

APHIS SAFETY INSPECTION CHECKLIST

(General Safety)

USDA-APHIS
INSTRUCTIONS: Questions regarding specific standards may be directed to the Program Safety Manager, CDSHO or APHIS Safety Manager, at 4700 River Road, Unit 124, Riverdale, MD 20737-1228. Refer to the APHIS Safety and Health Manual for additional information.

NAME OF INSPECTOR	ADDRESS OF FACILITY INSPECTED	DATE OF INSPECTION

INSTRUCTIONS

Executive Order 12196 requires Federal agencies to conduct annual workplace inspections and correct conditions which do not meet safety and health standards. More frequent inspections should be made when there is increased risk of accident, injury, or illness due to the nature of the work performed.

Inspections must be documented. The APHIS Safety Inspection Checklists (APHIS Form 256-1, 256-2, 256-3, 256-4, and 256-5) will be used for inspection documentation.

The head of the work location will take corrective action within 15 work days of the inspection. The Corrective Action section of the Checklists with specific due dates will be developed for deficiencies that require more than 15 work days to correct. Employees will be advised of the results.

The APHIS Safety Inspection Checklists consist of the following:

- APHIS Form 256-1 - General Safety
- APHIS Form 256-2 - Animal Handling Facilities, Bird Quarantine Facilities, and Greenhouses
- APHIS Form 256-3 - Laboratories
- APHIS Form 256-4 - Machine/Workshop
- APHIS Form 256-5 - Hazardous Chemical Storage and Waste Disposal

The General Safety Checklist (APHIS Form 256-1) applies to all locations; the other four Checklists apply to specific activities. Space is provided for the inspector to list additional items or conditions. The Checklist will be retained for 5 years at the work location.

Employees and supervisors should refer to the APHIS Safety and Health Manual, for additional information.

Complete all items ("X" one column). A "Not Applicable" (N/A) column is provided because all items and conditions may not apply to each area. Explain all "NO" responses in Section K - Corrective action

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	YES	NO	N/A		YES	NO	N/A
A. Environmental Factors and Layout:							
1. Does the ventilation system appear to work adequately?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. Is suitable office equipment provided for stamping, sharpening, and cutting operations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Can normal conversations be heard between 2 people 3 feet apart?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Is the use of makeshift tools, such as unprotected razor blades, prohibited?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the lighting system appear adequate for the work area (intensity, glare, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Is building equipment, facilities, and machinery arranged to allow orderly operation and avoid confusion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are sufficient metal trash containers available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Are glass doors designed with decals centered 4½ feet above the floor to prevent people from walking into them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is waste collected regularly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Are floor mats or runners used at building entrances and other potentially hazardous high traffic points during inclement weather?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are entry ways kept clear of snow, ice, gravel, etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Are copy machines in open, well ventilated areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are procedures established for emergency weather conditions and natural disasters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Are safe working practices evident on the part of office personnel? (Opening only one file drawer at a time, never leaving desk or file drawers open, using letter openers, moisteners, staple removers, etc. for the purpose intended.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are safe working practices exhibited by employees (clean work sites, the use of protective equipment, etc)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Do visual display terminals (VDT) include a chair that adjusts to different body positions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Is equipment, vehicles, and machinery limited to authorized personnel only?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Is leg room adequate between chair and VDT?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are fans positioned safely to prevent falling or being tripped over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Are VDT's adjustable for height and tilt?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Has office furniture with splintered or jagged edges been repaired?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Are VDT screens oriented or equipped to reduce glare?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are projections on bookcases, filing cabinets, and desks removed or guarded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

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D. Fire Protection: (Continued)	YES	NO	N/A
63. Are oil rags kept in closed metal containers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Are sufficient and suitable ash trays available for employees who smoke?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Are "NO SMOKING" areas well defined and posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Are "NO SMOKING" policies strictly enforced?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Are employees (especially the handicapped) aware of measures to be taken in event of emergency (how to call fire and police departments, location of emergency)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Medical and First Aid:			
68. Is a system in effect for providing immediate medical treatment for injured employees? (If infirmary, clinic, or hospital is not in close proximity, a person(s) trained to render first aid will be available. First aid supplies approved by a consulting physician will be readily available.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
69. Are telephone numbers posted for emergencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70. Are employees familiar with procedures for reporting injuries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Storage:			
71. Do spaces used for storage (warehouses, etc.) have safe floor load information permanently posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72. Are file and supply cabinets properly filled with heavier materials on the bottom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. Is material neatly stacked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Are step ladders or similar devices available for obtaining materials or supplies in high places?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. Are materials properly stacked in aisles or passageways and do not cause safety hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. Personal Protective Equipment:	YES	NO	N/A
76. Have employees been informed of workplace hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77. Have written Standard Operating Procedures (SOP) been established covering the selection and use of personal protective equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78. Has personal protective equipment been issued to personnel as needed (respirators, chemical splash goggles, safety glasses, gloves, hard hats, foot protection, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79. Are protective hand creams available for personnel who work with solvents, cutting oils, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80. Have personnel been trained in the use of personal protective equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
81. Is the use of personal protective equipment strictly enforced?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82. Are respirators for emergency use inspected at least monthly and recorded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
83. Is personal protective equipment maintained on a regular schedule (respirators cleaned, disinfected, and properly stored after each use; shelf life of canisters checked, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
84. Have employees who must wear respiratory protection been given appropriate medical evaluation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Underground Storage Tanks (USTs): (Applies to facilities owned by APHIS)			
85. Are USTs located on the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86. Has the APHIS Safety, Health, and Environmental Section been notified of the tanks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87. Have State or regulatory authorities been notified of any regulated USTs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. Are the tanks in compliance with Federal, State, and local regulations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Miscellaneous:			
89. Are hazardous warning signs available for employees, custodial personnel, or visitors as needed (no smoking, eye hazard area, no admittance, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90. Is safe, potable water available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91. Are bathrooms kept in a sanitary condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92. A bathrooms accessible to the disabled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

J. Other (Enter items not listed in this checklist that are applicable to your section.)

K. Corrective Action

ITEM NO.	DEFICIENCIES IDENTIFIED	REQUIRED ACTIONS TO CORRECT DEFICIENCIES	ACCOMPLISHMENT