



WORKPLACE HEALTH AND SAFETY AUDIT PROCEDURE

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Author:	Senior Corporate Health and Safety Advisor & Head of Safety, Health, Environment and Quality (SHEQ)		
Directorate:	Workplace		
Authorised by Workplace Director Development			
Approval Route: Health and Safety Committee			
Approved By:		Date Approved:	
Health and Safety Committee		12 th June 2024	
Links or overlaps with other procedures/policies:			
Health and Safety Policy			
Health and Safety Risk Assessment Procedure			
Management of Fire Safety and Evacuation Policy			
Health and Safety Action Plan			
Health and Safety Representatives			
Workplace Management			
Other Trust Health and Safety related policies and Procedures			

Amendment History

Issue	Status	Date	Reason for Change	Authorised
5.0		April 2024	Full review	Health and Safety Committee

Please note:

If you require a copy of this procedure in an alternative format (for example Large Print, Easy Read) or would like any assistance in relation to the content of this procedure, please contact the Human Resources (HR) team on 01803 656680.

CONTENTS

Introduction	4
Procedure	4
Assistance	4
Workplace Audit Checklist Form	5

1. Introduction

The Workplace Health and Safety Audit Checklist has been developed to assist managers to ensure they are meeting minimum health and safety requirements in their work area, and assist the department in producing an action plan. The action plan will form a programme of work for the department. This action plan will also enable the Corporate Safety Team to assess where there are hazards within the Trust and assist to eliminate or reduce the risk of these hazards.

2. Procedure

To complete the Workplace Health and Safety Audit for your work area or department follow the instructions below:

- Work your way through the Workplace Audit Checklist identifying your responses as Yes/ No/ NA (Not Applicable)
- Where you answer “No” to a question, please consider what action you need to take to make this issue safe and compliant and note it in the comments box. This information will be needed to transfer onto your action plan.
- If there are any serious Health and Safety issues identified at any point during your audit, or you are unsure of a concern, you must contact the Corporate Safety Team for advice
- Complete an action plan (using Trust template form TSF-S022) with any actions that must be taken to ensure compliance
- Ensure that the action plan is prioritised and contains the following:
 - Details of compliance issue
 - Action required
 - Lead name
 - Target date for completion
- Ensure a copy of the audit and action plan are placed into your Safety Folder
- This Workplace Audit must be repeated at least annually

3. Assistance

If you require any assistance, please seek advice from any of the following teams;

- Corporate Safety (includes Fire)
- Manual Handling
- Clinical Safety (Security Management)
- Waste Management
- Occupational Health
- UNION e.g. Unison

Workplace Health and Safety Audit Checklist

Audit Completed by		Job Title	
Location of Audit		Date of Audit	

A	H&S Management	YES	NO	N/A
1	Is there a nominated Health and Safety lead in the department?			
2	Is this person suitably trained and qualified?			
3	Is this person allocated time to carry out their duties?			
4	Is there a relevant local induction process for new staff?			
5	Is there evidence that H&S is discussed at regular department meetings?			

Comments:

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B	Fire	YES	NO	N/A
1	Has a fire risk assessment been carried out?			
2	Is there a suitable system for raising the alarm and evacuating the premises?			
3	Is it tested and maintained?			
4	Is there an emergency lighting system?			
5	Is the emergency lighting system inspected and maintained?			
6	Is there an Actions in case of Fire notice on display?			
7	Are fire doors labeled and signage followed?			
8	Are fire doors free from obstructions?			
9	Are fire drills carried out and records kept?			
10	Are the fire extinguisher inspections in date?			
11	Are the staff trained in fire procedures?			
12	Are records kept?			
13	Is there a nominated, trained fire warden/ evacuation lead in the department?			

Comments:

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C	Management systems	YES	NO	N/A
1	Have all activities that are carried out within the department been suitably risk assessed?			
2	Have these risk assessments been reviewed regularly (at least annually)?			
3	Has the department got written safe working practices/procedures in place?			
4	Have staff been trained in these safe working practices/procedures?			
5	Are H&S records for the department held on a shared file so all staff can view?			
6	Are all incidents investigated?			
7	Are staff aware of how to report any incidents?			

