

Maintenance / Repair Shop Self-Inspection

All ACC Maintenance / Repair shops are required to perform and document self-inspections at least annually as part of Austin Community College's requirement for an effective Injury and Illness Prevention Program (IIPP). This self-inspection form will help document shop safety inspections and will assist shop personnel in identifying and correcting many common unsafe practices and conditions. The unsafe practices and conditions identified in this form are prohibited by state laws or campus policies, or are not generally accepted safe shop practices.

At least once a year, each department must inspect its shops using this form or an equivalent. Answer each question by checking Yes (satisfactory), No (needs correction), or "N/A" if the question does not apply to your shop.

After completing the self-inspection form, share the results with the Shop Supervisor and other shop employees. Correct each identified deficiency as soon as possible and document correction on the form. Provide a copy of the completed form to your Department Safety Coordinator. Please contact your Department Safety Coordinator or the Environmental Health Safety and Insurance Office at 223-1015 if you need assistance correcting conditions identified during the self-inspection, or if you have any questions or concerns about shop safety.

This form was designed to help ensure compliance with regulations that require documented periodic inspections of all work areas as part of an effective IIPP. However, completion of this self-inspection checklist and correction of any findings noted herein does not ensure that not issue citations during an inspection. In addition, EH&S Task Force representatives will be periodically verifying that self-inspections have been documented on-site as part of the Departmental/Divisional Safety and Environmental Assessment program.

<hr/> <p style="text-align: center;">Shop Location (Building, Department and Room #)</p>	<hr/> <p style="text-align: center;">Date of Inspection</p>
<hr/> <p style="text-align: center;">Shop Supervisor's Name Printed</p>	<hr/> <p style="text-align: center;">Shop Supervisor's Signature</p>
<hr/> <p style="text-align: center;">Inspector's Name Printed</p>	<hr/> <p style="text-align: center;">Inspector's Signature</p>

ADMINISTRATIVE

1. Are training records maintained to indicate which employees are trained and qualified to use each power tool, piece of powered equipment, or machine?

Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Establish a training file. Prohibit personnel from using power tools and equipment that they have not been qualified on.

Completion Date: _____.

2. Are operator's manuals or other written safe operating procedures available for each power tool, piece of equipment, and machine?

Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Obtain operator's manuals from the manufacturer or write safe operating procedures for each power tool, piece of equipment, and machine.

Completion Date: _____.

3. Is there a lockout/tagout program in place to prevent accidental energizing of equipment, machines, or electrical systems that are being repaired, adjusted, or undergoing tool changes?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Institute a lockout/tagout (or equivalent) program.. Contact Environmental Health Safety and Insurance .

Completion Date: _____.

HOUSEKEEPING

4. Are work areas (including equipment and machinery) kept clean and orderly, so as to prevent trip and fire hazards?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Include housekeeping as part of regular shop activities (e.g. the job is not finished until all tools and materials are put away, the work area swept and waste is disposed of.)

Completion Date: _____.

5. Have employees been advised that they should not consume food or drinks in shop areas?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit consuming food or beverages in shop areas; post signs if necessary.

Completion Date: _____.

6. Are floors and work surfaces dry and/or made slip-resistant?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Keep surfaces dry or install slip-resistant material on surfaces that can not be kept dry.

Completion Date: _____.

7. Are there procedures for immediate clean-up of all spilled materials?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Establish and enforce procedures for immediate clean up of all spilled materials.

Completion Date: _____.

8. Do all work areas have adequate ventilation, particularly for hazardous operations (e.g., welding, soldering, spray coating, using solvents)?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance to have ventilation evaluated if there is a concern. Provide additional exhaust ventilation for operations that create dust, fumes, mists or vapors.

Completion Date: _____.

9. Do all work areas have adequate illumination?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance to have the lighting evaluated if there is a concern.

Completion Date: _____.

10. Is there a procedure for removing dangerous (damaged, broken, unguarded) tools, equipment, or furniture from service?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Establish a procedure such as using "out of service" tags to identify and prevent the use of dangerous items.

Completion Date: _____.

11. Are all ladders maintained in safe operating condition and properly stored?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that ladders are inspected prior to each use and damaged ladders are removed from service immediately.

Completion Date: _____.

