

Beautiful Plains School Division
 Colony Supervisors Safety & Health Inspection Form
COLONY SCHOOL ADMINISTRATION

DATE: (Day / Month / Year) _____

SCHOOL: _____

INSPECTION PERFORMED BY: _____
 (Supervisor)

Fire & Emergency

YES NO N/A
 (Please Check ✓)

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Monthly fire drills are being conducted. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Exits and emergency escape routes are posted in all areas. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Exits, hallways and corridors free of clutter or blockage. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Paper posted on hallways, foyer, and entrance halls does not exceed fire code standards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The annual Emergency Response Plan has been completed, reviewed with staff and a copy provided to the Division Office. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Periodic emergency safety drills are being conducted. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Classrooms are uncluttered and materials are a safe distance from electrical and heating appliances. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Extension cord use is kept to a minimum and portable heaters are not is use. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. The fire alarm is fully operational. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Fire extinguishers have been inspected and are in operating condition. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Fire exit doors are operational and unobstructed. (Free of ice and snow in winter.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Exit and emergency lighting is operational. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Boiler, furnace, mechanical, electrical rooms are free of litter and combustibles. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Workplace Hazardous Materials Information System

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|--|--------------------------|--------------------------|--------------------------|
| 1. WHMIS labels and/or supplier labels are on all (caustic, corrosive, etc.) chemical containers in the school. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Your Material Safety Data Sheet (MSDS) book in MSDS online has been compared to actual chemical inventory for accuracy. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. An annual inventory of chemicals list stating maximum quantities on hand has been completed and a copy provided to the Division Office. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. All chemicals (including flammables) are safely stored in appropriate cabinets. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

YES NO N/A
(Please Check ✓)

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 5. An annual WHMIS awareness session with all staff has been held. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Custodial cleaning and floor waxing / stripping chemicals are properly stored. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

General

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. First aid kits are available and properly stocked. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The playground and play structures are inspected weekly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sidewalks are clean. (Free of ice and snow in winter.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. New employees or volunteers have been provided with job orientation, review of safety bulletins and applicable safety program policies and procedures. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. "Playing it Safe" guidebook, safety bulletins and inspection checklists have been reviewed annually with playground supervisors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Accidents and dangerous incidents have been investigated and if serious reported to Workplace Safety & Health Committee. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Workplace Safety & Health Committee minutes and safety bulletins have been posted on Safety Bulletin Boards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Periodic building and ground walkabouts have been conducted. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. A list of staff with current first aid training posted on the Safety Bulletin Board. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Unsafe conditions have been reported. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Bus safety and evacuation drills have been conducted when using divisional buses for field trips. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Unsafe conditions that fall under school division responsibility should be reported to Safety Committee representative and/or the Superintendent.

Unsafe conditions that fall under colony responsibility should be reported to the colony by letter at least every three months. A copy of the letter should be attached to this quarterly report.

COMMENTS: _____

Signature: _____
Supervisor / Administrator

Date: _____