8	Are staff given feedback on incidents they report?			
9	Is there evidence of this feedback being given?			
10	Do you have procedures in place for known high risk situations?			
11	Have staff been informed and trained on the procedures?			
Comments:				

D	Stairways and Passages	YES	NO	N/A
1	Are stairways fitted with secure banisters or rails?			
2	Are stairways and passages adequately lit?			
3	Are steps in good condition?			
4	Are low ceilings adequately marked or identified?			
5	Are floor surfaces free from slip, trip and fall hazards?			
6	Is there adequate suitable matting at entrances to prevent slip hazards?			
7	Are access and egress points free from obstruction, damage and free from trip hazards			
Comments:				

E	Heating and Ventilation	YES	NO	N/A
1	Is heating and ventilation in all areas adequate for the activities undertaken?			
2	Are large areas of glass provided with adequate shading where required?			
3	Where extraction/ local exhaust ventilation (LEV) is fitted - is it working?			
4	Is servicing and maintenance carried out and recorded?			
5	Are radiators and associated pipework adequately guarded to prevent injury?			
Comments:				

F	Doors and Windows	YES	NO	N/A
1	Are doors free of obstructions?			
2	Are glazed doors clearly marked and adequately protected?			
3	Are doors in good working condition?			
4	Are doors on traffic routes fitted with vision panels?			
5	Are vision panels in doors clear and free from obstruction?			
6	Do doors that are liable to blow open have suitable restraints?			
7	Are windows in a safe and good working condition?			
8	Do windows normally used as a means of ventilation open easily without undue force?			
9	Are windows openings in patient accessible areas restricted to 100mm to prevent falls?			
10	Where necessary is a window pole available?			
11	Where necessary are windows and doors fitted with safety glass or film?			

12	Where a finger trap risk has been identified (e.g. areas where children play), are finger guards fitted to the doors?			
Comments:				

G	Lighting	YES	NO	N/A
1	Is lighting in all areas suitable for the activities undertaken?			
2	Are all light fittings working?			
3	Are all switches secure and free from cracks etc?			
Comments:				

H	Use of Medical Gases	YES	NO	N/A
1	Is there evidence that staff are trained in the use of the medical gases and devices used in the department?			
2	Are the locations of gas isolator valves and mains stop cocks known by, and accessible to the appropriate staff?			
3	Are they clearly identified?			
4	Is there a written procedure for regular safety checks on medical gas equipment (incl alarms)?			
5	Are all checks and maintenance work recorded?			
6	Are all cylinders restrained / stacked appropriately?			
7	Are full & empty cylinders separated and clearly identified?			
8	Is the monitoring of staff exposure to nitrous oxide gas carried out?			
Comments:				

I	Electrical Equipment	YES	NO	N/A
1	Is electrical equipment maintained in a safe condition?			
2	Has all portable electronic devices been PAT tested?			
3	Is this testing in date?			
4	Is the introduction of any electrical equipment adequately controlled?			
5	Is new, leased or hired equipment tested before use?			
6	Are plugs and sockets in good condition with no cracks or pieces missing?			
7	Is the insulation on leads in good condition?			
8	Are the leads the correct length for the equipment being used?			
9	Are trailing leads secured safely?			
10	Has the use of extension leads, multi-sockets been limited as much as is reasonably practicable and no in-line connections present?			
11	Have domestic appliances been restricted to use in designated hazard rooms, i.e kitchens?			
Comments:				

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J	Equipment	YES	NO	N/A
1	Have statutory inspections been completed where required (LOLER, PUWER, LEV, Pressure Vessels, etc) and are these in date?			
2	Is work equipment used for the operation for which it was designed?			
3	Is fixed and portable working equipment operating correctly?			
3	Are the appropriate instructions/operator manuals available?			
5	Are all persons using the equipment trained and authorised?			
6	Is this training recorded?			
7	Is work equipment provided with readily accessible controls to stop the equipment?			
8	Where fitted do the on/off/fault indicator lights function correctly?			
9	Are measures in place to prevent access to dangerous parts of machinery?			
10	Is work equipment provided with suitable means to isolate it from its source of energy?			
11	Is the work equipment sited correctly to ensure safe use?			
12	Is the work equipment clearly marked and labelled to identify hazards and safety signs?			
13	Is equipment visually inspected before use?			
14	Are inspections clearly recorded?			
15	Is there an effective system for dealing with defective equipment?			

Comments:

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K	First Aid	YES	NO	N/A
1	Do you have a sufficient number of trained first aiders?			
2	Are notices posted in prominent places indicating: the names of first aiders and locations of equipment?			
3	Are there suitably equipped first-aid boxes available and easily accessible?			
4	Where required are eye wash bottles full and in date?			

Comments:

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L	Public areas	YES	NO	N/A
1	Is furniture sound and free from apparent defects?			
2	Are all furnishings compliant with Fire retardancy crib rating 5-7?			
3	Is there enough seating and is it fit for purpose?			
4	Are floors clean, free from trip hazards, and inherently non-slip?			
5	Is there a regular routine of inspection of these areas?			
6	Are decorated surfaces in good repair?			
7	Is the access suitable for all users, including those with disabilities?			
8	Are suitable facilities provided for the disabled?			