12. Are all compressed gas cylinders adequately secured with non-combustible restraints to keep the cylinder(s) from falling? (If chains are used, two should be present for each cylinder.) Also, are all compressed gas cylinders capped when not in use?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance for advice on how to properly secure cylinders. Bench clamps may not be used for securing cylinders. Train shop personnel to cap compressed gas cylinders when not in use.

Completion Date: _____.

13. Are incompatible chemicals stored separately (e.g., acids separate from bases, oxidizers separate from flammables)?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance for assistance with chemical storage and segregation. Information on Chemical Compatibility is available at <http://accweb.austincc.edu/ehs/index.html>

Completion Date: _____.

FIRE/EMERGENCY SAFETY

14. Are emergency telephone numbers clearly posted?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Post emergency telephone numbers (Campus Police Dispatch 222) near the telephone(s).

Completion Date: _____.

15. Are building evacuation routes clearly posted, and are all exits marked with exit signs?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Post evacuation routes at shop exits, and ensure that exits are marked.

Completion Date: _____.

16. Are fire alarm pull boxes clearly identifiable and unobstructed?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that all fire alarm pull boxes are clearly labeled. Clear any obstructions in front of fire alarm pull boxes.

Completion Date: _____.

17. Are fire hose stations and portable extinguishers clearly identifiable and unobstructed?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that all fire hoses and extinguishers are clearly identifiable. Clear any obstructions in front of fire hoses and extinguishers.

Completion Date: _____.

18. Are portable fire extinguishers tagged with current annual inspections?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Submit work order to Buildings and Grounds to have fire extinguishers inspected if they have not been within the last 12 months.
Completion Date: _____.
19. Are fire escapes, exit doors, stairwells, and corridors kept clear and unobstructed?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Remove any stored equipment and materials from exit doors, stairwells and corridors. Prohibit storage in these areas.
Completion Date: _____.
20. Are the emergency eyewashes for your shop tested (flushed) monthly, with the tests documented?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Assign personnel to test all emergency eyewashes monthly. Document each test in a logbook or on an attached tag. Submit a work order to Buildings and Grounds for repairs.
Completion Date: _____.
21. Are all eyewash and emergency shower stations free of obstructions which would prevent quick access by someone temporarily blinded?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Remove all obstructions from emergency eyewashes and showers.
Completion Date: _____.
22. Are flammable materials stored in approved safety containers or safety cabinets?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Ensure that flammable materials are stored in approved safety containers or cabinets. Prohibit storage of flammable materials outside safety containers or cabinets. Flammable cabinets are required if 10gallons or more of flammable materials are stored in area.
Completion Date: _____.
23. Are flammable gas cylinders and oxygen cylinders separated by a fire-rated wall or at least 35 feet?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Separate flammable gasses from oxygen by a fire wall or a distance greater than 35 feet. Temporary storage of welding carts with oxygen and acetylene is permitted.
Completion Date: _____.
24. Are covered metal containers provided for oily and paint-soaked waste?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Ensure that covered metal containers are provided and used for the disposal of oily and paint soaked rags. Contact Environmental Health Safety and Insurance office for waste disposal.
Completion Date: _____.
25. Are combustible materials kept at least 35 feet away from welding operations, or is fireproof covering provided?
 Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)
Corrective Action: Move combustible material at least 35 feet from welding operations or place fireproof covering over them
Completion Date: _____.

ELECTRICAL SAFETY

26. Are electrical panels accessible and are circuit breakers clearly labeled?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that there is a minimum of 36 inches of clearance in front of all electrical panels, and label each circuit breaker with its use.

Completion Date: _____.

27. Is all electrical shop equipment properly grounded? (Ensure that the grounding prong has not been removed, and that 3-prong to 2-prong adapters are not used.)

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Inspect all electrical connections for grounding plugs or wires.

Completion Date: _____.

28. Are extension cords and power strips in good condition (e.g., no breaks or exposed wiring), used only as temporary wiring (<30 days), and not connected in series?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Remove all extension cords connected in series, permanent use power strips, and permanent use extension cords. Submit work order to maintenance for installation of permanent wiring. Dispose of or repair all electrical cords that are not in good condition.

Completion Date: _____.

29. Are electrical tools and appliances used in or near wet areas such as sinks protected with a GFCI (Ground Fault Circuit Interrupter)?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Install GFCI protection in/near wet areas. Use an in-line (plug attached) GFCI for locations where permanent GFCI outlets are unavailable.

