

# Workplace Inspections by Committee Members

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Bureau de la dirigeante principale de la gestion des risques  
Office of the Chief Risk Officer

**uOttawa.ca**



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## Contents

INTRODUCTION.....	1
PURPOSE .....	1
FREQUENCY.....	1
CONDUCTING AN INSPECTION.....	1
FOCUS .....	1
INSPECTION REPORT .....	2
FOLLOW-UP.....	2
INSPECTION-LIST REMINDERS.....	4
For Office Type Settings.....	4
For Laboratory Type Settings.....	8
WORKPLACE INSPECTION FORM .....	16

## 1. Introduction

The University Joint Occupational Health and Safety Committee is composed of people who represent the workers and the employer. Together, they are committed to improving health and safety conditions in the workplace. Committees identify potential health and safety problems and bring them to the employer representative's attention of each sector.

The Committee has five principal functions:

- To identify potential hazards;
- To evaluate these potential hazards;
- To recommend corrective action to follow up on implemented recommendations;
- To hold meetings; and
- To carry out regular inspections of the workplace.

## 2. Purpose

The purpose of a workplace inspection is to identify hazards that could endanger the health or safety of anyone in the workplace so that corrective action can be taken. An inspection can also determine if established practices and procedures are being followed.

## 3. Frequency

Regular inspections help to identify hazards and prevent accidents. Due to the physical size of the University of Ottawa, Functional Occupational Health and Safety Committees should establish a monthly inspection schedule that ensures the entire workplace will be inspected at least once a year.

## 4. Conducting An Inspection

Committee members who represent workers must select someone in their group to inspect the workplace. This person can be a certified member.

Every inspection shall be conducted by a team designated by the members of the relevant FOSHC and consisting of one or more elected / appointed worker members and one or more appointed management members of that FOSHC. Other management representatives can also participate in the inspections.

## 5. Focus

The focus of the inspection conducted by committee members should be on the general conditions of the workplace, unsafe work procedures, and outstanding or newly created hazards. By doing so, the inspectors observe a "safety snapshot" of the workplace and identify hazards that local workers or the management representative may not have identified. The committee members' inspection is a **complementary** process to the owner and employer's duties, responsibilities, or obligations to ensure the workplace is healthy and safe.

The *Occupational Health and Safety Act* set specific duties to all workplace parties. The employer and employer representative (that includes all level of management such as supervisor, dean, director, lead hand, manager, etc.) have general duty to make sure that the Act and all its regulations are complied with. They also have the duty to take every precaution reasonable in the circumstances to protect workers. Therefore, they must ensure the safety of everyone and implement necessary mechanisms to assess, control, and monitor hazards or potential hazards. The committee inspection does not replace the employer's responsibilities and obligations but brings an additional review of the workplace health and safety.

## 6. Inspection Report

The completed workplace inspection report is forwarded to the two chairs of the relevant FOSHC. The management co-chair shall, without undue delay, distribute copies to members of the FOSHC and to the appropriate building management agent. See section 4.4 of the [Terms of Reference](#).

