



# SAFE Hospitality

## Formal/Planned Safety Inspections

Standards should be set to have a Formal/Planned inspection either on a monthly basis to ensure safety standards are being met, to identify unsafe conditions and practices and to recommend corrective actions.

Date:			Location/Department:		
<b>YES = Satisfactory</b>			<b>NO = Unsatisfactory, needs attention</b>		
Yes	No	<b>Safe Work Practices</b>	Yes	No	<b>Fire Protection</b>
<input type="checkbox"/>	<input type="checkbox"/>	Use of machine guards	<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers
<input type="checkbox"/>	<input type="checkbox"/>	Proper manual lifting	<input type="checkbox"/>	<input type="checkbox"/>	Proper type/location
<input type="checkbox"/>	<input type="checkbox"/>	Smoking, only in safe, designated areas	<input type="checkbox"/>	<input type="checkbox"/>	Fire equipment maintained
	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	Emergency exits/lighting
			<input type="checkbox"/>	<input type="checkbox"/>	Sprinkler systems
<b>Use of Personal Protective Equipment</b>			<b>Kitchen Equipment</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Eye/face protection	<input type="checkbox"/>	<input type="checkbox"/>	Microwave ovens
<input type="checkbox"/>	<input type="checkbox"/>	Footwear	<input type="checkbox"/>	<input type="checkbox"/>	Deep fryers
<input type="checkbox"/>	<input type="checkbox"/>	Gloves	<input type="checkbox"/>	<input type="checkbox"/>	Cutters, Grinders, choppers
<input type="checkbox"/>	<input type="checkbox"/>	Protective Clothing	<input type="checkbox"/>	<input type="checkbox"/>	Grease receptacles
<input type="checkbox"/>	<input type="checkbox"/>	Aprons	<input type="checkbox"/>	<input type="checkbox"/>	Storage of knives
<input type="checkbox"/>	<input type="checkbox"/>	Respirators	<input type="checkbox"/>	<input type="checkbox"/>	Oiling, cleaning, adjusting
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	Other
<b>Housekeeping</b>			<b>First Aid</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Proper storage of flammable material (oily/greasy rags, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	First aid kits in rooms
<input type="checkbox"/>	<input type="checkbox"/>	Proper disposal of waste	<input type="checkbox"/>	<input type="checkbox"/>	Trained first aid providers
<input type="checkbox"/>	<input type="checkbox"/>	Floors (clean, dry, uncluttered)	<input type="checkbox"/>	<input type="checkbox"/>	Emergency numbers posted
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	All injuries reported
<b>Electrical Safety</b>			<b>Administration</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Machine grounding/G.F.I	<input type="checkbox"/>	<input type="checkbox"/>	OHS Act and Policy posted
<input type="checkbox"/>	<input type="checkbox"/>	Electrical cords	<input type="checkbox"/>	<input type="checkbox"/>	List of JHSC members of minutes of meeting posted
<input type="checkbox"/>	<input type="checkbox"/>	Electrical outlets	<b>Miscellaneous</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	MSDS/Labels
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	Dust/vapor/fume control
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	Safe use of ladders/scaffolds
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	New processes or procedures implemented
<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>	Other