

HOUSEKEEPING INSPECTION FORM

BUILDING/AREA _____

HOUSEKEEPER _____ DATE: _____

Inspect the entire bldg or designated area using the criteria below.

Conduct your inspection when the bldg is most accessible, coordinate with Security to have areas unlocked, if required.

Any rating of one requires an explanation in the remarks area.

Rate each area on a scale of 1 to 5; 1 being the lowest and 5 being the highest.

1	2	3	4	5
Poor	Fair	Average	Good	Excellent

Please return your inspection form to Ed Farris, Facility Operations.

1. All Restrooms:

- a. commodes & urinals _____
- b. sinks & mirrors _____
- c. floors _____
- d. paper towel dispensers _____
- e. toilet paper dispensers _____
- f. soap dispensers _____
- g. trash receptacles _____
- h. dust/lint _____

2. All classrooms/offices/conference rooms and hallways

- a. clean glass, windows, cabinets _____
- b. floors; vacuumed/mopped _____
- c. dust; woodwork, desk, chairs, tables _____

d. windows cleaned, dusted _____

e. doors & frames _____

f. chalkboard trays cleaned/dusted _____

g. trash/recycle receptacles cleaned _____

h. walls/ceilings (marks,stains,spider webs) _____

3. Elevator/stairwells/colonnades/entrances

a. steps/floors: swept, mopped, vacuumed _____

b. dust, dirt, link cleaned _____

c. doors, walls, panels cleaned _____

d. colonnades, entrances cleaned _____

e. trash receptacles cleaned _____

Total Score _____

Remarks:

Signature _____ **Date** _____

WAYNE COMMUNITY COLLEGE SAFETY INSPECTION REPORTS



AGENCY	LOCATION	
SIGNATURE OF INSPECTOR	DATE OF INSPECTION	DEPARTMENT

	SAT	UNSAT	N/A		SAT	UNSAT	N/A
<p>1. Fire Prevention</p> <p>A. Fire extinguisher - proper type, current inspection, accessible, hose condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>B. Exits - marked, working, not blocked <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Fire escapes - clear, safe, adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Exit lights - working, visible <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Sprinkler heads not blocked <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>F. Solvents and flammable storage - disposal and storage <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>G. Excess paper and trash removed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>H. Fire evacuation charts posted <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>I. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>2. Floors and Aisles</p> <p>A. Surfaces - uneven, splinters, holes, cracks, slippery <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>B. Carpets - secure <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Aisles - clear <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Tripping hazards removed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>3. Stairs/Ramps</p> <p>A. Lighting - adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>B. Stair tread condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Stair wells - not cluttered with materials <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Handrails available, serviceable <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Ramps - have nonslip surfaces, guard rails <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>F. Emergency lighting <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>G. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>4. General Conditions</p> <p>A. File cabinets - secure, drawers closed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>B. Shelves - secure, not overloaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Fans - guarded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Warning signs - posted, legible <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Ventilation - adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>F. First aid kit - Serviceable, accessible <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>G. Eyewash station - inspected, serviceable <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>H. Elevators - serviceable, intercom operable, hoistway doors clear <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>I. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>				<p>5. Electrical</p> <p>A. Machines and equipment grounded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>B. Extension cords - 3-wire type <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Condition of plugs and wall outlets <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Electrical switch panels clear (36") <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Circuits not overloaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>F. No wires under carpets/rugs <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>G. Power Strip/Surge Protectors - have built-in breaker; not plugged into another power strip/surge protector, only 1 power strip/surge protector plugged into a dual electrical outlet <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>H. Space Heaters - only electrical powered, 150 volt maximum, tip over protection, UL approved, automatic temperature shut off thermostat, must be fan driven, no hand coils <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>I. Ground fault interrupters <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>J. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>6. Additional Items</p> <p>A. MSDS on file and accessible <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>b. Safety equipment and clothing available and used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>C. Employee safety awareness <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>D. Recycling containers used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>E. Lock out tags used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>F. Mechanical rooms clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>G. Personal protective equipment used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>H. Safety rules/procedures enforced/used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>			
				NOTES			

Additional Information/Recommendations: _____

Memorandum

To: Safety Committee Members for 2003 - 2004

From: Ken Ritt, Safety Committee

Date: April 7, 2004

Subject: Designated Areas of Inspection

Committee members are responsible for inspecting their designated areas each quarter (Jul - Sep, Oct - Dec, Jan - Mar, and Apr - Jun) and providing the white copy of the inspection form to the WCC Safety Director no later than the 5th day of the following month. Provided are blank Monthly Safety Inspection Report forms. Additional copies of the Monthly Safety Inspection can be obtained from my office.