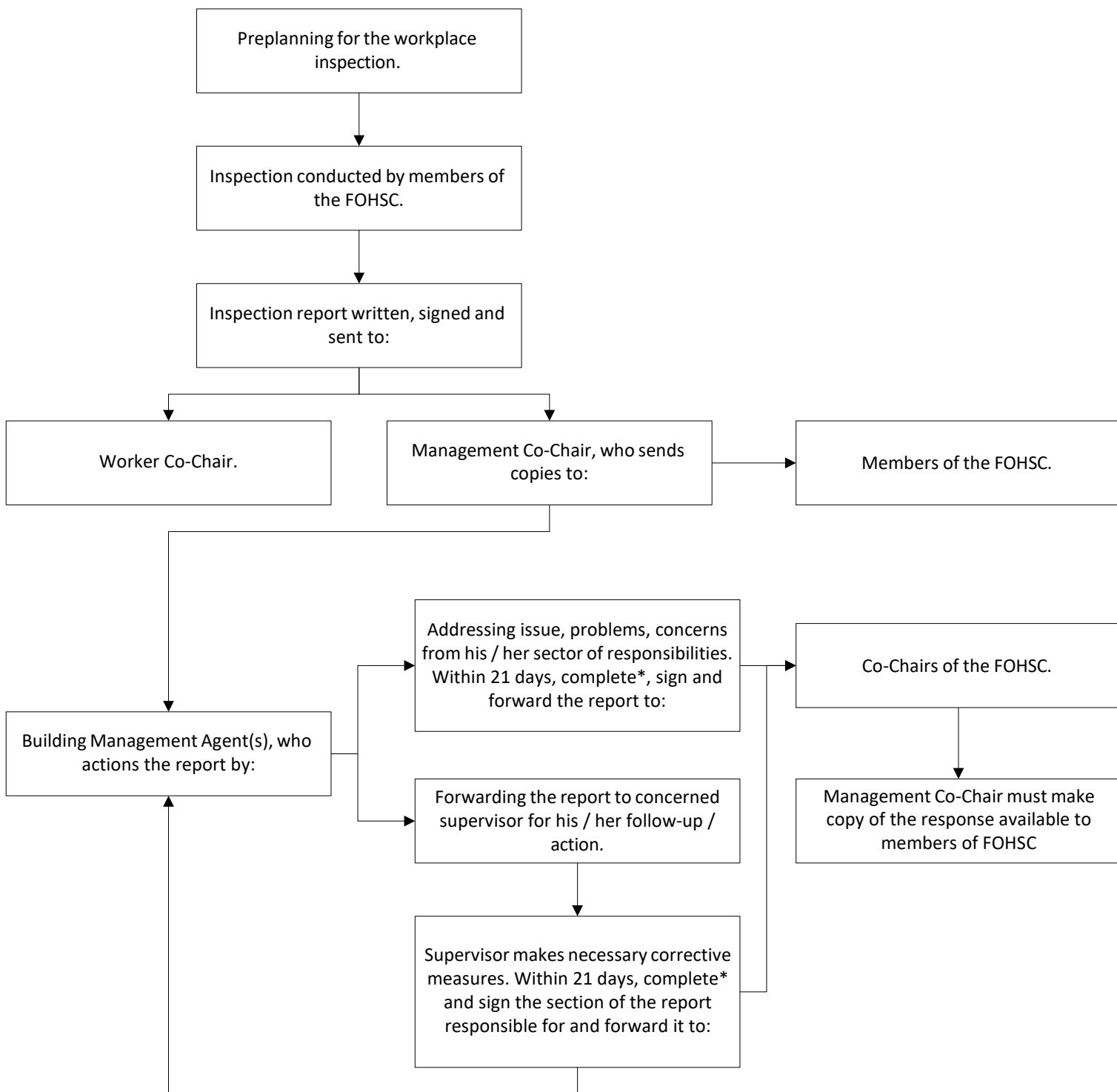
Reports are available in both official languages.

## 7. Follow-Up

Every employer's representative, supervisor or every building management agent (BMA) to whom problems have been reported on workplace inspection forms must take necessary action(s), sign the written report, and indicate the status of problems reported and forwarded to the BMA and the two chairs of the relevant FOSHC. Such reports shall be provided within 21 days following receipt of a workplace inspection form. The response shall either contain a timetable to implement the recommendation that the recipient agrees with or give reasons for the recipient's disagreement with any recommendations.

The process is visually depicted on page 3.

### Workplace Inspection Process Chart



\* The response shall contain a timetable for implementing the recommendation and give reasons for those in disagreement with, or not accepted.

## 8. Inspection-List Reminders

This is a tool only. No checklist can be complete enough to evaluate a workplace for all hazards. The focus of the inspection should be on outstanding or newly created hazards and unsafe work procedures.

