

# WORK INSTRUCTION

- INSPECTIONS  
HEALTH & SAFETY  
REPRESENTATIVES



**MY SAFETY**  
**SHOP**

Powered By SafetyWallet



## 1) Introduction

Without dedicated and knowledgeable Safety and Health Representatives an organisation's entire health and safety policy and programme is at risk. They serve the interests of both the workers and management in ensuring that every aspect of health and safety in an organisation is constantly and meticulously monitored – in short, they serve as the eyes and ears of workers and management in the process of creating and maintaining a pleasant, but above all safe working environment.

It is therefore important that every representative should constantly be on the lookout for situations which could lead to the injury or death of a co-worker. This means that they should look beyond the wording of rules and regulations and develop a sixth sense for detecting potential danger or risk situations before they have actually developed.

The golden rule is to bring any doubts you may have about a condition or situation to the attention of management sooner rather than later.



## 2) References

General Safety Regulations - Occupational Health and Safety Act SANS 1990

## 3) Inspection Instructions

### HSR 1 - Appointed person

**Question on checklist: Did the appointed person do the inspection?**

The person carrying out the inspection must see to it that the report is properly signed and placed on record.

### HSR 2 - Hazards

**Question on checklist: Have all hazards in the workplace been identified?**

It is important that the representative should develop an eye for detail in spotting particular danger spots in his/her area of responsibility. The check sheets are there to assist the representative in carrying out the inspection in a systematic manner, but should not prevent him/her from taking an overall view the health and safety situation.



### HSR 3 - Demarcation

**Question on checklist: Has demarcation been done in all the required areas?**

All walking and driving restrictions should be clear to workers and visitors alike and demarcation lines should always be clearly visible.



#### HSR 4 - Fire fighting equipment

**Question on checklist: Is firefighting equipment in place where required?**

The question that the representative should ask himself/herself in each situation is: If a fire should break out in this area, do the people here have immediate access to the right type of fire fighting equipment which will enable them to stop or contain the fire until the fire brigade arrives?



#### HSR 5 - Notices and signs

**Question on checklist: Are all the necessary notices and signs in place?**

Notices and signs are there to give visual information to people in the area, often in the case of an emergency, when they need to obtain information in a hurry and under stress. All signs should therefore be big enough, clear enough and in a position where they can be seen clearly.



The representative should make sure that all the required signs applicable to the circumstances in an area are present.



#### HSR 6 - Valves and switches

**Question on checklist: Are all valves and switches labelled?**

Labelling of valves and switches should be correct and clearly visible in an emergency.



#### HSR 7 - Lighting levels

**Question on checklist: Is lighting at the correct levels?**

The minimum lighting level required for each particular workplace should be established and checked with each inspection.

#### HSR 8 - HCS

**Question on checklist: Are the areas free of hazardous chemical substances?**

If there are hazardous chemical substances present because of the nature of the work being done in the area, the necessary notices should be displayed and all the other legal requirements should be complied with.





### HSR 9 - Emergency numbers

**Question on checklist: Are the emergency plan/telephone numbers in place?**

This is another vital requirement in the interests of safety in an emergency and should be complied with. The representative should make a point during each inspection of checking the validity of the lists.



### HSR 10 - Fire fighting

**Question on checklist: Are the fire equipment and escape doors unobstructed?**

The reason why this requirement should be strictly enforced can be seen in the two pictures below.



### HSR 11 - Structures and floors

**Question on checklist: Are the structures and floors in a safe condition?**

Structures and floors should be absolutely safe under all circumstances, not only because they are soundly constructed (do not, for instance pose a danger of tripping on a poor surface) but also because clear warning signs are posted when a temporary hazard exists, such as when floors are being washed.



### HSR 12 - Work procedures

**Question on checklist: Are written safe work procedures in place?**

The representative should establish whether safe work procedures are available for each type of job being performed in the area, but also whether they are strictly enforced.

### HSR 13 - Machine guards

**Question on checklist: Have all machines been fitted with machine guards where required?**

This is one of the most common items to be checked in a workshop or manufacturing environment, but a large number of injuries every year can be attributed to the fact that the rule is often ignored, especially by people working with the "smaller" tools.





### HSR 14 - Incident recall

**Question on checklist: Does the organisation do incident recall in respect of all incidents?**

The representative should ensure that this is, in fact, being done and that proper records are being kept.

### HSR 15 - SHE talks

**Question on checklist: Does the organisation or department have Safety Health and Environmental talks once a week?**

Here too the representative should ensure that this is, in fact, being done and that proper records are being kept.