Comments:

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M	Kitchen	YES	NO	N/A
1	Is the kitchen and, if present, dining area kept clean?			
2	Are kitchen floors sound and have anti-slip properties?			
3	Are work surfaces, tables, walls of a non-porous, hygienic structure?			
4	Is dangerous equipment adequately guarded?			
5	Are pre-use checks on equipment carried out before use?			
6	Where required have staff received suitable training in food hygiene?			
7	Is the operation of the kitchen door unhindered in its intended operation? i.e. not wedged open			

Comments:

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N	Staff Facilities	YES	NO	N/A
1	Is there secure storage for staff personal belongings?			
2	Where lockers are provided are they in a suitable, designated hazard room?			
3	Have staff access to refreshment facilities?			
4	Are Staff facilities suitable for the numbers who normally use it?			
5	Are the facility areas clean and tidy?			
6	Is sufficient suitable seating available?			
7	Are sanitary facilities maintained in a safe and clean condition?			
8	Are toilet facilities suitable and sufficient?			
9	Are suitable and sufficient washing facilities provided?			
10	Is there an adequate supply of wholesome drinking water?			

Comments:

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O	Waste	YES	NO	N/A
1	Are all waste streams effectively segregated?			
2	Are staff aware of the different types of waste and their appropriate disposal?			
3	Has a waste management audit been completed?			
4	Are all 770l yellow clinical bins kept locked?			
5	Is clinical waste clearly identified and labeled correctly?			
6	Is clinical waste stored safely prior to collection?			
7	Are emergency procedures available in case of spillage?			
8	Are suitable sharps bins available where needed?			
9	Are sharps bins replaced and secured where/when appropriate?			
10	Are all sharps bins out of reach of young children?			
11	Have all staff been trained regarding the clinical waste system?			
12	Is there suitable control of combustible waste i.e prevention of accumulation and inappropriate storage?			

Comments:

P	Display Screen Equipment	YES	NO	N/A
1	Have all users been identified ?			
2	Have all DSE users completed their DSE self-assessment forms?			
3	Are these DSE self-assessment forms regularly reviewed in line with Trust DSE procedure?			
4	Have all necessary workstation requirements for users been met?			
5	Have you ensured you are compliant with identified occupancy factors?			

Comments:

Q	Manual Handling Operations	YES	NO	N/A
1	Have manual handling assessments been completed and recorded?			
2	Are all identified control measures in place and used?			
3	Have all employees been informed, instructed, and trained in appropriate manual handling for all activities?			
4	Are heavy objects placed at waist level?			
5	Where lifting equipment (such as hoists) is used, are staff trained in its use?			
6	Is this training recorded?			
7	Is lifting equipment visually inspected before use?			
8	Are storage racks/shelves secured and of sound construction?			
9	Are materials stored safely (e.g. no heavy items above waist height)?			
10	Do you have appropriate equipment to reach stored items, where needed?			

Comments:

R	Control of Substances Hazardous to Health (COSHH)	YES	NO	N/A
1	Has a Substance Inventory been completed and recorded on the Trust COSHH register form?			
2	Is this register up to date?			
3	Have COSHH assessments been carried out and recorded on the appropriate forms?			
4	Are these assessments updated at least annually or following any change, in line with Trust procedures?			
5	Have hazardous substances been eliminated or substituted where possible?			
6	Have all employees been informed, instructed, and trained in the use of COSHH items in the location?			
7	Is this training recorded?			
8	Are all substance containers correctly stored and labelled?			
9	Are all water fittings such as showers and wash basins used at least once a week?			
10	If water fittings are not used, has it been agreed in writing with estates for			

	these to remain connected?			
11	Are water outlets flushed weekly and records kept?			
12	Are cleaning fluids and other hazardous substances locked away in appropriate COSHH cupboards and placed beyond reach of patients?			
13	Does the department use products containing latex?			
14	Have the latex products and their use been assessed and authorised?			

Comments:

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S	Personal Protective Equipment	YES	NO	N/A
1	Has personal protective equipment been provided where appropriate?			
2	Is personal protective equipment compatible and effective against the risks?			
3	Is personal protective equipment maintained?			
4	Is there appropriate storage for personal protective equipment when not being used?			
5	Have employees received appropriate information, instruction and training regarding equipment?			
6	Are there adequate replacement procedures for equipment?			

Comments:

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T	Management of Sharps	YES	NO	N/A
1	Are any non-safer sharps used in the department?			
2	Has the use of all the non-safer sharps been risk assessed?			
3	Has Trust authorisation (as per Sharps Management Procedure) been granted for the use of all the non-safer sharps being used?			

Comments:

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U	External/Outside Areas	YES	NO	N/A
1	Is the exterior of the structure free from obvious damage?			
2	Is there adequate lighting (e.g. at night)?			
3	Are vehicles and pedestrians separated?			
4	Are pedestrian walkways defined and clear?			
5	Is the outside area free from potholes, loose/raised paving slabs?			
6	Is all signage clear and unambiguous?			
7	Are Fire escape routes clear (e.g. overgrowth) and unobstructed?			
8	Are the outside areas/exterior free from possible arson risks?			

