

Health and safety checklist

Use this checklist to help you identify hazards
at your workplace.

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| **Manual tasks** | **Yes** | **No** | **N/A** |
| Have you identified all tasks involving lifting, pushing, pulling and/or carrying, and assessed the risk of injury at your workplace? |[ ] [ ] [ ]
| Have your risk assessments taken into account posture, movement, forces, duration, frequency and environmental factors? (Refer to sections 2 and 3 of the *Code of Practice – Hazardous Manual Tasks* for more information) |[ ] [ ] [ ]
| Are objects handled easy to grasp, have no sharp edges and are not hot, cold, slippery or bulky? |[ ] [ ] [ ]
| Is lifting from ground level or above shoulder level avoided? |[ ] [ ] [ ]
| Is the work area, equipment and system of work designed to eliminate sideways twisting of the body, excessive bending or reaching? |[ ] [ ] [ ]
| Is the work area, equipment and system of work designed to minimise sustained repetitive movements? |[ ] [ ] [ ]
| Are mechanical handling aids provided where possible? |[ ] [ ] [ ]
| Is there enough space to allow free movement while doing the task? |[ ] [ ] [ ]
| Is training provided about risk factors and the proper technique to do the task? |[ ] [ ] [ ]
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| **Equipment, machinery and tools** | **Yes** | **No** | **N/A** |
| Is the correct equipment always used for each job? |[ ] [ ] [ ]
| Are all tools and machinery properly guarded?  |[ ] [ ] [ ]
| Are stop/start switches clearly marked and positioned within easy reach of the operator? |[ ] [ ] [ ]
| Are operators trained to use the tools, equipment and machinery safely? |[ ] [ ] [ ]
| Do operators hold current licences to perform work that requires certification? |[ ] [ ] [ ]
| Has provision been made to safely store or dispose of waste off-cuts? |[ ] [ ] [ ]
| Is there enough work space around machinery? |[ ] [ ] [ ]
| Are tools, equipment and machinery regularly maintained? (in accordance with manufacturer’s instructions) |[ ] [ ] [ ]
| Is there a process to ensure that tools and machinery are switched off before maintenance and cleaning is carried out and cannot be inadvertently started by other workers during maintenance and cleaning? |[ ] [ ] [ ]
| Are unsafe or faulty tools, equipment or machinery reported immediately?  |[ ] [ ] [ ]
| Are unsafe or faulty tools, equipment or machinery removed from use until they are repaired or replaced? |[ ] [ ] [ ]
| Are repairs always carried out by authorised and competent persons? |[ ] [ ] [ ]
| Are health and safety risks considered before modification or alteration of any tools, equipment or machinery? |[ ] [ ] [ ]
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| **Moving around** | **Yes** | **No** | **N/A** |
| Have you made sure people cannot slip or trip when they move around? (eg on oil, grease, water, leads, hoses, cables) |[ ] [ ] [ ]
| Have appropriate fall prevention methods been implemented for all tasks that are undertaken at height? (eg guard rails, scaffolds, harness systems) |[ ] [ ] [ ]
| Can traffic and people move safely around the worksite? (eg walkways clearly marked, barriers to separate vehicles from walkways, unobstructed vision at intersections? |[ ] [ ] [ ]
| Is it easy to get in and out of the workplace safely? (eg exits clearly marked and unobstructed) |[ ] [ ] [ ]
| Are stairs, ladders and platforms safe? (eg fixed handrails, ladders secure when in use, anti-slip treads) |[ ] [ ] [ ]
| Are vehicle drivers trained and aware of hazards? |[ ] [ ] [ ]
| Do vehicle drivers have safe schedules? |[ ] [ ] [ ]
| Are all loads safely secured? |[ ] [ ] [ ]
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| **Chemicals and other hazardous substances** | **Yes** | **No** | **N/A** |
| Is there an up-to-date list of all chemicals used? (eg cleaning products, paints, solvents, degreasers, petrol, inks, toner, oil, adhesives, acids, acrylics, pesticides) |[ ] [ ] [ ]
| Have you obtained Safety Data Sheets (SDS) for all chemicals and made these available to workers for information? (Refer to the *Code of Practice – Managing Risks of Hazardous Chemicals in the Workplace* for more information) |[ ] [ ] [ ]
| Have you assessed the risk of exposure (e.g. via inhalation, skin contact, ingestion) during transport, storage and use of the chemicals? |[ ] [ ] [ ]
| Are containers clearly labelled?  |[ ] [ ] [ ]
| Are chemicals and other hazardous substances stored safely? (eg in specific storage rooms or cabinets, separated from other reactive substances, away from ignition sources) |[ ] [ ] [ ]
| Are workers trained in the safe use, handling storage and transport of chemicals? |[ ] [ ] [ ]
| Is there adequate ventilation and fume extraction? |[ ] [ ] [ ]
| Have you ensured that chemicals and hazardous substances cannot spill, leak or otherwise escape into the environment during storage, handling and transport? |[ ] [ ] [ ]
| Are gas cylinders stored upright, secure, away from heat and ignition sources and in a ventilated area? |[ ] [ ] [ ]
