



Workplace Safety Self Assessment Form

August 22, 2009

Considering your workspace/department, do you have concerns about:

ENVIRONMENT:

- Doors and windows (entry and escape)?
- Are you isolated from potential threats?
- Is there a 'safe/secure' location for you to evacuate to?
- Do you have Notification/Communication ability?
- High Risk Work Area (e.g. cashier, pharmacy, counseling area, etc.)?
- Windows (visibility from outside)?
- Parking Situation (lighting, distance, hiding places, etc.)?
- Can visitors move through your building unobserved?
- Is restroom security an issue?
- Stairwells and hallways visible and lighted?
- Are you in a remote site (your building or your office)?
- Do you have an alarm system for security or fire?
- Do you know how it is used/functions?

CUSTOMERS/VISITORS:

- High Risk Work Type (see above)?
- Do you handle customer complaints?
- Are you readily accessible to the public?
- Are there any current 'threats' known to your office/agency? Do any staff members have restraining orders against another person?
- Do you secure any property such as backpacks away from customer?



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- Are your doors marked for height estimates of those who enter?

COMPUTER/CELL PHONE/PDA ISSUES:

- Do you have websites 'bookmarked' for safety references/checklists?
- Do you handle 'secure' information for your department or CSU?
- Do you recognize 'urban legend' types of mailings?
- Has your department been victim of harassment, pornography, etc.?
- Is your screen, PDA, or phone visible/accessible to others?

EMERGENCY SITUATIONS:

FIRE

- Is all equipment in good/clean condition?
- Are fire extinguishers available?
- Have you practiced using one?
- Do you store flammable materials?
- Is wire routing a problem or hazard?
- Are fire exits identified and clear of obstruction?

Alternate evacuation routes?

- Does the fire alarm work?
- Have you had a fire/evacuation drill in the last year?
- Do you know where to report to 'be counted' during an evacuation?



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- Are plans in place for:
 - Power Outage
 - Water Problems
 - Gas Leak/Odor Problems
 - Serious Weather (“reverse evacuation” plans?)
- Have you practiced contingency locations and reporting suspicious persons/devices during evacuations?

HOSTILE CUSTOMER OR INTRUDER

- Do you have a safe place to hide and call for help?
- Can you escape in more than one direction without confronting or passing an angry person?
- Does your workplace have a plan and practice so staff are prepared for such situations?
- Does your employer do background checks for possible violent people?
- Are your employees aware of any restraining or safety orders that other employees may have against another person?

MEDICAL EMERGENCY

- Is there a plan for staff to provide First Aid/CPR/AED support?
- Is someone assigned to meet ambulance staff outside and escort them to the specific area of the emergency?
- Do you have a plan FOR ALL EMERGENCIES to debrief the situation and make sure employees are both mentally and emotionally prepared to go back to work?
- Are there any safety hazards that need to be addressed before going back to work?



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PERSONAL SAFETY:

- Do you work early/late alone?
- Do you have concerns about arriving at/leaving work?
- Do you carry a cell phone? Are your "ICE" (In Case of Emergency) numbers programmed?
- Are important numbers 'pre-programmed' in?
- Do you understand ENHANCED 911?
- Do you keep your purse, briefcase, wallet, keys, other personal items secure and out of sight?
- When traveling, do you know EXACTLY where you are to report emergencies?
- Do you leave space between your car and the one ahead so you have room to move?
- Do you keep valuables out of sight?