

# OFFICE SAFETY INSPECTION WORKSHEET

INSTRUCTIONS: Executive Order 12198 and AIMS GAM 13.04.08A mandate periodic inspections of workplaces to assure prompt correction of unsafe and unhealthy working conditions. The questions below are intended to help identify potentially hazardous conditions and practices. All NO answers require an explanation of corrective action to be taken on that item. If corrective action cannot be taken, explain why not. (Use additional sheets, if necessary.) If there are any items or conditions that are not listed which may cause injury or illness, list them under "OTHER". Where a question is not applicable to a workplace, check N.A.

ORGANIZATION: SSA

BUILDING - SPACE INSPECTED: Enid 788

ADDRESS: 2202 N Van Buren  
Enid, OK 73703

INSPECTION DATE: 10/21/2008

NAME AND PHONE NUMBER OF INSPECTOR(S):  
FOR MANAGEMENT: 580 237 4337  
Conrad C Black

FOR UNION: Antia Brooks

## A. EMERGENCY EGRESS

Please consult page 8, Informational Sheet, before the inspection is conducted.

ITEM INSPECTED	Please consult page 8, Informational Sheet, before the inspection is conducted.			COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
	YES	NO	N.A.	
1. Are there at least two separate ways (exits) to leave the work area or office?	X			
2. Are exits are remote as possible from each other so that employees do not have to travel more than 200 feet to an exit facility (300 feet if the building is completely sprinkler protected)?	X			
3. Are exit aisles maintained which meet the requirements shown on page 67	X			
4. Are exit aisles arranged in a clear, direct pattern and kept free of obstructions and impediments?	X			
5. Is emergency lighting provided in buildings where: - the building is 3 or more stories in height, or - the total building occupancy is 1000 or more, or - the occupancy is 100 or more people at levels above or below the ground exit level?	X			
6. Are all exits, other than ground level main entrances, identified with clearly visible, electrically illuminated exit signs?	X			
7. When the building is occupied, are all exits free of locks, chains and other fastening devices which could prevent free escape?	X			
8. Are exit stairways clean, free of storage, equipped with secure handrails and self-closing doors?			X	
9. Do all doors serving 50 or more people swing in the direction of exit travel?	X			
10. Has there been an employee evacuation drill (such as fire, earthquake, bomb threat, hurricane, tornado, flood or similar emergency) in the last 6 months? (If no, explain why not, and give date of last scheduled evacuation.)	X			10/27/2008
1. Have employees been instructed in fire emergency procedures, and how to report a fire?	X			
2. Are designated phones labeled with appropriate emergency numbers?	X			
3. Do all exits from the building discharge directly to the street, or to yard, court, or open space that gives access to a public way?	X			
4. Are all means of egress arranged so that it will not normally be necessary to pass through any high hazard area to reach an exit?	X			
5. Do all "EXIT" signs have arrows indicating the correct direction of egress, except where the direction of travel is immediately apparent?	X			
6. Have adequate accommodations been made to assure that handicapped employees can enter and exit safely?			X	
7. Does each handrail allow continuous sliding of hands on them?			X	
8. Other comments:				

## B. FIRE PROTECTION - PREVENTION

ITEM INSPECTED	YES	NO	N.A.	COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
1. Is a fire alarm system (manual-, sprinkler-, or detector-activated) provided in proper operating condition in buildings where: - the building is 3 or more stories in height, or - the total building occupancy is 1000 or more, or - the occupancy is 100 or more people at levels above or below the ground exit level?	X			
2. Have portable fire extinguishers been provided which meet the selection and placement criteria on page 7?	X			
3. Are additional extinguishers provided for separate areas used exclusively for computer operations, storage of flammable materials or reprographic operations?	X			
4. Are extinguishers properly charged, mounted, conspicuously marked, and free from obstruction and impediments?	X			
5. Are extinguishers inspected and tagged annually, and replaced by similar spares when taken for servicing?	X			
6. Are quantities of flammable materials such as toners, inks, solvents, alcohol, thinners, paints, etc. stored in closed metal cabinets? (not required for small daily maintenance quantities)	X			
7. Are hotplates, coffee pots, and similar electrical food and beverage preparation appliances inspected and strictly controlled to avoid unauthorized and indiscriminate use?	X			
8. Are there adequate disposal facilities for cigarettes, etc., in areas where smoking is still allowed?			X	No Smoking
9. Are on-off timers strictly prohibited on employee appliances?			X	
10. Are areas where flammable liquids are used well ventilated?	X			
11. Have employees been instructed or trained how to use fire extinguishers, and which type extinguisher to use in specific situations?	X			need refresher
12. Where an alarm system is in place, is it capable of being perceived above background noise or light levels?	X			
13. Have fire alarm pull boxes been inspected, and are they and other appropriate fire emergency equipment free from obstruction and impediments?	X			
14. Are all flammable material containers clearly marked as to their contents?	X			
15. Other comments:				

