



Inspection - Weekly 274 Checklist

274 Inspection _ Environment Laboratory - Checklist

Item #	Prompt	Responses	Comments
1	1.0: HOUSE KEEPING	(X) Yes () No () N/A	
2	Access ways are clear and safe.	() Yes () No () N/A	
3	Floors dry, clean and walkways free from obstruction.	() Yes () No () N/A	
4	Spaces between and under benches, cabinets and equipment are free and accessible	() Yes () No () N/A	
5	Lighting (natural & artificial) adequate and all lights working.	() Yes () No () N/A	
6	Temperature is comfortable and air-condition operational.	() Yes () No () N/A	
7	Noise level is acceptable and appropriate PPE (ear plugs) available.	() Yes () No () N/A	
8	Ventilation is adequate and free from fumes.	() Yes () No () N/A	
9	Hand wash basin is available with running water & soap.	() Yes () No () N/A	
10	Lab coats are available and in good condition.	() Yes () No () N/A	
11	Adequate waste bins provided.	() Yes () No () N/A	
12	Ergonomics – All equipment's workplace, benches, seating are compliant to ICARE rule.	() Yes () No () N/A	
13	Mandatory PPE/Hazard/Safety signs on entrances are clearly visible.	() Yes () No () N/A	
14	Mandatory PPEs are available for visitors.	() Yes () No () N/A	
15	ICARE Rule/Standard is available, updated, and followed	() Yes () No () N/A	
16	2.0: MECHANICAL, ELECTRICAL AND PERSONAL SAFEGUARDING	(X) Yes () No () N/A	
17	All electrical equipment have current test & tag and in good condition.	() Yes () No () N/A	
18	All power points indicate C/B (circuit breakers) and in good condition.	() Yes () No () N/A	

Item #	Prompt	Responses	Comments
19	Faulty equipment have out of service tag.	() Yes () No () N/A	
20	3.0: FIRE PROTECTION AND PREVENTION	(X) Yes () No () N/A	
21	Fire Fighting Equipment (extinguishers & hydrant) available at appropriate locations.	() Yes () No () N/A	
22	Fire extinguishers fully charged, inspection tags fitted, and inspection current within 6 months.	() Yes () No () N/A	
23	Condition of fire extinguishers okay - check for physical damage, rust, colour coding.	() Yes () No () N/A	
24	Adequate signage, labelling and demarcation done for easy identification.	() Yes () No () N/A	
25	Flammable chemicals are labelled and stored correctly or removed as required.	() Yes () No () N/A	
26	Smoke detectors are fitted and operational.	() Yes () No () N/A	
27	4.0: HEALTH AND SAFETY ORGANISATION	(X) Yes () No () N/A	
28	Exit doors are marked, clearly visible and can be opened from inside.	() Yes () No () N/A	
29	Building Evacuation Plan/Map available, updated and displayed.	() Yes () No () N/A	
30	Building Warden clearly indicated.	() Yes () No () N/A	
31	First Aid Kit available, current, fully kitted, and easily accessible	() Yes () No () N/A	
32	Safety shower and emergency eye wash station test records exist and are current (tested every 2 weeks).	() Yes () No () N/A	
33	Covid-19 PPE - hand sanitisers and mask available.	() Yes () No () N/A	
34	5.0: CHEMICAL	(X) Yes () No () N/A	
35	Samples stored in refrigerators are correctly and clearly labelled.	() Yes () No () N/A	
36	All containers holding Chemicals are correctly and clearly labelled according to SDS.	() Yes () No () N/A	
37	All Safety Data Sheets (SDS) for every stored chemical is up-to-date and accessible.	() Yes () No () N/A	
38	Risk register checklist is available for chemicals.	() Yes () No () N/A	

Item #	Prompt	Responses	Comments
39	Bunding and or spill trays for the storage of hazardous liquids available.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
40	Chemical spill kits are available and maintained.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
41	Segregated waste disposable containers are available and labelled correctly.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
42	Hazardous chemicals Carriers are available to transport acid bottles and residue containers.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
43	6.0: COMPRESSED GAS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
44	Compressed gas cylinder contents are appropriately labelled.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
45	Compressed Gas Cylinders are secured firmly by bracket or chain in upright position.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
46	Appropriate resources are available for transporting gas cylinders safely.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
47	Gas lines are labelled and tested for leakage and protected from mechanical damage and no rust.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
48	7.0: BIO-HAZARDS (MICROBIOLOGY LAB)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
49	Appropriate signage placed at the laboratory entrance and storage rooms/vessels.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
50	Test samples and cultures are correctly labelled.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
51	Disinfectant/soap for hands is available.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
52	Procedure/s in place for waste disposal.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
53	8.0: EQUIPMENT	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
54	Fume Hoods are in place and operational. Inspection records exist and are current.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
55	All analytical equipment are operational and in good condition. Inspection records exist and are current.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
56	Fridge/Freezers are working and temperatures are okay and Inspection records exist and are current.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	