

Sort Order	Checklist Question	Findings Template	Corrective Action Template	Days To Correct
<b>Documentation</b>				
<b>1</b>	<b><i>Is a "Laboratory Information Door Sign" completed and legible with up to date information and posted outside the lab?</i></b>			<b>30</b>
	Laboratory Information Sign is not posted or is not up to date	Replace with updated sign		
<b>2</b>	<b><i>Are special hazard signs in place (e.g. lasers, biohazards, radioactive, etc.)?</i></b>			<b>30</b>
	Special hazard signs/labels are not in place	Post signs as appropriate (fill in details)		
<b>3</b>	<b><i>A Unit Specific Plan is present in the lab.</i></b>			<b>30</b>
	A Unit Specific Plan is not present in the laboratory.	Complete the Unit Specific Plan. A copy of the Unit Specific Plan must be printed and available in a safety binder.  <a href="https://ehs.psu.edu/sites/ehs/files/certificationofagreementpage.docx">https://ehs.psu.edu/sites/ehs/files/certificationofagreementpage.docx</a>		
<b>4</b>	<b><i>The Unit Specific Plan has been reviewed within the past year by all members of the lab.</i></b>			<b>30</b>
	The plan has not been reviewed in the past year. Some members of the laboratory have not reviewed the plan in the past year.	Review the Unit Specific Plan and ensure the information is up to date. Ensure all members of the laboratory have signed the certification of agreement page after reviewing the Unit Specific Plan.  <a href="https://ehs.psu.edu/sites/ehs/files/certificationofagreementpage.docx">https://ehs.psu.edu/sites/ehs/files/certificationofagreementpage.docx</a>		
<b>5</b>	<b><i>Are standard operating procedures (SOPs) and/or risk assessments created and available for hazardous operations?</i></b>			<b>30</b>
	SOP's are not present.	Develop SOP's for all hazardous processes, equipment and chemicals <a href="https://ehs.psu.edu/sops">https://ehs.psu.edu/sops</a>		
<b>6</b>	<b><i>The annual Laboratory Safety Self-Inspection has been completed for the current year.</i></b>			<b>30</b>
	Self Inspection not completed	Complete Annual Self Inspection Form <a href="https://ehs.psu.edu/sites/ehs/files/lab_self_inspection_2022_-_form-fillable.pdf">https://ehs.psu.edu/sites/ehs/files/lab_self_inspection_2022_-_form-fillable.pdf</a>		
<b>7</b>	<b><i>All deficiencies have been rectified from the Laboratory Safety Self-Inspection.</i></b>			<b>30</b>
	Deficiencies have not been addressed	Address all noted deficiencies		
<b>Laboratory and Research Safety</b>				
<b>8</b>	<b><i>Lab equipment is operating, inspected and managed properly?</i></b>			<b>30</b>
	Equipment is not operating, inspected and/or managed properly (NOTE SPECIFIC DEFICIENCY i.e. safety shower, eyewash, fume hood, etc.)	Ensure all equipment is operating, inspected and/or managed properly (NOTE SPECIFIC CORRECTIVE ACTION)		

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<b>Training</b>			
<b>9</b>	<b><i>Have all relevant online EHS trainings been completed by all personnel?</i></b>		<b>30</b>
	Not all relevant trainings have been completed.	All relevant trainings must be completed: <a href="https://ehs.psu.edu/training/">https://ehs.psu.edu/training/</a>	
<b>10</b>	<b><i>Online trainings are supplemented with lab-specific training that is pertinent to the tasks and materials that will be handled. Laboratory-specific training is revisited when there are new tasks or procedures, modifications to existing ones, or additions</i></b>		<b>30</b>
	Lab specific training is not provided.; Lab specific training is not pertinent to the tasks and materials handled.; Lab specific training is insufficient for the tasks and materials handled.; Lab specific training has not been updated for new tasks or procedures, modifications to existing ones, or additions of new hazardous materials.	Develop and provide lab specific training that is pertinent to the hazardous materials that will be handled.; Update lab specific training to be pertinent to the hazardous materials that will be handled.	
<b>Chemical Safety and Storage</b>			
<b>11</b>	<b><i>Someone has reviewed and updated the chemical inventory this past year.</i></b>		<b>30</b>
	Chemical inventory not updated	Update chemical inventory in system: <a href="https://ehs.psu.edu/chemical-inventory-management/overview">https://ehs.psu.edu/chemical-inventory-management/overview</a>	
<b>12</b>	<b><i>Chemical inventory is kept to a minimum.</i></b>		<b>30</b>
	Chemical inventory not kept to a minimum.	Minimize chemical inventory (remove expired, unwanted/unused chemicals)	
<b>13</b>	<b><i>Chemicals are segregated/stored properly.</i></b>		<b>30</b>
	Chemical containers are not properly segregated/stored (add specifications for clarity)	Segregate and store chemical containers properly. Consult LRSP section 7.5 for guidance.	
<b>14</b>	<b><i>Chemicals are labeled (including non-original containers) properly.</i></b>		<b>30</b>
	Chemical containers are not properly labeled (add specifications for clarity)	Label chemical containers properly with chemical name and hazard(s). Consult LRSP section 7.2.2 for guidance.	