# C. ELECTRICAL

ITEM INSPECTED	YES	NO	N.A.	COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
1. Are all 3-prong electrical plugs connected to grounded 3-hole receptacles? (NOTE: If building system does not have 3-hole receptacles, any adapters used must be checked upon installation for adequate grounding by a competent electrician.)	X			
2. Are refrigerators, water coolers, portable electrical tools, and other appliances or machines positioned away from radiators or water pipes or, if used in damp-wet locations, grounded?	X			
3. Is the use of employee-owned appliances strictly controlled with routine spot checks, and are appliances turned off at the end of each workday?		X	X	
4. Are locations of cut-off switches to machines and equipment known to employees who use them regularly?	X			
5. Are the visible wires, cords and plugs of all electrical equipment, tools, and appliances in good condition? (not frayed, cracked or broken, or prongs missing.)	X			
6. Are extension cords prohibited, except where issued by SSA for work-related equipment?			X	
7. Are the SSA-issued extension cords in good condition, do not pose a tripping hazard, and used only where fixed outlets cannot be installed?			X	
8. Do all employee-owned appliances bear the approval mark of Underwriters Lab (UL) or other recognized testing agency?			X	
9. Are repairs to electrical equipment and appliances made by competent personnel?	X			
10. Are guards provided for exposed electrical or moving parts of machinery, equipment, or appliances?			X	
11. Are all electrical receptacles (wall & floor) in good condition with face plates securely fastened?	X			
12. Are all wires and cables securely fastened and not hanging from the wall or ceiling in an unsafe manner?	X			
13. Have the portable electric tools been inspected and tested during the last 6 months?			X	
14. Are clearly visible electric wires and cables placed in such a way as not to cause future damage?	X			
15. Are SSA-issued extension cords free of splices or tape and do they not exceed 8 feet in length?			X	
16. Other comments:				

### D. GENERAL OFFICE SAFETY

ITEM INSPECTED	YES	NO	N.A.	COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
1. Are all light and other ceiling fixtures securely attached?	X			
2. Are work space partitions adequately secured, standing straight and not infringing on adequate aisle space?	X			
3. Are furniture and equipment in good condition and safe to use? (Free of splintered or jagged edges, etc.)	X			
4. Are furniture and equipment so arranged that they do not infringe on adequate aisle space?	X			
5. Are file cabinets and shelves properly loaded (from the bottom first) to prevent tipping over?	X			
6. Is inappropriate storage of materials avoided atop cabinets, bookcases and window sills?	X			
7. Are aisles and pedestrian walkways free of electrical and telephone receptacles, cords, loose carpets, floor tiles, or any other uneven surface that may pose as a tripping or falling hazard?	X			
8. Are floors clean, dry, non-slippery and free of trash?	X			
9. Are adequate storage areas provided for materials and supplies?	X			
10. Are materials piled in an orderly manner, not extending into aisles and kept to a safe height?	X			
11. Are all fans properly guarded with mesh openings of less than 1/2 inch?	X			
12. Are workplace/equipment noise levels kept at an acceptable level?	X			
13. Is door hardware in good working order?	X			
14. Are aisles kept free of storage?	X			
15. Are individual trash cans kept out of aisles to prevent tripping?	X			
16. Is adequate lighting provided?	X			
17. Is adequate ventilation provided?	X			
18. Are room and location finders in plain view and easily recognizable?	X			
19. Is there a stepstool or ladder so objects can be reached safely?	X			
20. Where headsets are provided, are clean headsets available for employees?	X			
21. Are floor and wall heating and air-conditioning units covered?	X			
22. Are all windows free of breakage, cracks, etc.?	X			
23. Has there been any violation cited since the last inspection? If so, has corrective action been taken? If not, why?	X			
24. Are video display terminals maintained in a clean and proper manner?	X			
25. Where there are employees trained in CPR, are they certified, and are names posted in the facility?	X			
26. Other comments:				

