

• Bathing water temperatures are recorded daily and do not exceed 43c		
• There are sufficient sharps boxes and these are of the plastic type		
• The health & safety law notice is displayed in a prominent place		
• All areas have sufficient means of ventilation		
• A thermometer exists in the building and a comfortable temperature is maintained		
• Sunblinds, fans and portable heaters are provided where extremes of temperatures occur		
• Lighting is sufficient in all areas for safety and comfort		
• All furniture complies with the Fire code and is in good state of repair		
• Storage facilities are adequate for any materials stored		
• The surface temperature of radiators and accessible pipes is not too hot to touch to cause burning or suitable protective covering has been provided		
• A First aid box or cupboard is regularly maintained on the premises		
• All fire exits are marked with the appropriate signage		
• Safety steps are available an assessment is in place for their use		
2. Methods of Work		
	YES	NO
• Departmental Guidelines are up to date		
• These Guidelines are accessible to staff		
• These Guidelines are used during induction of new staff		
• A hazard analysis (HACCPS) under the food regulations has been completed and all staff can access it. Staff would be able to produce this to an Environmental Health Inspector should they call.		
• Fridge and freezer temperatures are recorded twice daily and records are made available for Environmental Health Officer.		
• Food probes are used regularly and temperatures recorded		
• Every service user has a Risk Assessment checklist completed		
• Manual handling profiles have been completed for every service user		
• Risk Assessments have been completed for service users that smoke		
• Risk assessments have been completed for all identified hazards		
• All assessment review dates are adhered to		
• Fire alarms, fire protection and fire fighting equipment is tested routinely according to DRH Procedure		
• There is a record of this routine		
• The emergency fire plan is in the fire log for the information of all staff		
• A fire risk assessment is in place and is reviewed regularly		
• The fire log has been checked today and appears up to date		
• There are periodic security checks at your home to ensure outer doors and windows are secure at night time and whenever the house is left		
• Access to keys is restricted and held by the Nurse in charge.		
• Incident reports are completed following all accidents / untoward incidents and near misses		
• All machinery defects are reported to the LO and noted in the communication book		

<ul style="list-style-type: none"> • All DRH vehicles are visually checked for safety before journeys. • A vehicle safety check is undertaken recorded every week 		
<ul style="list-style-type: none"> • COSHH assessments have been completed and available to staff • All toxic/flammable materials are kept securely stored, stocks are kept in date • A stock check of all toxic/flammable materials is made at least quarterly and the appropriate form completed • No toxic or flammable materials or substances are decanted into unmarked containers • All chemicals stored are kept to a minimum 		
<ul style="list-style-type: none"> • There are written procedures for the handling of the following:- Household waste Contaminated laundry Clinical waste Sharps 		
<ul style="list-style-type: none"> • All practitioners operating in the home hold insurance cover, i.e. hairdressers, therapists, etc. 		
<ul style="list-style-type: none"> • All drugs are stored and administered correctly according to DRH Policy 		
<ul style="list-style-type: none"> • Contractors visiting the homes have health and safety policies or abide by DRH health & safety policy 		
3. Maintenance & Service		
	YES	NO
<ul style="list-style-type: none"> • Food probes have been re-calibrated or replaced within the last 12 months 		
<ul style="list-style-type: none"> • All lifting equipment including slings have been serviced / checked in the last 6 months and are in good working order • Maintenance records are kept up to date 		
<ul style="list-style-type: none"> • The P.A.T. test certificate is available and current 		
<ul style="list-style-type: none"> • The electrical house wiring certificate is available and current 		
<ul style="list-style-type: none"> • The Gas Service Report is available and current 		
<ul style="list-style-type: none"> • The Controlled Waste Transfer certificate is available and current 		
<ul style="list-style-type: none"> • The lift service report is available 		
<ul style="list-style-type: none"> • Wheelchairs are serviced annually and a record kept 		
<ul style="list-style-type: none"> • The Sphygmomanometer Test Report is available and current 		
<ul style="list-style-type: none"> • The Suction machine has been serviced within the past 12 months 		
<ul style="list-style-type: none"> • The Blending Valve calibration certificate is available and current 		
<ul style="list-style-type: none"> • If used the Rotowash is working satisfactorily 		
<ul style="list-style-type: none"> • All maintenance requirements are reported to the Liaison Officer 		
<ul style="list-style-type: none"> • Any used equipment brought into the home is provided with a safety check prior to use. 		
<ul style="list-style-type: none"> • Unsafe equipment is taken out of service and marked accordingly. 		
<ul style="list-style-type: none"> • Repairs/replacement of lighting is executed within a reasonable time 		

4. Staffing		
	YES	NO
• The manager is responsible for health & safety in the home and ensures that standards of safe practice are maintained		
• There is a record of staff Induction and Mandatory training completed and planned		
• Core training records are kept and monitored in house		
• All staff have received training in the correct use of cot sides/bedrails		
• All staff know how to handle a problem of suspected alcohol or drug abuse		
All staff members know where to access the following		
• Risk Assessment folder		
• COSHH folder		
• Policy Folder		
• Fire log		
• Health and Safety folder		
• Risk Assessments have been completed for any staff member with identified risks.		
• Appropriate personal protective equipment is available for use whenever there is a foreseeable risk, i.e. gloves, aprons, goggles etc.		
• Staff are up to date with fire training or the home manager has organised dates for this to take place.		
• There is a nominated Back Care Advisor		
• There is a nominated Health & Safety Representative		
• There is a nominated Risk Assessor		
• There is a nominated Coshh representative		
• There is a nominated First Aider		
• There is a nominated Control of Infection link person		
• There is a record of all staff training in the use of equipment required for work		
• The home manager regularly consults staff regarding safety issues		
• Health and safety is discussed at staff meetings		
• As part of staff health & safety training all staff complete the health & safety workbook annually.		
5. Wheelchair transportation		
• Only 4 point clamping systems are used to clamp occupied wheelchairs		
• Clamping systems are removed and stored away after use		
• Visual checks of clamps are carried out before use		
• The clamping systems instructions are displayed in the vehicle		
• All staff have received training or instruction in the use of clamping systems in house or externally		
• There is sufficient space for correct positioning and tension of clamps		
• Is there sufficient space around the wheelchair occupants head in case of collision		
• A detailed risk assessment has been carried out for the transportation of service users that use a wheel chair		
• Unoccupied wheel chairs are always secured during transportation		

6. Any Other Health & Safety Problems found

Use Section 5 to list any other Health & Safety Problems that have not been included in the above check list but which have been drawn to your attention.

NUMBER	DESCRIPTION OF ITEM
1	
2	

7 Maintenance issues previously reported but not yet completed

Use section 6 to highlight outstanding repair and maintenance requests

NUMBER	BRIEF DESCRIPTION
1	
2	
3	
4	

**INSPECTION REPORT
Section 8**

Date of Inspection

Any items with ticks in the “NO” column must be identified in this section

SECTION NO	DESCRIBE PROBLEM	ACTION TO BE TAKEN	PERSON RESPONSIBLE	EXPECTED DATE OF COMPLETION

<p>NAMES (please print)</p> <p>.....</p> <p>.....</p>	<p>SIGNATURES</p> <p>.....</p> <p>.....</p>
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THIS REPORT SHOULD BE SENT TO:

The Health & Safety Advisor via the Liaison officer, a copy of section 8 will be returned to the homes safety representative

Amended November 2000/2003/2004/2006/ J/12/06/ J/3/08