



County of Los Angeles

Department: _____ Facility Name: _____

Address: _____

Inspector: _____ Date/Time: _____

OFFICE INSPECTION CHECKLIST

A Recordkeeping and Safety Data Sheets		Yes	No	NA
1	Are records of employee safety and health training properly maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	If applicable, are Safety Data Sheets available on site, and if not, then list the location: e.g.,online) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B Electrical				
1	Are all indoor and outdoor light fixtures in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are all wall plates properly installed and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are work areas free from electrical overloading (e.g., use of multiple adapters or extension cords)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Is proper clearance maintained around electrical panels (at least 36 inches in front and a minimum width of 30 inches)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Is the use of extension cords prohibited, discouraged, or limited to temporary work only?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Are electric cords, plugs, and switches in good condition and free from damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are electrical rooms maintained free from combustible material presence or storage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C Fire Protection				
1	Do space heaters have an automatic shutoff feature that activates if they are tipped over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are heaters placed on flat, stable, non-flammable surfaces and kept at least 3 feet away from flammable materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are heaters, fans, small appliances turned off and/or unplugged when not in used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Do coffee pots and other appliances have an internal automatic shutoff feature?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Are portable fire extinguishers properly mounted and readily accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Are portable fire extinguisher locations identified with labels or signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are fire extinguishers inspected monthly and recharged or replaced annually?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Are all fire doors in good operating condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Is the local fire department familiar with the facility, its location, and any specific hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Is proper clearance (at least 18 inches) maintained below all sprinkler heads?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D Exiting or Egress				
1	Are exit doors unlocked during business hours and kept free of obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are all exits clearly marked with illuminated exit signs that are kept lit by a reliable power source?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are doors or stairways that are not exits, but could be mistaken for exits, clearly marked with a "NOT AN EXIT" sign?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Are exit doors operable from the direction of exit travel without the use of a key, special knowledge, or additional effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	If stairs or stairways exit directly into areas of vehicle traffic, are adequate barriers and warning signs provided to prevent employees from stepping into the path of traffic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Are employees aware of the location of their designated assembly area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are exit signs clear, illuminated, and visible from at least 30 feet away, with lettering at least 5-inch high?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Are evacuation diagrams clearly posted throughout the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



E	Walkways and Stairways	Yes	No	NA
1	Are all aisles and walkways at least 24 inches wide?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are all aisles and walkways kept clear, free of obstructions, and tripping hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are all wet surfaces covered with non-slip materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Are any holes in the floor, sidewalk, or other walking surfaces promptly repaired, covered, or otherwise made safe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Are changes in direction or elevations clearly marked and easily identifiable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are guardrails installed wherever surfaces are elevated more than 30 inches above adjacent ground or floor level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Are grates or similar covers over floor openings, such as floor drains, designed so that foot traffic and rolling equipment are not affected by the grate spacing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Are steps on stairs and walkways designed and maintained with slip-resistant surfaces?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Are "WET FLOOR" signs readily available and used appropriately when needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Are handrails properly installed and securely fastened in all required locations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Are private and/or concealed areas in workspace (where juveniles are present), monitored with surveillance cameras or other technology to help prevent misconduct with minors (child abuse)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Are interior walkways equipped with surveillance cameras for enhanced safety and security?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F General Interior Work Environment				
Structures, Fixtures & Furnishings				
1	Are carpets and all flooring in good condition and free from damage such as buckles, tears, cracks, warping, or missing pieces?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Is the ceiling free from leaks, loose tiles, significant stains, discoloration, or any other signs of damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are all shelves, cabinets, storage racks, lockers, and similar items over 5 feet tall securely fastened to prevent tipping over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Are all pits and floor openings properly covered or otherwise adequately guarded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Are ladders in good condition; with tight joints between steps and side rails, securely attached hardware and fittings, and moveable parts that operate freely without binding or excessive play?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Is the ladder properly secured in an upright position to prevent it from falling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are designated smoking areas clearly identified with signage indicating where smoking is prohibited or permitted within the workplace?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Are non-combustible receptacles provided in all designated smoking areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operations and Maintenance				
9	Are all workstations kept clean and orderly, with trash being removed from the building regularly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Are all mop rooms and restroom facilities kept clean and sanitary, with toilet seats secured and supplies appropriately stocked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	If materials are stored on top of shelves, bookcases, or similar surfaces, are they properly secured to prevent falling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Are indoor workplaces maintained at temperatures below 82°F and protected from high-radiant heat sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Is potable drinking water readily available in the cooling area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Storage Areas		Yes	No	NA
14	Are surveillance cameras installed in storage rooms where juveniles are present to help prevent child sexual abuse or other misconduct?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Is the storage room organized to ensure easy access to all areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Are boxes and other items stacked appropriately to prevent them from toppling over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Are shelves, cabinets, storage racks, and similar items over 5 feet tall secured or otherwise fastened to prevent from tipping over?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G Emergency Preparedness, First Aid, Bloodborne Pathogens				
1	Are emergency preparedness kits readily accessible, fully stocked with necessary supplies, inspected monthly, and replenished as needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are first aid kits accessible in each work area, fully stocked with necessary supplies, inspected monthly, and replenished as needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Is an inventory list included inside each First Aid Kit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Have the first aid kits been approved by a physician as adequate for the designated area or operation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	If provided, are bloodborne pathogen kits accessible to each work area, fully stocked, inspected monthly, and replenished as needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H Automated External Defibrillator (AED)				
1	Is an Automated External Defibrillator (AED) available at the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Is the AED clearly labeled and maintained with a clearance of at least 30 by 48 inches for accessibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Is the green checkmark visible or the green light illuminated on the AED, indicating it is operational?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Is the AED inspected and maintained on a monthly basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Are the AED accessories available and within their expiration dates?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I Naloxone (Narcan)				
1	Is Naloxone (Narcan) available at the facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Is Naloxone (Narcan) properly stored and within its expiration date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J Postings and Programs				
1	Is a copy of the Injury and Illness Prevention Program (IIPP) or an online version readily accessible to all employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are all required workplace postings displayed and kept up to date in a prominent location where all employees are likely to see them? a. Industrial Welfare Commission (IWC) b. Notices to Employee Injuries Caused by Work c. Minimum wage (State) d. Payday notice e. Safety and health protection on the job f. Emergency phone numbers g. Notice to employees -- injuries caused by work h. Access to medical and exposure records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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	i. Whistleblower Protections j. Know Your Rights: Workplace Discrimination is Illegal k. Notices of WC Carrier and Coverage NOTE: This list is not all inclusive, other Federal and State postings requirement may apply.			
3	Where employees may be exposed to hazardous substances, are Safety Data Sheets (SDSs) readily available to all affected employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	If applicable, are the Operating Rules for Industrial Trucks clearly posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Is the Summary of Occupational Injuries and Illnesses (OSHA Log 300A) posted from February 1 through April 30 each year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K	Please identify any additional accessible areas not previously listed (e.g., closets, laundry facilities, large food pantries) and specify whether surveillance cameras were installed to monitor each area.	Yes	No	NA
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

