Institute/Directorate/Centre:

**Campus, building and room number:**

Inspection conducted by:

Date:

|  |  |  |
| --- | --- | --- |
| Fire Safety and Emergency Response  | Y/N | Action if Required |
| Are Local Emergency Instructions prominently displayed in a nearby location? |  |  |
| Does the area have an audible evacuation alarm?  |  |  |
| Are doorways, walkways and emergency exits clear of obstacles and hazards? |  |  |
| Rooms | Y/N | Action if Required |
| Is the room clean and tidy? (No papers left on tables, lecterns, etc.) |  |  |
| Is there sufficient space for each person to work safely? |  |  |
| Are floor surfaces maintained in a safe condition and suitable for the type of activities being conducted? |  |  |
| Are walls and ceilings safe and in good condition? |  |  |
| Are steps/stairs/ramps in a safe condition with non-slip surfaces and secure handrails where needed? |  |  |
| Are doors, windows, locks and latches in good working order? |  |  |
| **Furniture, Fixtures and Fittings** | Y/N | **Action if Required** |
| Is all furniture safe and in good condition? (*i.e. check fixed seats in lecture theatres).* Check number of free-standing tables and chairs in classroom. |  |  |
| Storage | Y/N | Action if Required |
| Are required resources and equipment stored safely? |  |  |
| Are free standing shelves/cupboards secured to ensure stability? |  |  |
| Electrical and audio-visual | Y/N | Action if Required |
| Is electrical equipment in good condition and tested as required by the department’s electrical testing procedure *(e.g. tested and tagged)*? |  |  |
| Are light fittings/fixtures and ceiling fans in good working order? |  |  |
| Are power and microphone leads neat and tidy? |  |  |
| General | Y/N | Action if Required |
| Is the room satisfactory overall? YES [ ]  NO [ ]  |  |  |
| Is maintenance required? YES [ ]  NO [ ]  |  |  |
| Has a PULSE request been submitted? YES [ ]  NO [ ]  |  | PULSE # |
| Other Issues | Y/N | Action if Required |
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