

General Monthly Safety Checklist for Departmental Managers

To be completed every month by the department's manager, estimated to take 15min.

Department:

Conducted by:

Date:

Past Actions Completed:

- Have the actions arising from the previous monthly check been completed?
See Risk Register
- Have the weekly safety inspections been conducted:
 - in each area
 - on time? (see records held)
 - and any deficiencies resolved or actioned and entered onto risk register
- Have the pre-shift safety checks been conducted in all areas and for mobile equipment e.g. forklifts, hoists and vehicles:
 - for each day
 - any deficiencies acted upon
- Have Hazard Reports raised in the month been actioned
e.g. entered onto risk register.
- Has anyone been injured in the last month? If so, has action been taken to prevent a recurrence? Review injury report, and investigation (if applicable)

System Items:

- Safety noticeboard:
 - material all up to date
 - contain all relevant material*e.g. policy, safety and emergency contact details, safety committee minutes, toolbox talks, recent risk assessments, recent workplace monitoring, & emergency evacuation plan.*
- Risk Assessments completed with any new items and changes in the last month
- Traffic management plan implemented
 - a) All traffic ways line marked & clear
 - b) All exits & exit pathways unobstructed

Physical Area:

- All firefighting equipment correctly maintained, signposted & accessible
- PPE requirements clearly signposted, PPE available and all persons comply
- Department area clean & tidy
- Area signage clearly and legible.
- Walkways kept clear
- Stock and storage items in designated locations.
- No obvious damage to equipment.

Staff Feedback

Typical optional questions for sampling employee safety awareness, ideas and concerns:
Are there any safety problems or concerns here?

Are all incidents reported?

Is your supervisor serious about your safety?

Do you have any suggestions to improve safety?

CORRECTIVE ACTIONS

Any identified deficiencies shall be communicated to the management team and where not immediately rectifiable listed on the risk action register.

List Identified hazard and Recommended Control:

Area/ Location	Hazard	Recommended Action	Completed*

*If actions will take time or resources are required to complete enter onto a hazard register to monitor.