### HSR 16 - Lock-out system

**Question on checklist: Is a lock-out system in place when work is done on electricity, steam or water installations or where any moving parts are involved?**

A lock-out system should be in place and strictly enforced.



### HSR 17 - Permit system

**Question on checklist: Is a permit to work system in place for all hot or cold work?**

The system aims to control certain types of work or access to work areas that are potentially hazardous. It sets out what work that is to be done and the precautions required. The representative needs to establish that the system is in place and is being followed without exception.



### HSR 18 - Hearing conservation

**Question on checklist: Have all noise areas been identified?**

Noise areas should be identified using the correct measuring devices and the appropriate notices displayed.



### HSR 19 - Colour coding

**Question on checklist: Is the correct colour coding practices followed where required?**

Colour coding is an important method of assisting people in quickly recognising and identifying certain products or conditions, not only in the normal course of their duties, but especially in emergencies. The representative should identify which colour coding practices need to be followed and whether they are in fact being enforced.



### HSR 20 - Emergency alarm

**Question on checklist: Is the emergency alarm in working condition?**

The emergency and/or fire alarm should be checked during each inspection from each activating point.



### HSR 21 - Factory and yard

**Question on checklist: Is the factory and yard in a safe condition?**

The basic concept here is that a tidy and ordered environment with everything in its allotted (and demarcated) place makes a major contribution towards worker health and safety.



### HSR 22 - First Aid

**Question on checklist: Is the first aid box and equipment in place?**

The first aid box, whether a small container or a large cabinet, should not only be in place, but should be properly stocked.



### HSR 23 - Electric installation

**Question on checklist: Is the electrical installation generally in a safe condition?**

Because of the extreme danger posed by electrical installations, the electrical system should be thoroughly checked, from distribution boards to the various temporary and permanent connections along the line. No leeway for shoddy work should be allowed.



### HSR 24 - Protective equipment

**Question on checklist: Is the correct personal protective equipment provided and used?**

Familiarity breeds contempt. There is normally no problem with regard to the issuing of protective personal equipment to workers, but the rules are not always strictly adhered to or enforced. It is in the interest of the worker as much as the employer that representatives follow up on transgression in this regard.



### HSR 25 - SHE policy

**Question on checklist: Is the organisation's SHE policy posted where required and understood by all concerned?**

The positioning and the legibility of the policy should be checked.

### HSR 26 - Stacking

**Question on checklist: Is stacking being carried out correctly and safely?**

The rules and regulations with regard to stacking practices in respect of the various types of materials should be strictly enforced. In view of the safety threat posed by forklifts, etc. adherence to demarcation line restrictions is also of the utmost importance.



### HSR 27 - Safe storage

**Question on checklist: Are flammables, explosives and HCS stored correctly and safely?**

The representative should be familiar with the various requirements with regard to the storage of dangerous materials and should ensure that they are strictly enforced.



### HSR 28 - Waste management

**Question on checklist: Is a satisfactory waste management system followed?**

Again the representative should be familiar with the various requirements in this regard and draw attention to any failure to comply.



### HSR 29 - Ventilation

**Question on checklist: Is the ventilation sufficient?**

The attention paid to the quality of the ventilation in a workplace will of course depend on ruling conditions, such as the presence of chemicals in the air or possible pollution from surrounding areas.

If there is any doubt about the adequacy of the ventilation in a specific workplace, the advice of experts in the field should be sought on the need for additional extractors, fans, air conditioning and the like.

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Umhlanga Rocks

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# Inspection Report



Company Name: \_\_\_\_\_

Inspection Name: Health & Safety Representative Inspection Checklist	Department:	
1.) Is the colour coding for pipes, lifting equipment and inspection tags up to standard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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3.) Are lighting levels correct according to the correct lux level?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.) Is the factory and yard in safe condition?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5.) Is the area free of high noise levels over 85dB?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6.) Is there enough ventilation and fresh supply of breathable air?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7.) Are the structures and floors in good condition and are they free of cracks and structural damage?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.) Do all the machines have guarding where there is any rotating or moving parts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.) Are all the valves and switches labeled for identification?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10.) Is a lockout system used when maintenance is being done on electricity, steam, water or any moving parts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11.) Is the general electrical installation in a good condition and free from any exposed electrical wires?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12.) Are the fire equipment and escape doors unobstructed and freely accessible?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
13.) Is all fire fighting equipment in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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18.) Is the waste management under control?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
19.) Is there an emergency plan with telephone numbers in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
20.) Is the SHE policy - posted and understood?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- 21.) Are posters for the Health and Safety Policy / Employment Equity Policy / Basic Conditions of Employment available? Yes  No
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- 28.) Does the company or department have safety, health and environmental talks once a week? Yes  No
- 29.) Is there an ice pack available in the first aid box? Yes  No
- 30.) Have all hazards in the workplace been identified? Yes  No
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### For Company

