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| Oxford Brookes University logo image |  | Lower Hazard Inspection Form(with staircase checklist)OB-HAS-FORM-11.00 V1 |

| Use this form to inspect offices and associated corridors, stairs, storage areas, lecture rooms and general communal areas such as kitchens, meeting areas, toilets and outside areas (specifically associated with a building, such as immediate area outside fire exit door) | | | | | | | | |
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| **FORM A – Walkthrough Inspection Check sheet** | | | | | | | | |
| **Areas Inspected:** | |  | | | | | | |
| **Inspected by:** | | **Position:** | | | | | **Date:** | |
|  | |  | | | | |  | |
|  | |  | | | | |
|  | | | | | | | | |
| **ITEM** | | | **YES** | **NO** | **N/A** | **COMMENTS**  **(Specific location & brief details)** | | **FURTHER ACTION REQUIRED - Y/N?** |
| **PREVIOUS INSPECTION** | | |  |  |  |  | | **If ‘Y’ record details in Form B** |
| 1 | Have all previous actions been completed? | |  |  |  |  | |  |

| **A) WORK ENVIRONMENT** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | Is work environment suitable, including welfare facilities, ventilation, temperature & housekeeping (including sufficient space 11m3 per person)? | |  |  |  |  |  |
| 2 | Do floors have non-slip, even surfaces? (If area includes stairs, use attached check sheet) | |  |  |  |  |  |
| **B) WORK EQUIPMENT** | | | | | | | |
| 1 | | Are ladder/step ladder inspections taking place (ladders etc should have a current tag) |  |  |  |  |  |
| 2 | | Is electrical equipment & lighting switched off if not in use? |  |  |  |  |  |
| 3 | | Is the FM aware that any portable electric heaters visible and in use have been approved? |  |  |  |  |  |
| **C) WASTE** | | | | | | | |
| 1 | | Are relevant bins general/recycling available, clearly labelled and being used correctly? |  |  |  |  |  |

| **D) ELECTRICAL** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| 1 | Are plugs, sockets, leads visibly in good condition and items PAT tested? |  |  |  |  |  |
| 2 | Is overloading of sockets (by use of adaptors etc.) avoided? |  |  |  |  |  |
| 3 | Are trailing cables avoided or covered/cable tied where necessary? |  |  |  |  |  |
| **E) LIFTING, CARRYING AND MOVING** | | | | | | |
| 1 | Are items stored sensibly? |  |  |  |  |  |
| 2 | Is mechanical equipment e.g. trolleys available for moving heavy/large loads and equipment maintained? |  |  |  |  |  |
| **F) FIRE** | | | | | | |
| 1 | Date of last fire evacuation (drill) within last twelve months? |  |  |  |  |  |
| 2 | Are fire exits, escape routes, fire alarm points and firefighting equipment clearly visible and unobstructed? |  |  |  |  |  |
| **G) EMERGENCY PROCEDURES** | | | | | | |
| 1 | Do occupants know emergency numbers and assembly points? |  |  |  |  |  |
| 2 | Are emergency exit routes signposted? |  |  |  |  |  |
| 3 | Access to emergency evacuation area appropriate for disabled persons? |  |  |  |  |  |
| **I) ADDITIONAL Insert extra rows below as required** | | | | | | |
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| **Form B – Action Plan** | | | | |
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| Ref  No. | Action? | Who? | When (P1, P2, P3)? | Occupants Concerns Raised/Other Comments |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*Insert extra rows above as required*

**Priority: P1 = Action within 1 week, P2 = Action within one month, P3 = Action within three months**

Staircase Inspection Checklist

| **Stairwell Location** |  | **Date of Inspection** |  | **Review Date** |
| --- | --- | --- | --- | --- |
| Abercrombie |  | 05/03/24 |  | 03/25 |

| **Inspection checklist** | | | **Issue raised (add to action plan)** |
| --- | --- | --- | --- |
| **Lighting** | | | |
| Is lighting adequate? | Yes | No |  |
| **Floor condition** |  |  |  |
| Floor in good condition e.g. slippery, uneven surface, clean etc.? | Yes | No |  |
| Nosing protruding? | Yes | No |  |
| **Balustrade** | | | |
| Suitable, clean & in a good condition? | Yes | No |  |
| **Storage** | | | |
| Have items been stored under or near the staircase? | Yes | No |  |
| Stairs |  |  |  |
| Are stairways with four or more stairs equipped with standard stair rails or handrails? | Yes | No |  |
| Are steps on stairs & stairways designed or provided with slip-resistant surface? | Yes | No |  |
| When door/gate opens directly on stairway, is there adequate means to prevent person being struck? | Yes | No |  |
| If stairs exit directly into an area where vehicles operate, are appropriate barriers and warnings provided to prevent people from stepping into path of traffic (or vehicles parking in front of door, to prevent egress)? | Yes | No |  |