Comments:

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V	Working at Height	YES	NO	N/A
1	Is any equipment provided (e.g. ladders, elephant stools, mobile steps) in good working order and free from defects?			
2	Is this equipment inspected and a record kept?			
3	Have staff been trained in the use of this equipment?			
4	Is this training recorded?			
5	Are access ladders locked away, secured or shuttered to prevent unauthorised use?			
Comments:				

W	Personal Safety & Security	YES	NO	N/A
1	Has a Security Assessment been carried out?			
2	Can all external doors and windows be secured?			
3	Are fire doors/exits alarmed where required?			
4	Where required, is access restricted e.g. security keypads, swipe cards?			
5	Where necessary has CCTV been fitted locally?			
6	Is there a means for adequately securing cash and valuables left on the premises?			
7	Are panic/emergency alarms tested weekly and are those tests recorded?			
8	Do staff have access to telephones/ personal alarms/ mobile phones?			
9	Have staff received Conflict Resolution & Breakaway training?			
10	Is the necessary information available to visitors e.g. waiting instructions? Directions?			
11	Where relevant, does the waiting system reduce any frustrations?			
12	Do staff check for Violent Patient Markers prior to appointments or treatment?			
13	Are staff aware when and how to summon urgent assistance if required?			
14	Do staff challenge those attempting to enter staff only areas without a Trust ID badge?			
15	Are staff rest areas screened from the public?			
16	Where required have lone worker risk assessments been carried out and recorded?			
17	Are staff informed and trained in the relevant emergency procedures (e.g. lockdown, bomb threat, etc) for their areas and/or roles?			
Comments:				

Now take your observations and results and where any answers have been No, or where you have any concerns, transfer these into your action plan

Rapid Equality Impact Assessment *(for use when writing policies and procedures)*

Policy Title (and number)		<i>Workplace Health and Safety Audit Procedure</i>	Version and Date	5.0 April 2024	
Policy Author		Senior Corporate Health and Safety Advisor and Head of Safety, Health, Environment and Quality (SHEQ)			
An equality impact assessment (EIA) is a process designed to ensure that a policy, project or scheme does not discriminate or disadvantage people. EIAs also improve and promote equality. Consider the nature and extent of the impact, not the number of people affected.					
EQUALITY ANALYSIS: How well do people from protected groups fare in relation to the general population? <i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>					
Is it likely that the policy/procedure could treat people from protected groups less favorably than the general population? (see below)					
Age	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Disability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Orientation	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Gender	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Religion/Belief (non)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Gender Reassignment	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Pregnancy/ Maternity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Marriage/ Civil Partnership	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is it likely that the policy/procedure could affect particular 'Inclusion Health' groups less favorably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees)					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.					
VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion					
Is inclusive language ⁵ used throughout?					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are the services outlined in the policy/procedure fully accessible ⁶ ?					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the policy/procedure encourage individualised and person-centered care?					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Could there be an adverse impact on an individual's independence or autonomy ⁷ ?					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If 'Yes', how will you mitigate this risk to ensure fair and equal access?					
EXTERNAL FACTORS					
Is the policy/procedure a result of national legislation which cannot be modified in any way?					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?)					
Regular full review as required by legislation and Trust policy					
Who was consulted when drafting this policy/procedure? What were the recommendations/suggestions?					
Members of the Health and Safety Committee; Staffside; Deputy Director of Estates and Facilities Management; Executive Directors; System Directors					
ACTION PLAN: Please list all actions identified to address any impacts					
Action	Person responsible		Completion date		
AUTHORISATION: By signing below, I confirm that the named person responsible above is aware of the actions assigned to them					
Name of person completing the form	Senior Corporate Health and Safety Advisor	Signature	SE		
Validated by (line manager)	Head of Safety, Health, Environment and Quality (SHEQ)	Signature	KW		

Any issues Please contact Diversity & Inclusion Lead

¹ Consider any additional needs of carers/ parents/ advocates etc, in addition to the service user
² Travelers may not be registered with a GP - consider how they may access/ be aware of services available to them
³ Consider any provisions for those with no fixed abode, particularly relating to impact on discharge
⁴ Consider how someone will be aware of (or access) a service if socially or geographically isolated
⁵ Language must be relevant and appropriate, for example referring to partners, not husbands or wives
⁶ Consider both physical access to services and how information/ communication is available in an accessible format
⁷ Example: a telephone-based service may discriminate against people who are d/Deaf. Whilst someone may be able to act on their behalf, this does not promote independence or autonomy