**For Office Type Settings:**

Item	Description			
<b>Entering the Office</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
1	Is the room number (or room identification) and responsible party clearly posted?			
2	Does the door open without obstruction?			
3	Are there tripping or slipping hazards present in the office (obstacles, lifted flooring, liquids etc.)?			
4	Does the office have minimum clearance (75 cm) for safe passage?			
5	Does the office have minimal garbage and/or waste accumulated?			
6	Are windows into the office obstructed or otherwise blocked?			
<i>Comments:</i>				
<b>Electrical</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
7	Are power bars connected directly to the wall outlet (i.e. not connected in series)?			
8	Are power bars surge protected?			
9	Are there an adequate number of electrical outlets in the room?			
10	Are electrical cords, plugs, switches and outlets in good condition?			
11	Is the use of extension cords avoided?			
12	Are cords under the desk stored such that they do not pose a tripping hazard?			
13	Are the electrical panel(s) easily accessible (1 m clearance)?			
14	Is the use of overloaded outlets avoided (i.e. 6 outlet converter)?			
15	Does all electrical equipment meet CSA standards or equivalent?			
<i>Comments:</i>				
<b>Storage</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>General</i>				
16	Is there a risk of falling objects?			
17	Are materials stacked safely, with no chance of falling, tipping?			
18	Are laboratory samples / specimens stored in the office?			
19	Are items stored within 30 cm of the ceiling?			
20	Are items stored within 1m radius of the ceiling where a fire sprinkler system is present?			
21	Are all pictures, corkboards, whiteboards and/or mirrors secured to the wall?			

<i>Filing Cabinet(s) / Bookshelves</i>				
22	Are shelves, bookcases and/or filing cabinets loaded such that heavier items are on the bottom?			
23	Are shelves, bookcases and/or filing cabinets secured to the wall, the floor or by other means?			
24	Does the filing cabinet restrict the opening of drawers to one at a time?			
25	Are there boxes stored in front of shelving units, bookcases and/or filing cabinets?			
<i>Comments:</i>				
<b>Ergonomics</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
26	Is the temperature in the room above 18°C?			
27	Is office equipment ergonomically set-up (keyboard, monitor, phone, chair, etc.)?			
28	Is there adequate lighting in the room? Are lights functioning?			
29	Is glare and reflection reduced to the extent possible?			
30	Do swivel office chairs have 5-pronged bases?			
<i>Comments:</i>				
<b>Fire Safety</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
31	Is the fire extinguisher easily accessible?			
32	Is the fire extinguisher inspection tag present and up to date?			
33	Are there ceiling tiles missing or damaged in the suspended ceiling grid?			
34	Are fire extinguishers mounted correctly?			
35	Are fire extinguishers inspected monthly?			
36	Are combustible items stored in proximity to a heat source (i.e. radiator, portable heater, etc.)?			
<i>Comments:</i>				



<b>uOttawa Policies / Guidelines / Directives</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
37	Is there evidence of alcohol in an unlicensed area?			
38	Is there evidence of a pet in the office?			
39	Is there evidence of a bicycle being stored in the office?			
40	Is there evidence of persons sleeping in the area?			
41	Do approved small appliances comply with uOttawa guidelines?			
<i>Comments:</i>				
<b>Occupant Concerns</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
42	Are there additional concerns expressed by the occupant(s), such as air quality, odours, noise, etc.?			
<i>Comments:</i>				

**For Laboratory Type Settings:**

Item	Description			
<b>Entering the Lab</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>Signage</i>				
1	Is the room number (or room identification) and responsible party clearly posted?			
2	Does signage specifically indicate chemical hazards?			
3	Does signage specifically indicate physical hazards?			
4	Does signage specifically indicate biological hazards?			
5	Does signage indicate other hazards (laser, radiation, compressed gases)?			
6	Is a "no food or drink" sign posted?			
7	Is required personal protective equipment indicated?			
8	Is the appropriate emergency phone number indicated (i.e. 5411)?			
9	Is there a map or floor plan posted on the door denoting hazard zones?			
10	Are the signs legible (i.e. not covered by paper or damaged)?			
<i>General</i>				
11	Are lab doors locked (swipe card access, key access, etc.)?			
12	Are windows into the area obstructed or otherwise blocked?			
13	Does the door open without obstruction?			
14	Are exit pathways and walkways clear?			
15	Are there tripping or slipping hazards present in the lab (stools, obstacles, lifted flooring, boxes, tubing, cables, liquids etc.)?			
16	Does the lab have minimum clearance (75 cm) for safe passage?			
17	Does the lab have minimal garbage and/or waste accumulated?			
<i>Administrative</i>				
18	Is there a list of emergency contacts available (i.e. beside each phone)?			
19	Is there an up-to-date permit and/or user authorization posted, if required?			
20	Are designated substances used within the lab?			
<i>Comments:</i>				
<b>Inside the Lab</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>Food / Drink</i>				
21	Are refrigerators, microwaves and other appliances labeled for lab use only (i.e. no food or drink)?			
22	Is there evidence of food and/or drink consumption in the lab?			
23	Is there evidence of food and/or drink stored in a lab fridge?			