### E. HOUSEKEEPING - SANITATION

ITEM INSPECTED	YES	NO	N.A.	COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
1. Has a routine cleaning schedule been established and adhered to?	X			
2. Are approved trash receptacles used and emptied daily?	X			
3. Are trash receptacles and cans maintained in a sanitary condition?	X			
4. Are there suitable toilet and washing facilities and supplies, and are they maintained in a sanitary condition?	X			
5. Are vending areas maintained in a sanitary condition?	X			
6. Are personal use cooking and coffee pot areas maintained properly and routinely checked?	X			
7. Are eating/work/multipurpose areas maintained in a sanitary condition?	X			
8. Are microwave ovens, refrigerators, etc. checked routinely for cleanliness and proper operations?	X			
9. Are the work and food areas free from pests and rodents?	X			
10. Are cleansers and rags available to employees for cleaning desktops, chairs, terminals, etc.?	X			
11. Are water fountains and coolers maintained in a sanitary and proper way?	X			
12. Other comments:				

### F. SPECIAL INSPECTION AREAS (Check N.A. if not applicable to your worksite)

ITEM INSPECTED	YES	NO	N.A.	COMMENTS/CORRECTIVE ACTION/DATE CORRECTIVE ACTION TAKEN
1. Are outdoor walking surfaces (sidewalks, steps, parking areas, etc.) free of holes, cracks or other hazards which could cause falls?				
2. Are snow and ice removed from outdoor walking surfaces in a timely manner?				
3. Does building management have a regular inspection schedule for elevators, fire protection and alarm systems, boiler rooms, electrical utility areas, etc. by competent technicians?				
4. Is personal protective equipment (e.g., safety shoes, safety glasses, face shields, gloves, aprons, etc.) provided and required to be worn where such protection is obviously needed?				
5. Other comments:				

Certification of Required Inspection

The Department of Labor, OSHA requires all Federal agencies to conduct occupational health and safety inspections of their workplaces at least annually. Inspections of all SSA-occupied space using form SSA-5510-BK, Office Safety Inspection Worksheet are required to be conducted semiannually. For large facilities such as SSA headquarters, PSCs and the Wilkes-Barre DOC, the second inspection will be a followup inspection conducted within 90 days of the first inspection. Reference AIMS GAM 13.04.08 and applicable union-management agreements for further information.

Completion of form SSA-5510-BK is permitted electronically or manually. If completed electronically, this certification by the Office Manager must be attached to the electronic SSA-5510-BK. The certification is necessary to ensure that a walkthrough inspection of the workplace has been conducted on the date specified, and that each item on the form checklist has been observed to determine whether it is in compliance or noncompliance with occupational health and safety requirements. Completion of the SSA-5510-BK form in electronic form is not acceptable unless preceded by the walkthrough inspection.

**Knowingly falsifying this document may result in an OSHA citation.**

I certify that the attached electronic form SSA-5510-BK was completed after a walkthrough inspection of the workplace on the date specified on the form, and that all form entries reflect workplace conditions observed on that date. To the best of my knowledge, all information entered on the form is true, accurate and complete.

Richard C Black  
SSA Office Manager

D.M.  
Title

580 242-1272  
Phone

10/27/2008  
Date

Attachment F. Sample Emergency Evacuation Report

Evacuation Report

The Occupant Emergency Coordinator (OEC) or designee for each facility completes the following evacuation report. Reports should be filed locally or as otherwise directed. In headquarters' facilities, a copy should be forwarded to the Chief, OEC, 1-M-25 Operations or faxed to 410-965-8057 within 3 days of the occurrence.

1. Evacuation Date: 10/27/2006 Start/Completion Times: 08:35 - 08:36

2. Number of employees evacuated: 12

3. Was evacuation orderly? yes If not, explain.

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4. Could alarms or evacuation order be heard? yes If not, explain.

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5. Identify problems (other than those identified in 3 and 4 above) encountered in the evacuation and the corrective action taken to improve life safety.

none -  
richard c black  
10/27/08