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<b>Personal Protective Equipment</b>			
15	<b><i>The appropriate PPE is available and worn as required for the anticipated hazards in the lab.</i></b>  Appropriate PPE is not worn while working with hazardous materials (e.g., biological, chemical or radiological).	Perform a hazard assessment to determine what type of protective PPE is appropriate for the materials handled and associated procedures.; Purchase PPE in sizes appropriate for personnel.; Train personnel to wear appropriate PPE while working with hazardous materials. Consult the LRSP for guidance.	30
<b>Waste</b>			
16	<b><i>Chemical waste is managed properly (i.e. segregated, labeled, secondary containment, inspected weekly, etc.)</i></b>  Waste not being managed properly - not labeled, dated, capped, leaking, segregated and stored properly (PROVIDE SPECIFIC NONCOMPLIANCE DETAILS HERE)	Chemical waste must be properly labeled, capped, segregated, in secondary containment, less than a year old, and not leaking.	30
17	<b><i>Biological waste is managed properly.</i></b>  Waste not being managed properly - in wrong bags, leaking, not autoclaved (PROVIDE SPECIFIC NONCOMPLIANCE DETAILS HERE)	Biological waste must be in appropriate (orange or red-orange with biohazard symbol) labs, autoclaved if appropriate; not leaking; not stinking; and less than 90 days old;	30
<b>Means of Egress</b>			
18	<b><i>Clear paths of egress are maintained (i.e. exit access and discharge also public corridors and hallways).</i></b>  Clear paths of egress are blocked obstructing egress in the event of an emergency.	Remove obstructions to facilitate egress in the event of an emergency.	1
<b>Fire Prevention and Protection</b>			
19	<b><i>Ceiling surface is intact with no missing tiles or other unprotected openings.</i></b>  Openings in the ceiling are present which can allow smoke movement to other portions of the building and affect fire detection and fire suppression system response.	At University Park, contact Office of Physical Plant to replace damaged / missing ceiling tiles or openings.  At CWC, contact maintenance department to replace damaged / missing ceiling tiles or openings.	30

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<b>Fire Alarm Systems</b>				
<b>20</b>	<b><i>Fire alarm audible and visual notification devices are clear of obstructions.</i></b>			<b>7</b>
	Notification devices are obstructed.		Remove obstructions to provide visibility of notification device.	
<b>Fire Suppression Systems</b>				
<b>21</b>	<b><i>A minimum of 18 inches of clearance is provided below sprinkler heads to materials throughout the space.</i></b>			<b>30</b>
	18" clearance between sprinkler head and materials is not provided.		Relocate materials to provide 18" clearance.	
<b>Portable Fire Extinguishers</b>				
<b>22</b>	<b><i>Fire extinguishers are visible, unobstructed, inspected, and in good condition.</i></b>			<b>30</b>
	Fire extinguisher is not visible, unobstructed, inspected, in good condition, mounted on the wall or located in approved cabinet; missing or outdated inspection tag;		Move items blocking extinguisher; have fire extinguisher mounted to wall or in cabinet; have fire extinguisher serviced; have fire extinguisher inspected;	
<b>Electrical Safety</b>				
<b>23</b>	<b><i>Electrical equipment working clearance is maintained, and electrical disconnects are readily accessible.</i></b>			<b>1</b>
	Required clear working / floor space is not provided at electrical panel.		Remove obstructions to provide clear access to electrical panel.	
<b>24</b>	<b><i>Flexible electrical cords are in good condition and used properly.</i></b>			<b>30</b>
	Electrical extension cords are: not in good condition; daisy-chained; used as a permanent means of wiring; extend through wall and ceiling penetrations or through doorways.		Discard and replace damaged cords with UL-listed cords; Eliminate use of daisy-chained cords; Eliminate use of extension cord as permanent wiring; Install an approved electrical circuit with outlet; Relocate equipment to a location near an existing electrical outlet. See LRSP section 6.8 for guidance.	
<b>25</b>	<b><i>Electrical equipment and devices are in safe working order, good condition, and used properly.</i></b>			<b>30</b>
	1. Outlets and switches are damaged. 2. Coverplate is lacking.		1. Repair / replace the damaged items. 2. Replace missing coverplate.	

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<b>Fire Safety</b>			
26	<p><b><i>Clearance to combustible materials is provided where open flame devices (bunsen burners etc.) or other heat-producing equipment are used.</i></b></p> <p>Combustible materials are located in close proximity to open flame device.</p>	<p>Remove combustible material; Relocate open flame/heat producing device. See LRSP section 6.9 for guidance.</p>	1
<b>Hazardous Building Materials</b>			
27	<p><b><i>Building materials are not damaged (no broken or loose floor tile, insulation, wet/damaged wall or ceiling materials, large sections of loose/flaking paint, etc.)</i></b></p> <p>Building materials are damaged (broken or loose floor tile, insulation, wet/damaged wall or ceiling materials, large sections of loose/flaking paint, etc.)</p>	<p>Report to Campus Maintenance, Report damaged suspect hazardous building materials to EHS.</p>	30
<b>Compressed Gases</b>			
28	<p><b><i>Are compressed gas cylinders stored and managed properly and in good condition?</i></b></p> <p>Compressed gas cylinders are not managed properly (not chained/secured upright, not capped, not minimized, not labeled, connections, regulators and tubing not in good condition, cylinders not separated from incompatibles, etc.</p>	<p>Compressed gas cylinders must be chained/secured upright, capped, inventory minimized, labeled, and separated from incompatible materials; connections, regulators and tubing must be in good condition</p>	30
<b>EHS Administration</b>			
29	<p><b><i>General Comments or Other Deficiencies</i></b></p> <p>Insert notes and comments as appropriate.</p>	<p>As appropriate use "FINDINGS" module to create and assign additional finding to responsible person(s) from the Inspection Question Library. Then add cross-reference to the Finding IDs to this Assessment.</p>	30