Completion Date: _____.

PERSONAL PROTECTIVE EQUIPMENT

30. Have employees who work around inhalation hazards (e.g., chemical vapors, welding fumes, or dust) been monitored to determine whether they need to be enrolled in the respiratory protection program?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance Office to provide employee exposure assessments and determine the necessity for respiratory protection.

Completion Date: _____.

31. Have employees who work in noisy areas been monitored to determine whether they need to be enrolled in the hearing conservation program?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance at 223-1015 to provide employee noise monitoring and determine the necessity for hearing protection. Provide hearing protection to employees who request it.

Completion Date: _____.

32. Are employees provided with eye and face protection such as safety glasses or face shields where needed?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Provide and ensure the use of approved eye protection for all shop employee and visitors upon entry to shop work areas. Ensure that face protection is used when flying materials could cause injury to the face.

Completion Date: _____.

HAND TOOLS

33. Are all tools free of defects (such as cracked handles) that make them unsafe?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Remove defective tools from service.

Completion Date: _____.

PORTABLE POWER-OPERATED TOOLS

34. Are power tools grounded or double insulated?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that power tools are inspected prior to each use. Repair or replace power tools that are not grounded or identified as double insulated.

Completion Date: _____.

35. Are rotating or moving parts of equipment or tools guarded?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that all guards are in place and used during tool operation.

Completion Date: _____.

SHOP EQUIPMENT AND MACHINES

36. Are abrasive wheel grinders equipped with a work rest adjusted to within 1/8 inch of the wheel, and side guards that cover the spindle, nut, flange and 75% of the wheel diameter?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of wheel grinders until work rests and proper side guards are installed and/or properly adjusted.

Completion Date: _____.

37. Are radial arm saws provided with a spreader and automatic return?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of radial arm saws until spreaders and automatic returns are installed.

Completion Date: _____.

38. Are table saws equipped with an anti-kickback device?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of table saws until anti-kickback devices are installed.

Completion Date: _____.

39. Are all pieces of equipment and machinery provided with adequate guarding? (Rotating parts, nip points and v-belts must be guarded.)

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of equipment and machinery until adequate guards are installed.

Completion Date: _____.

40. Are pieces of equipment or machinery securely anchored to the floor or a bench?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure equipment or machinery that can move from its operation or vibration or the vibration of nearby equipment or machinery is securely anchored.

Completion Date: _____.

41. Are forklift drivers certified and trained by EH&S?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of forklifts by personnel who have not been certified as forklift operators by Environmental Health Safety and Insurance at 223-1015.

Completion Date: _____.

42. Are crane and hoist operators and riggers trained or otherwise qualified?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Prohibit the use of cranes, hoists and rigging for personnel who have not been trained/qualified. Contact Environmental Health Safety and Insurance at 223-1015 for information about crane/hoist training.

Completion Date: _____.

43. Are documented daily inspections of forklifts, cranes, hoists and rigging kept on file?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Establish equipment inspection files to maintain required inspections for forklifts, cranes, hoists, and rigging.

Completion Date: _____.

WELDING

44. Is adequate ventilation provided in areas where welding occurs?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Contact Environmental Health Safety and Insurance to have ventilation evaluated if there is a concern.

Completion Date: _____.

45. Are welders provided with appropriate personal protective equipment (e.g., eye protection, gloves, flame resistant clothing or leathers)?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that welders are provided with and use the proper personal protective equipment.

Completion Date: _____.

46. Are welders provided with a fire extinguisher within ten feet of their working area?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Ensure that there is an A40BC fire extinguisher with a current inspection tag within 10 feet of welding work areas.

Completion Date: _____.

HAZARDOUS MATERIALS

47. Is there a Material Safety Data Sheet (MSDS) for each chemical stored in the shop?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Obtain missing MSDSs from the product vendor.

Completion Date: _____.

48. Are all containers of chemicals labeled with the contents and primary hazards?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Properly label all chemical containers, including stored and temporary containers.

Completion Date: _____.

49. Has the shop submitted an updated chemical inventory to EH&S within the last 12 months?

- Yes (Satisfactory) No (Needs Correction) N/A (Not Applicable)

Corrective Action: Complete and submit a chemical inventory to Environmental Health Safety and Insurance Office . Form is available at <http://accweb.austincc.edu/accforms/other%20services/servhome.html>

Completion Date: _____.