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Date of Inspection

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Signature of appointee conducting the Inspection

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Name and Surname of appointment person

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Manager / 16.2 or Section 8 appointment Signature

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10.) Is a lockout system used when maintenance is being done on electricity, steam, water or any moving parts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11.) Is the general electrical installation in a good condition and free from any exposed electrical wires?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12.) Are the fire equipment and escape doors unobstructed and freely accessible?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
13.) Is all fire fighting equipment in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
14.) Does the company do incident recall on all incidents in the past?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
15.) Is the first aid box and equipment in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
16.) Is the storage of flammable substances and liquids, explosives and hazardous chemical substances in a good condition?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
17.) Is the area free of hazardous chemical substances and have all chemical containers been marked with a description of the content?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
18.) Is the waste management under control?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
19.) Is there an emergency plan with telephone numbers in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
20.) Is the SHE policy - posted and understood?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

- 21.) Are posters for the Health and Safety Policy / Employment Equity Policy / Basic Conditions of Employment available? Yes  No
- 22.) Is the personal protective equipment in place and is it being used correctly? Yes  No
- 23.) Has the appointed health and safety representative conducted an inspection of his/her relevant area on a monthly basis? Yes  No
- 24.) Is a permit to work system in place for all electrical, hot and cold work etc? Yes  No
- 25.) Are there written safe operating procedures and have they been communicated? Yes  No
- 26.) Are all the demarcation in the correct places for all walkways, fire and safety equipment etc? Yes  No
- 27.) Are all the notices and signs in place for all fire equipment, safety equipment and hazards? Yes  No
- 28.) Does the company or department have safety, health and environmental talks once a week? Yes  No
- 29.) Is there an ice pack available in the first aid box? Yes  No
- 30.) Have all hazards in the workplace been identified? Yes  No
- 31.) Is the emergency alarm in working condition and easily accessible? Yes  No

### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname

# Inspection Report



Company Name: \_\_\_\_\_

Inspection Name: Health & Safety Representative Inspection Checklist	Department:	
1.) Is the colour coding for pipes, lifting equipment and inspection tags up to standard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.) Is the stacking done according to the correct method and in good condition?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3.) Are lighting levels correct according to the correct lux level?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.) Is the factory and yard in safe condition?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5.) Is the area free of high noise levels over 85dB?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6.) Is there enough ventilation and fresh supply of breathable air?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7.) Are the structures and floors in good condition and are they free of cracks and structural damage?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.) Do all the machines have guarding where there is any rotating or moving parts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9.) Are all the valves and switches labeled for identification?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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- 30.) Have all hazards in the workplace been identified? Yes  No
- 31.) Is the emergency alarm in working condition and easily accessible? Yes  No

### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname

# Inspection Report



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- 29.) Is there an ice pack available in the first aid box? Yes  No
- 30.) Have all hazards in the workplace been identified? Yes  No
- 31.) Is the emergency alarm in working condition and easily accessible? Yes  No

### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname



# Inspection Report



Company Name: \_\_\_\_\_

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- 30.) Have all hazards in the workplace been identified? Yes  No
- 31.) Is the emergency alarm in working condition and easily accessible? Yes  No

### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname

# Inspection Report



Company Name: \_\_\_\_\_

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- 28.) Does the company or department have safety, health and environmental talks once a week? Yes  No
- 29.) Is there an ice pack available in the first aid box? Yes  No
- 30.) Have all hazards in the workplace been identified? Yes  No
- 31.) Is the emergency alarm in working condition and easily accessible? Yes  No

### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname

# Inspection Report



Company Name: \_\_\_\_\_

Inspection Name: Health & Safety Representative Inspection Checklist	Department:	
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### For Company

\_\_\_\_\_

Date of Inspection

\_\_\_\_\_

Signature of appointee conducting the Inspection

\_\_\_\_\_

Name and Surname of appointment person

\_\_\_\_\_

Manager / 16.2 or Section 8 appointment Signature

### Quality Checks (spot check)

\_\_\_\_\_

Date of spot check

\_\_\_\_\_

Compliance Officer Signature

\_\_\_\_\_

Name and Surname

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