<i>Chemical</i>				
24	Are all bottles, beakers, flasks and containers properly labelled in accordance with WHMIS?			
25	Are chemical products stored with compatible materials?			
26	Are chemical containers in good repair (no crystallization, no evidence of damage, not expired, etc.)?			
27	Are chemical products stored below eye level?			
28	Are flammable materials stored in flammable cabinets?			
29	Are flammable material cabinets in good condition?			
30	Are corrosive materials stored in corrosive cabinets?			
31	Are corrosive material cabinets in good condition?			
<i>Glassware</i>				
32	Is the glassware in good condition with no observable chips, cracks or stars?			
<i>Comments:</i>				
<b>Storage</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>General</i>				
33	Is there a risk of falling objects?			
34	Are materials stacked safely, with no chance of falling, tipping?			
35	Are laboratory samples and/or specimens properly stored?			
36	Are items stored within 30 cm of the ceiling?			
37	Are items stored within 1m radius of the ceiling where a fire sprinkler system is present?			
38	Are all pictures, corkboards, whiteboards and/or mirrors secured to the wall?			
39	Are hazardous materials stored on the floor?			
40	Are glass containers stored on the floor?			
<i>Filing Cabinet(s) / Bookshelves</i>				
41	Are shelves, bookcases and/or filing cabinets loaded such that heavier items are on the bottom?			
42	Are shelves, bookcases and/or filing cabinets secured to the wall, the floor or by other means?			
43	Does the filing cabinet restrict the opening of drawers to one at a time?			
44	Are there boxes stored in front of shelving units, bookcases and/or filing cabinets?			
<i>Comments:</i>				

<b>Compressed Gas Cylinders</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
45	Are the contents of compressed gas cylinders properly identified?			
46	Are gas cylinder regulators removed and replaced with protective cap when not in use?			
47	Are gas cylinders secured from falling (i.e. to a wall or lab bench)?			
48	Are gas cylinders protected from mechanical damage?			
49	Are stored cylinders properly segregated?			
<i>Comments:</i>				
<b>Laboratory Emergency Equipment</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>Eyewashes</i>				
50	Are eyewash stations provided where required?			
51	Is a record of faculty eyewash flow inspections attached and up to date (weekly or monthly)?			
52	Is the station's location indicated with a clearly visible sign?			
53	Can the eyewash station be reached within 10 seconds of the hazard?			
54	Is the area surrounding the eyewash station free of all obstructions and barriers?			
55	Is the eyewash easily activated?			
56	Are the nozzles equipped with protective covers?			
<i>Showers</i>				
57	Is the shower readily accessible?			
58	Is the shower indicated with a clearly visible sign?			
59	Does the inspection tag indicate a recent inspection?			
<i>Spill Kits</i>				
60	Is the spill kit easily accessible?			
61	Is there evidence that the spill kit has been used?			
62	Is the spill kit appropriate for the materials within the lab?			
<i>First Aid Kits</i>				
63	Does the lab have a first aid kit, if yes, is there reference to the closest designated first aid kit?			
64	Is the kit maintained and in good condition?			
65	Is the kit free from all unapproved items (Polysporin, medication etc.)?			
<i>Comments:</i>				

<b>Fume Hoods</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
66	Are the sash operating level positions indicated with labels?			
67	Is the sash at rest between the appropriate positions?			
68	Is storage in fume hoods minimized?			
69	Is there a label that indicates an inspection has been completed within the previous year?			
70	Are services (lights, gas, compressed air, water etc.) functioning properly?			
<i>Comments:</i>				
<b>Centrifuges</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
71	Is there an appropriate user log (high and ultra)?			
72	Is the user log maintained and up to date (high and ultra)?			
73	Does the machine meet CSA standards or equivalent?			
74	Does the centrifuge have an interlocking device?			
75	Is the centrifuge guarded with safety casing that prevents access to all moving parts?			
76	Does the lid open and close properly and form a tight seal?			
77	Is the rotor in good condition (not visibly scratched, chipped, worn or cracked)?			
78	Are the bottom of the tube cavities free from corrosion speckling?			
79	Are centrifuges which use radioactive materials properly marked with a radiation hazard symbol?			
<i>Comments:</i>				
<b>Machine / Equipment Guarding</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
80	Does the machine utilize safety guards which prevent workers from gaining access to moving parts?			
81	Are guards firmly secured to the machine?			
82	Do compressed air nozzles have pressure relief mechanisms?			
<i>Comments:</i>				