| Is monitoring and health surveillance undertaken if required? |[ ] [ ] [ ]
| Are chemicals and hazardous substances disposed of correctly? |[ ] [ ] [ ]
| Is appropriate personal protective equipment provided? (eg gloves, respirators) |[ ] [ ] [ ]
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| **Electricity** | **Yes** | **No** | **N/A** |
| Are electrical leads, plugs, sockets and switches in good condition? (eg not frayed or damaged) |[ ] [ ] [ ]
| Have you ensured there are no electrical leads lying across floors? |[ ] [ ] [ ]
| Have you ensured there are no double adaptors used? |[ ] [ ] [ ]
| Have electrical leads and power boards been inspected and tagged where necessary? |[ ] [ ] [ ]
| Is the location of powerlines and cables (overhead/underground/behind walls) checked before digging, drilling, using cranes or ladders, or erecting scaffolding?For information on underground infrastructure, contact DialBeforeYouDig nationally on 1100 or [www.1100.com.au](http://www.1100.com.au). Refer to [www.sa.gov.au/energysafe](http://www.sa.gov.au/energysafe) for information on powerline safety | [ ]  |[ ] [ ]
| Is portable electrical equipment fitted with residual current devices? |[ ] [ ] [ ]
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| **Smoking** | **Yes** | **No** | **N/A** |
| Is smoking discouraged as part of the workplace culture? |[ ] [ ] [ ]
| Is there a smoke free policy that addresses exposure to passive smoke and are people aware of this policy? |[ ] [ ] [ ]
| Is smoking restricted on the worksite (including work vehicles)? |[ ] [ ] [ ]
| Are Quit smoking programs and messages promoted? |[ ] [ ] [ ]
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| **Unhealthy food and drink habits** | **Yes** | **No** | **N/A** |
| Is healthy food and drink an accepted part of the workplace culture? |[ ] [ ] [ ]
| Are facilities available for staff to bring healthy food from home and eat it at work? (eg cooler bags, fridge, cutlery) |[ ] [ ] [ ]
| Is there a policy for safe working in heat that encourages drinking water? |[ ] [ ] [ ]
| Is there easy access to healthy food and drink at work and shops near work? |[ ] [ ] [ ]
| Is information available on healthy eating and drinking to manage fatigue and stay fit for work? |[ ] [ ] [ ]
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| **Alcohol and drugs** | **Yes** | **No** | **N/A** |
| Is responsible alcohol or drug consumption an accepted part of the workplace culture? |[ ] [ ] [ ]
| Does your work provide support for isolated workers who have extended separation from family or friends? |[ ] [ ] [ ]
| Do you have a drug and alcohol policy and are staff familiar with it? |[ ] [ ] [ ]
| At work functions, do you consider responsible provision of alcohol including food and non-alcoholic drinks? |[ ] [ ] [ ]
| Do you promote safe consumption of alcohol messages and the use of support services such as the Alcohol and Drug Information Service (ADIS)? |[ ] [ ] [ ]
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| **Physical inactivity and screen time** | **Yes** | **No** | **N/A** |
| Are work tasks designed to include healthy dynamic muscular movement, including large limb and trunk movement to encourage circulation? |[ ] [ ] [ ]
| Are workstations and/or equipment designed to encourage the above? |[ ] [ ] [ ]
| Are tasks designed to encourage frequent eye movement and change of focus? |[ ] [ ] [ ]
| Are regular walking or stretching breaks an accepted part of the workplace culture? |[ ] [ ] [ ]
| Is information available on the benefits of activity and regular movement? (eg stretching regularly at work) |[ ] [ ] [ ]
| Is information available on local physical activity opportunities? |[ ] [ ] [ ]
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| **Mental health** | **Yes** | **No** | **N/A** |
| Does the workplace encourage a culture where work-related stresses and struggles can be discussed in an open and supportive/constructive manner? |[ ] [ ] [ ]
| Do workers indicate that they are able to cope with the demands of the job? |[ ] [ ] [ ]
| Have you provided sufficient support to your workers? (eg management, training, coaching) |[ ] [ ] [ ]
| Do you provide workers with opportunities to have a say about the way they do their job? |[ ] [ ] [ ]
| Do you educate staff in relation to acceptable behaviours and how to report unacceptable behaviours? |[ ] [ ] [ ]
| Have you clarified job descriptions appropriately so workers understand their role? |[ ] [ ] [ ]
| Have you communicated and managed any business changes effectively? |[ ] [ ] [ ]
| Do you promote a fair and positive work environment? |[ ] [ ] [ ]
| Do you recognise and reward workers efforts? |[ ] [ ] [ ]
| Do you monitor workers for signs of fatigue and take appropriate action to address risk factors? |[ ] [ ] [ ]
| Is coaching available for those suffering from work stress? (eg an Employee AssistanceProgram that allows workers to access counselling confidentially that the employer pays for) |[ ] [ ] [ ]
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