

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