<b>Electrical</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
83	Are power bars connected directly to the wall outlet (i.e. not connected in series)?			
84	Are power bars surge protected?			
85	Are there an adequate number of electrical outlets in the room?			
86	Are electrical cords and plugs in good condition (not frayed and damaged)?			
87	Is the use of extension cords avoided?			
88	Are the light switches and electrical outlets in good condition?			
89	Are cords under the desk stored such that they do not pose a tripping hazard?			
90	Are the electrical panel(s) easily accessible (1 m clearance)?			
91	Is the use of overloaded outlets avoided (i.e. 6 outlet converter)?			
92	Does all electrical equipment meet CSA standards or equivalent?			
93	Are ground fault circuit interrupters (GFCIs) installed where required?			
<i>Comments:</i>				
<b>Personal Protective Equipment</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
<i>Hard Hats</i>				
94	Are all workers wearing hard hats, where required?			
95	Do hard hats meet CSA standards (or equivalent)?			
96	Are hard hats less than 5 years old?			
97	Are hard hats in a reliable condition (no cracks, stickers, etc.)?			
<i>Footwear</i>				
98	Are all workers wearing protective footwear, where required?			
99	Does protective footwear that is used meet CSA standards or equivalent?			
100	Is protective footwear maintained in a sanitary and reliable condition?			
<i>Gloves</i>				
101	Does the lab utilize appropriate gloves to protect from chemical, radiation and biological hazards where necessary?			
102	Does the lab utilize appropriate gloves to protect from cryogenic and heat hazards where necessary?			
103	Are all workers wearing appropriate protective gloves where required?			
104	Are all gloves maintained in a sanitary and reliable condition?			
<i>Protective Eyewear</i>				
105	Are individuals wearing appropriate eye protection, where required?			
106	Does the eye protection meet CSA standards or equivalent?			
107	Does the eyewear provided appropriately fit the workers?			
108	Is the eyewear maintained in a sanitary and reliable condition?			

<i>Lab Attire</i>				
109	Are all individuals in the lab wearing lab coats, where required?			
110	Do the provided lab coats have snaps?			
111	Are individuals wearing clothes that leave no exposed skin (i.e. long pants)?			
112	Are individuals wearing appropriate closed toe and heel shoes?			
113	Is the top of the foot (metatarsal) covered?			
<i>Comments:</i>				
<b>Hazardous Wastes</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
114	Is the proper waste container being used (sharps, broken glass, biohazardous, chemical waste, etc.)?			
115	Are waste containers filled no greater than 80% of their capacity?			
116	Are waste containers properly labeled?			
117	Is waste minimized and regularly collected?			
118	Are containers properly stored?			
119	Are containers secondarily contained to protect from spills?			
120	Is waste properly segregated (organics, inorganics, solids, liquids, etc.)			
121	Are container labels defaced (as necessary)?			
<i>Comments:</i>				
<b>Ergonomics</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
122	Is the temperature in the room above 18°C?			
123	Is office equipment ergonomically set-up (keyboard, monitor, phone, chair, etc.)?			
124	Is there adequate lighting in the room? Are lights functioning?			
125	Is glare and reflection reduced to the extent possible?			
126	Do office chairs have 5-pronged bases?			
<i>Comments:</i>				



