed by: Environmental Health & Safety (EH&S) & Athletic Director; return to EH&S Office.

Yes No N/A

Weight lifting/ Exercise equipment

- Equipment has adequate spacing and clear aiseways (cords against walls).
- Exercise bikes and treadmills are in good condition.
- "Universal" equipment seats, pins, and pulleys are in good condition
- "Free weights" are properly stored and in good condition.
- Out of order tags or removal of all equipment under repair.
- Phone in area and operational with emergency numbers posted.

Rules posted which include:

- Doctor approval required prior to use of equipment.
- Age limits (No use under age 16 without adult supervision)
- Equipment instructions are available
- Use at your own risk

Locker Rooms

- Non-slip flooring in showers and locker rooms.
- Lighting fixtures are shatterproof.
- Access to and from locker rooms is controlled for security.
- Electrical outlets are protected by Ground Fault Circuit Interrupters (GFCI)
- Showers water temperature is controlled to be 120°F or lower.

Racket courts

- Court surfaces clear and free of defects.
- Officials' chairs and benches in good condition.
- Spectators' bleachers and stands in good condition.
- Fences in good condition and free of snags or projection.
- Glass doors, windows are shatterproof glazing or safety glass.
- Outdoors courts have good drainage, no standing water.

Playground equipment

- Fall protection surfacing in place and level throughout play area.
- Bolts and screws tight and not protruding.
- Wooden structures are free of splinters and stable.
- Sign posted indicating age of intended equipment usage (3- 12 years of age)
- Sign posted indicating adult supervision required.

Accident investigation- Review all recreational related incidents within the past year.

- Corrective action noted and taken to address each recreational related incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

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June Safety Checklist

HOSPITALITY ROOM SAFETY

To be completed by: Environmental Health & Safety (EH&S) & Culinary Trades; return to EH&S Office.

Yes No N/A

Exits

- Properly marked with lighted exit signs
- Unobstructed and readily accessible
- Provide for free egress (not locked or chained shut).

Emergency lighting

- Tested monthly
- All units operate properly

Sanitation

- No chipped or broken glassware and procedures for immediate disposal.
- Recognized sanitation practices being maintained.
- Chemicals and cleaners isolated from beverages preparation/storage areas.

Housekeeping

- Arrangement of chairs and tables allows clear aisle space for guests.
- Stools, chairs and tables in good condition.
- Carpeting in good condition with no slip or tripping hazards.
- Bar floor slip-resistant and free from tripping hazards and spills
- Lighting adequate, not overly subdued, changes in floor level highlighted.

Equipment & Appliances

- No food processing machines or equipment available
- Ground fault circuits in place near sink
- Knives stored in drawers or racks when not in use.

Liquor service

- No open bar or keg "open" service.
- Non-alcoholic beverages available at all sponsored events.
- Sponsored events restricted to residents only.
- Serving of alcohol is restricted to trained licensed staff or contracted service
- Certificates of insurance and servers license required of all vendors serving alcohol.

Accident investigation- *Review all hospitality related incidents within the past year.*

- Corrective action noted and taken to address each hospitality related incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

July Safety Checklist

SECURITY

To be completed by: Environmental Health & Safety (EH&S) & Security staff; return to EH&S Office.

Yes No N/A

Resident security

- All residents are provided a security handout.
- Supplemental security bars provided on all sliding doors.
- Deadbolts provided on all resident doors.
- Peep holes provided on all entrance doorways.

Lighting operational in all locations:

- Documented lighting survey conducted for entire property.
- Adequate operational lighting in common areas- mail and laundry.
- Adequate operational lighting in resident entrances.
- Adequate operational lighting in driveways and parking lots.
- "Two step" lighting (activity tripping device) in obscure areas.

Exterior protection/ supervision

- Foliage trimmed back at all entrance areas.
- Perimeter access control via fenced or other means.
- CCTV in operation and utilized at main entrances as needed.
- Contracted security conducts nightly facility surveillance.
- Crime watch program initiated/ signs posted.
- Crime/ complaint reports documented/ addressed and kept on file.
- Police liaison established.

