



Area Assessed:

Date:

Assessors:

OFFICE SAFETY INSPECTION CHECKLIST

With thanks to University of Wollongong who provided the template for this document

The information provided by OH&S inspections assist with the identification and assessment of hazards in the workplace, and the development of suitable programs and corrective actions. This checklist serves as a guide for evaluation of the office environment. It is not intended to be comprehensive and not all elements need be assessed at one time. Any other potential hazards that are identified in specific areas may be added to this checklist as required.

When working through the checklist you should provide a recommendation for corrective action where appropriate and indicate that the relevant steps have been taken to ensure that this is carried out.

Item	Response	Non-conformance <i>Provide details</i>	Recommended Corrective Action	Individual responsible for ensuring corrective action is underway	Date Completed
HOUSEKEEPING					
1. Are cabinet tops free of hazardous items?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Is floor space clear of objects/debris?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. Is the work area clear of electrical leads/network cables?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Are filing cabinets/desk drawers closed when not in use?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
5. Are waste paper bins free of hazardous material? (e.g. broken glass)	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Item	Response	Non-conformance <i>Provide details</i>	Recommended Corrective Action	Individual responsible for ensuring corrective action is underway	Date Completed
6. Are floor coverings in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
EQUIPMENT					
1. Have all electrical appliances and leads been checked recently?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Are electrical appliances in a safe working area? (e.g. heaters/fans)	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. Are computers safely & appropriately situated on desks?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Is the computer/desk area clear of cups/glasses/food items?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
ENVIRONMENT					
1. Is there sufficient ventilation?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Are the lights working effectively?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. If air-conditioned, is it working effectively?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Are there any sources of excessive noise in the immediate work area or from an external source?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Item	Response	Non-conformance <i>Provide details</i>	Recommended Corrective Action	Individual responsible for ensuring corrective action is under way	Date Completed
EMERGENCY RESPONSE					
1. Are all access and egress points readily accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Is emergency exit signage adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. Are appropriate fire extinguishers visible?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
4. Is the Emergency Evacuation route clearly displayed?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
5. Have designated building wardens been identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
6. Are first aid kits readily accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
7. Are the designated First Aid personnel identified and accessible?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
ERGONOMICS					
1. Are the desk and chair suitable for the required task?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
2. Is the chair easily adjusted from a seated position?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
3. Can the user get close to the workstation without impediment?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Other comments:

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CC: Head of School/Departmental Manager
Chair, Workplace OHS Committee