<b>Fire Safety</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
127	Is the fire extinguisher easily accessible?			
128	Is the fire extinguisher inspection tag present and up to date?			
129	Are there ceiling tiles missing / damaged in the suspended ceiling grid?			
130	Are fire extinguishers mounted correctly?			
131	Are fire extinguishers inspected monthly?			
132	Are combustible items stored in proximity to a heat source (i.e. radiator, portable heater, etc.)?			
<i>Comments:</i>				
<b>uOttawa Policies / Guidelines / Directives</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
133	Is there evidence of alcohol in an unlicensed area?			
134	Is there evidence of a pet in the lab?			
135	Is there evidence of a bicycle being stored in the lab?			
136	Do approved small appliances comply with uOttawa guidelines?			
137	Is there evidence of persons sleeping in the area?			
<i>Comments:</i>				
<b>Occupant Concerns</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>
138	Are there additional concerns expressed by the occupant(s) (air quality, odours, noise, etc.)?			
<i>Comments:</i>				

## 9. Workplace Inspection Form



**Rapport d'inspection – Comité fonctionnel de la santé et de la sécurité au travail**  
**Inspection Report – Functional Occupational Health and Safety Committee**

Édifice inspecté /*Building Inspected*: \_\_\_\_\_ Agent responsable d'édifice (ARE)/*Building Management Agent (BMA)*: \_\_\_\_\_  
Comité fonctionnel /*Functional Committee*: \_\_\_\_\_ Date de l'inspection/*Date of inspection*: \_\_\_\_\_  
Date envoyée à l'ARE/*Date sent to BMA*: \_\_\_\_\_ À signer et remettre au BDPGR par le/*To sign and return to OCRO by*: \_\_\_\_\_

Pièce <i>Room</i>	Problèmes <i>Problems</i>	Mesures Correctives <i>Corrective Measures</i>	Priorité** <i>Priority**</i>	Intervention effectuée* <i>Action Taken*</i>	Date

**Rapport d'inspection – Comité fonctionnel de la santé et de la sécurité au travail**  
**Inspection Report – Functional Occupational Health and Safety Committee**

Pièce <i>Room</i>	Problèmes <i>Problems</i>	Mesures Correctives <i>Corrective Measures</i>	Priorité** <i>Priority**</i>	Intervention effectuée* <i>Action Taken*</i>	Date

Ce rapport est disponible dans les deux langues officielles. / *This report is available in both official languages.*

**\*Instructions aux superviseurs et aux agents responsables d'édifice**

Veuillez compléter la section 'Intervention effectuée' et faire parvenir le rapport signé à l'inspecteur ([blitz@uottawa.ca](mailto:blitz@uottawa.ca)), aux c. présidents du Comité sectoriel de santé et de sécurité au travail (et à l'agent responsable d'édifice si vous êtes le superviseur), dans un délai de 21 j. urs suivants sa réception. Dans votre répons :

1. Indiquez les mesures correctives que vous avez entrepris pour les recommandations que vous acceptées,
2. Fixez un délai de mise e œuvre des recommandations qui prendrons plus de 21 jours, ou
3. J stifiez votre refus pour les recommandations que vous n'acceptez pas.

**\*Instruction to Supervisors and Building Management Agents**

Complete th section 'Action taken' and return the signed eport to the inspector ([blitz@uottawa.ca](mailto:blitz@uottawa.ca)), the Co-chairs of the Sectoral Health and Safety Committee (and the Building Management Agent if you are the supervisor) within 21 days of the date you received this report. The response shall:

1. Indicate the corrective measures implemented for the recommendations that you accepted,
2. Include a timetable for implementing the reco mendation that will take more than 21 days, and
3. J stify your reasons for the recommendations rejected or in disagreement with.

**Signatur du superviseur / Supervisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signatur de l'agent responsable d'édific / Building Management Agent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*\* Priorité pour apporter des mesures correctives / Priority to implement corrective measures**

**0** - Urgent - immédiatement / *Urgent - immediately*

**1** - Urgent - même journée / *Urgent - same day*

**2** - Dans les 7 jours / *Next 7 days*

**3** - Dans les 21 jours / *Next 21 days*

**4** – Autres - précisez / *Other - specify*

Suggestions supplémentaires / *Additionnel suggestions* : **None.**

**Inspecté par / Inspected by:** \_\_\_\_\_

**Rôle/Role:**

\_\_\_\_\_  
 Membre travailleur du comité/  
 Worker committee member

\_\_\_\_\_  
 Deuxième inspecteur/  
 Second Inspector

**Date et signature /Signature and Date :** \_\_\_\_\_