Office/ burglary alarm system

- Perimeter doors locked after dark.
- Supplemental bars utilized on all sliding doors.
- Peep holes present on each doorway.
- Contacts on all office openings.
- Panic button in office area.
- Documented quarterly testing.

Cash Controls

- No cash policy maintained.
- "No cash on premises" signs posted.

Employment practices

- Documented background checks for all employees.
- Job descriptions and access control restrictions for employees.
- Employee identification badges or uniforms required.

Accident investigation- Review all security related incidents within the past year.

- Corrective action noted and taken to address each security related incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

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September Safety Checklist

KEY CONTROL

To be completed by: Environmental Health & Safety (EH&S) & Security staff; return to EH&S Office.

Yes No N/A

KEY CONTROL

- "Key track" system is utilized to assist in key control efforts.
- "Key Sign-Out Log" is utilized at the property.
- Property manager reviews the sign-out log regularly to ensure compliance.
- Locks are changed and new keys are issued to resident if unit key is missing.
- Authorized written notice from the occupants prior to any 3rd party unit entry (notice in file).
- All units currently equipped with keyless bolting devices (deadbolts, night latches).
- Employee supervisor reporting procedures for all occupied unit keys missing.
- Criminal & Drug test result on file before any new employee is granted key privilege.
- Everyone with key take-home privilege must sign "Property Authorization Agreement"
- "Key Machine" secured behind a locked door and away from the key board.
- Manager authorizes the change of locks upon every move-out.

CONTRACTORS

- "Entry permission notice" on file for all residents (check lease files for verification).
- Documented vendor/ contractor authorization for issuing keys.
- Required key return from vendor/ contractor each evening.
- Documented contractor employee screening policies on file.
- Pest control contractor/ employee identification and license on file.

Accident investigation- *Review all key control related incidents within the past year.*

- Corrective action noted and taken to address each key control related incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

November Safety Checklist

FIRE PREVENTION

To be completed by: Environmental Health & Safety (EH&S) & Security staff; return to EH&S Office.

Yes No N/A

Fire department

- Documented fire department assistance visit within the past year.

Smoke detection/ alarms

- Smoke detectors are hardwired with battery back-up.
- Documentation of smoke detectors sensitivity testing one year after installation.
- Battery visually inspected or tested monthly for operation.
- Resident notices sent out.
- Alarm control panels monitored for trouble signals should be tested annually.

Sprinkler system/ fire barriers

- Documented sprinkler 2" drain tests, water flow alarm and tamper alarm testing done quarterly.
- Documented dry pipe trip testing annually on dry sprinkler systems.
- Private fire hydrants operated and greased annually.
- Documented fire doors testing annually.

Equipment fire protection/ storage

- Cooking equipment, exhaust hood and filters free of grease accumulation.
- Cooking equipment hood and ducts cleaned by an independent contractor within past six month.
- Automatically operated extinguishing system for the cooking hood and duct inspected, serviced and tagged by a qualified contractor within the past six months.
- Automatic gas shut off in place for all gas laundry appliances and stoves.
- No storage within three feet of any hot water heaters of laundry equipment.
- No storage within three feet of any electrical equipment.
- Motors for refrigeration and other equipment serviced kept clean and ventilation unrestricted to reduce overheating.
- Documented boiler inspections on file and equipment tagged.
- Winter checklist utilized to avoid frozen pipes.
- Flammables and aerosols stored in U.L. approved cabinets.
- Fuel stored in metal U.L. approved containers.

Resident outdoor cooking

- Rules restricting bar-b-que pits use in apartments and balconies enforced.
- No bar-b-que stations within 10 feet of building or shrubs.
- Automatic gas shut off valves in place on all gas grills.
- Rules of operation on all common area gas grills.

Roofing

- Roof drains are clear and free of debris.
- No visible water puddling.
- Discharge from drains is away from the building.
- Fireplaces inspected and cleaned as needed on at least an annual basis.

Fire extinguishers

- Minimum 40 BC alkaline type fire extinguishers available and accessible.
- Serviced annually and tagged with date serviced.
- All in designated locations (none missing or discharged).

Accident investigation- Review all property related incidents within the past year.

- Corrective action noted and taken to address each property incident.

Staff Member(s): _____ Date: _____
_____ Date: _____

Negative responses require documented corrective action attached to this form.