<u>Committee Members:</u>	<u>Area Assigned to Inspect:</u>
1. Ronnie Woodard 2. Darrell Haley	Magnolia 1 st /2 nd Floors
3. Lou Brown 4. Carolyn Jackson	Pine 1 st / 2 nd Floors
5. Gene Smith 6. Dorothy Hogan	Holly 1 st / 2 nd Floors, including Labs
7. Ron Prince 8. Jim Slye	Azalea 1 st / 2 nd / 3 rd Floors
9. Ken Ritt 10. Darrell Haley	Dogwood 1 st / 2 nd / 3 rd Floors
11. Tom Garrou 12. Ed Farris	WLC 2 nd / 3 rd Floors, including print shop & media
13. Joy Ginn 14. Lynn Rabhan	WLC 1 st Floor, including lecture hall & cafeteria
15. Ken Ritt 16. Wayne Street	Hocutt 1 st / 2 nd Floors, Hocutt Out Bldgs & Paint Booth
17. Tom Potter	Aviation Building & Hangar
18. Ed Farris	All Mechanical Rooms & Energy Building
19. Wayne Street	Entire Campus Outside Areas
20. James Bynum	Campus wide First Aid Stations
21. Dorothy Hogan	Oak (Childcare Center)
22. Wayne Street Ed Farris Ken Ritt	South Campus



Public Schools of North Carolina

NC Department of Public Instruction
School Insurance, Division of School Support
6320 Mail Service Center
Raleigh, NC 27699-6320

Phone: (919) 807-3521
Fax: (919) 807-3524

April 15, 2004

Mr. Ken Ritt
V.P. Educational Support Services
Wayne Community College
PO Box 8002
Goldsboro, N.C. 27533-8002

Dear Mr. Ritt:

Attached you will find the recommendations for Wayne Community College. These recommendations are the result of my recent annual loss risk survey. I ask that you please forward a copy of these recommendations to Mr. Ed Farris, Plant superintendent. In addition I also ask that you please reply with your proposed compliance plan to these recommendations within the next Sixty days.

Please convey my appreciation to Mr. Farris, Ms. Alice Wadsworth, and to your schools' administrations and staffs for their time, support and cooperation.

As I relayed to Mr. Farris & Ms. Wadsworth, I feel Wayne Community College is well maintained and in overall good condition.

Again, thank you for your continuous efforts to maintain the safety and security of our community colleges. Should you have any questions, please contact our office.

Sincerely,
Larry A. Cockrell
Loss Risk Specialist
Insurance Section

E-Mail Attachment:

Delivery Address: 7054 NC Education Building, 301 N. Wilmington Street, Raleigh, North Carolina 27601-2825

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MONTHLY HOUSEKEEPING INSPECTION

BUILDING/AREA Acc (Summary)

HOUSEKEEPER Acc DATE: FALL '04

Inspect the entire bldg or designated area using the criteria below.

Conduct your inspection when the bldg is most accessible, coordinate with security to have areas unlocked, if required.

Any rating of one requires an explanation in the remarks area.

Rate each area on a scale of 1 to 5; 1 being the lowest and 5 being the highest.

1	2	3	4	5
Poor	Fair	Average	Good	Excellent

Please return your inspection form to Ed Farris, Facility Operations, by the 5th of the month.

All Restrooms:

commodes & urinals	<u>3.1</u>
sinks & mirrors	<u>3.5</u>
floors	<u>3.1</u>
paper towel dispensers	<u>3.4</u>
toilet paper dispensers	<u>3.2</u>
soap dispensers	<u>3.0</u>
trash receptacles	<u>2.9</u>
dust/lint	<u>2.4</u>

All classrooms/offices/conference rooms & hallways:

clean glass, windows, cabinets	<u>3.0</u>
clean ledges, shelves, window sills	<u>2.7</u>
floors; vacuumed/mopped	<u>2.9</u>
dust; woodwork, desk, chairs, tables	<u>2.1</u>

Ken

Here are the averages of all the bldgs. I can tell you that basically 2 bldgs pulled the numbers down. One bldg was a surprise the other was not. The airport was not inspected. This is first time I've done this, so I guess this will be my baseline. As always any inspector is subjective, however it doesn't indicate areas for improvement. My concern is the upcoming surveys that will be filled out. Any thoughts might want to share this with Dr. Wilson (Over)

Ed

windows cleaned, dusted	<u>3.6</u>
doors & frames	<u>3.0</u>
chalkboard trays cleaned/dusted	<u>2.6</u>
trash/ recycle receptacles cleaned	<u>3.3</u>
walls/ceilings (marks, stains, spider webs)	<u>2.8</u>
computers dusted	<u>2.2</u>

Elevator/stairwells/colonnades/entrances

steps/floors, swept, mopped, vacuumed	<u>3.1</u>
dust, dirt, lint cleaned	<u>3.0</u>
doors, walls, panels cleaned	<u>3.5</u>
colonnades, entrances cleaned	<u>3.0</u>
trash receptacles cleaned	<u>3.1</u>

Housekeeping staff

work habits/accessibility	_____
proper equipment/product usage	_____
work productibility and flexibility	_____
initiative	_____
professional attitude	_____

Total Score _____

Remarks:

Signature:

Ed Farris

Date:

22 OCT 04