

Example Daily Health, Safety & Fire Checks

WEEK COMMENCING MONDAY – DATE:

MANAGER'S CHECKS	M x/✓	T x/✓	W x/✓	T x/✓	F x/✓	S x/✓	S x/✓
No obstructions or trip or slip hazards in public areas including toilets							
No obstructions or trip or slip hazards in production areas especially around hazardous equipment							
No obstructions or trip or slip hazards in staff changing areas and staff toilets							
No obstructions or trip or slip hazards in back of house and external areas							
Lighting checks – all bulbs working							
All fire escape routes clear, fire block doors kept closed, fire exit signs are clearly visible							
All fire exits available for use – not locked or obstructed on either side, open easily and close properly							
Adequate cooling and ventilation (Spring/Summer months)							
Adequate heating (Autumn/Winter months)							
First aiders and fire marshalls on site							
Any trainees or under 18s being closely supervised							

WRITE DOWN HERE IF THERE WERE ANY PROBLEMS AND WHAT WAS DONE TO PUT THEM RIGHT

I am the person responsible for supervising health and safety and I confirm that these DAILY CHECKS were completed.

Signed: _____ Name in capitals _____

Example Weekly Health, Safety & Fire Checks

WEEK COMMENCING MONDAY – DATE:

MANAGER'S CHECKS	*/✓	DATE	SIGNED
Daily checks - available, being correctly completed. No outstanding actions			
Spot check – strong, covered and slip-resistant footwear worn			
Spot check – employees using hazardous work equipment trained to do so			
Spot check – employees following equipment manufacturers' instructions			
Spot check - PPE worn if necessary and in good condition			
Spot check – no signs of dermatitis e.g. red or irritated skin on hands			
Spot check – equipment switched off and isolated before cleaning			
Spot check – staff lifting & carrying safely, mechanical aids eg. trollies used if possible			
Trollies not overloaded and in good repair, heavy items stored at waist level			
Shelves stable, no stacking above shoulder height, no risk of falling objects,			
Gas appliances – no staining, sooting, discolouration, strange smells, blue flame			
Electrical equipment – no defects or signs of damage, not trailing wires			
Electrical equipment – no evidence of overheating			
Electrical extension leads in good condition and not many used, no cube adapters			
Pressure systems eg. coffee machines, pressure cookers in good repair			
Guards & safety devices on hazardous equipment are in place and not interfered with			
Emergency stops working on all hazardous machinery (turn off quickly once pressed)			
Other work equipment in good order – no defects or sign of damage			
Any faulty equipment has been disconnected and DO NOT USE sign displayed			
Fire alarm (alternate call points) sounders checked and working			
All self-closing doors operating correctly and closing fully			
No flammable materials stored near sources of heat			
Flammable substances store within secured, flame retardant cupboards			
All detector heads, sprinklers and flashing beacons visually checked for damage			
All fire extinguishers in place, fully charged & tagged			
Taps used less than once/week are flushed through			

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<p>I am the person responsible for supervising health and safety and I confirm that these WEEKLY CHECKS were completed.</p> <p>Signed: _____ Name in capitals _____</p>

Health & Safety - Section 5. Diary Sheets

SD3

Example Monthly Health, Safety & Fire Checks

MONTH COMMENCING MONDAY – DATE:

MANAGER'S CHECKS	* / ✓	DATE	SIGNED
Weekly checks - available, being correctly completed. No outstanding actions.			
All new starters have undertaken health and safety induction training			
Maintenance records completed and no outstanding works			
DSE assessments completed for all new users/reviewed for existing users if needed			
Accident book – incidents requiring further investigation have been followed up			
Spot check - lone worker procedures followed if there is any lone working			
Spot check – young people at work procedures followed if anyone under 18 years			
Spot check - expectant mothers work activities in line with specific risk assessment			
Spot check – staff not subjected to excessive pressure at work			
Spot check – flour dust control methods being adhered to			
First aid kit, burn kit and eye wash in correct location, well stocked, no tablets			
Walls, floors, ceilings, doors in safe repair, all furniture in safe condition			
Baby chairs conform to BS EN 14988 and are clean and in good repair			
Stair treads and steps in good repair and hand rails firmly fixed			
Ladders, steps and kick stools – no defects or signs of damage			
Sufficient metal lidded bins available and used for broken glass and crockery			
All hazardous substances used and labelled correctly. No unapproved chemicals			
Cleaning materials stored away from heat sources.			
All PPE required is available and in good condition – face masks, gloves etc.			
Sufficient yellow DANGER WET FLOOR signs available and used when required			
Water distributed below 20°C or above 50°C with wash basins at 45-50°C			
Walk in fridges and freezers can be easily opened from the inside			
Sharp knives stored on racks or in boxes – not in utensil drawers			
Emergency escape lighting functionally checked and working			

WRITE DOWN HERE IF THERE WERE ANY PROBLEMS AND WHAT WAS DONE TO PUT THEM RIGHT

I am the person responsible for supervising health and safety and I confirm these MONTHLY CHECKS were completed.

Signed: _____ **Name in capitals** _____

Example Quarterly Health, Safety & Fire Checks

QUARTER COMMENCING MONDAY – DATE:

MANAGER'S CHECKS	x/✓	DATE	SIGNED
Monthly checks - available, being correctly completed. No outstanding actions.			
HSMS in correct location and available to all employees			
Risk assessments in HSMS signed off and up to date			
A COSHH risk assessment has been carried out for each hazardous chemical			
A manual handling risk assessment has been carried out for each hazardous task			
Work equipment risk assessments carried out for each hazardous equipment			
Health and safety training records up-to-date			
Health and safety training list up-to-date			
Fire drill has been carried out and recorded in last six months			
Any team meetings have included health and safety as an agenda item			
Health and safety concerns brought up by staff, managers or customers recorded			
Dangerous equipment signage and safety instructions are displayed as required			
Fire safety information notices displayed at all fire alarm call points			
Electrical danger signs on electrical cupboards and if necessary cupboards locked			
Hot surfaces in customer areas have signage as necessary			
'Health and Safety Law – What you should know' poster displayed in staff areas			
Employer and public liability insurance certificates displayed in staff areas			
Company Health and Safety Policy Statement displayed in staff areas			
Fire emergency plan displayed in staff areas			
List of first aid trained staff on display and up to date			

WRITE DOWN HERE IF THERE WERE ANY PROBLEMS AND WHAT WAS DONE TO PUT THEM RIGHT
<p>I am the person responsible for supervising health and safety and I confirm these QUARTERLY CHECKS were completed.</p> <p>Signed: _____ Name in capitals _____</p>