

# Re-Opening The Workplace

## Checklist



**NOTE! Please tailor this example questionnaire to your own workplace, this list is by no means exhaustive.**

GENERAL INFORMATION:			
<b>COMPANY NAME:</b>			
<b>PERSON COMPLETING ASSESSMENT:</b>			
<b>SIGNATURE:</b>		<b>DATE:</b>	

RISK ASSESSMENT:	YES	NO	N/A	COMMENTS:
Have risk assessments been reviewed to ensure they remain suitable and sufficient?				
Have risk assessments been communicated to relevant employees?				
Have risk assessments for new and expectant mothers been reviewed?				
Have risk assessments for young people been reviewed?				

TRAINING:	YES	NO	N/A	COMMENTS:
Have employees been refreshed in local emergency and first aid procedures?				It is recommended that employees are refreshed on site-specific H&S procedures.
Are relevant training records in date?				Consider whether certain training may need to be refreshed early dependent on the risk.
Have new starters undertaken a full site induction?				Any employees that are new to the work premises should be re-inducted to include the sites health and safety, emergency and first aid procedures.

FIRE & EMERGENCY:	YES	NO	N/A	COMMENTS:
Is an in-date Fire Risk Assessment (FRA) in place?				
If you've changed the workplace layout, are they reflected in the Fire Risk Assessment?				
Has fire detection equipment been serviced within last 6 months?				
Have fire extinguishers & blankets been inspected within the last 12 months?				
Do you have sufficient Fire Safety trained Staff?				
Have emergency lights been serviced in the last 12 months?				
Have regular checks of fire items been re-instated?				<b>Consider:</b> Weekly fire alarm point checks, monthly emergency lighting tests etc.

FIRST AID:	YES	NO	N/A	COMMENTS:
Is the first aid kit suitably stocked and in date?				
Are there trained first aiders and/or appointed persons available on site?				
Is the first aid arrangement notice up to date?				
If you have a defibrillator, is it charged and are accessories in date?				

WASTE MANAGEMENT:	YES	NO	N/A	COMMENTS:
Have waste management protocols been reinstated i.e., waste collections?				

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<b>WORKING ENVIRONMENT:</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>COMMENTS:</b>
Is there a means of measuring the working temperature?				Ensure comfortable temperature levels within the workplace.
Has safe access and egress been maintained outside of the premises?				Ensure walkways/car parks are clear from slips and trip hazards such as potholes, vegetation, waste
Has safe access and egress been maintained within the premises?				Ensure the premises is free from slip and trip hazards, walkways and fire exits are unobstructed, condition of flooring etc.
Is the lighting adequate for the premises?				

<b>WELLBEING:</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>COMMENTS:</b>
Are there procedures in place to identify and manage work-related stress?				
Are there communication protocols in place in which employees can discuss their individual health and wellbeing needs/concerns?				
Do employees have access to an Employee Assistance Programme (EAP)?				

<b>DISPLAY SCREEN EQUIPMENT (DSE):</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>COMMENTS:</b>
Are training records for use of display screen equipment in date?				
Have DSE users completed and reviewed a DSE self-assessment?				
Is suitable DSE equipment available within the premises?				

<b>SIGNAGE AND DOCUMENTATION:</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>COMMENTS:</b>
Is the employer's liability insurance certificate in date?				
Is the health and safety policy statement of intent in date?				
Is site safety signage still clearly visible on site?				For example, unauthorised access signs, forklift warning signs etc.
Is the H&S Law Poster displayed and completed?				

<b>TESTING, INSPECTIONS AND SERVICING REGIMES:</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>	<b>COMMENTS:</b>
Have gas appliances been inspected by a gas safe engineer within the last 12 months?				
Have oil fired appliances been inspected by an OFTEC engineer in the last 12 months?				
Have bulk oil/gas tanks been inspected within the last 12 months?				
Is the electrical installation condition report in date (Fixed Wiring)?				
Has PAT testing been carried out within appropriate time frames?				
Has the Air Conditioning / heating been serviced within the last 12 months?				
Have unused water outlets been flushed through to prevent legionella bacteria?				
Has the alarm in the disabled toilet been tested?				
Have local exhaust ventilation systems (for fume and dust etc) been inspected within the last 14 months?				

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Have pressure systems (compressors, air lines) been tested in accordance with the written scheme of examination?				
Has lifting equipment been thoroughly examined within appropriate timeframes?				

SITE SECURITY:	YES	NO	N/A	COMMENTS:
Is CCTV functioning?				
In the event of staff changes, have pin code entry systems been changed?				
Are visitor signing in procedures in place?				

HYGIENE & COVID-19 ADVICE:	YES	NO	N/A	COMMENTS:
Are suitable welfare facilities available on site to include hand washing facilities?				For all sections below, refer to the latest government guidelines.
Are there sufficient hand hygiene measures available on site i.e., hand sanitiser stations?				
Are there cleaning procedures in place in line with the current government guidance?				
Are adequate measures in place to control the risk of COVID transmission?				
Have you considered additional controls in consultation with employees who may be more vulnerable to Covid than others?				
Is sufficient ventilation present within the workplace?				

PPE/RPE:	YES	NO	N/A	COMMENTS:
Has PPE/RPE been maintained to a suitable condition and if applicable inspected within appropriate time frames?				
Have all employees been issued with relevant PPE/RPE for the tasks undertaken?				Ensure PPE/RPE issue logs are kept up to date.

RECOMMENDATIONS & ACTIONS:		
ACTION REQUIRED:	PERSON RESPONSIBLE:	DATE DUE BY:

CHECKLIST COMPLETED BY:	
NAME OF COMPLETER:	
DATE OF CHECK:	
DATE FOR REVIEW:	