

PUBLIC ALLIANCE INSURANCE FUND WASTE WATER TREATMENT DEPARTMENT INSPECTION CHECKLIST

This checklist-type inspection form is considered by no means to be complete. It is intended to be revised as member input is received. This form has been developed for use by members of the Public Alliance Insurance Fund.

For those fire districts that do not have all of the sections included here, they can simply discard those sections and use only what applies to them. Should any exposures have been omitted, the Safety and Education Committee of the Public Alliance Insurance Fund and SelecTech would appreciate it being called to their attention.

All hazards can produce accidents that result in injury and should be corrected whenever detected. It is impossible to determine in advance what the consequences (injury severity) will be for particular hazards. Too many factors are involved. However, a general guide is presented here to try and help you determine those hazards that must be dealt with immediately and those that may enjoy less priority.

- “A”** Is a serious exposure that will, if left as is, produce a serious injury/illness and should be corrected immediately.
- “B”** Is a moderate exposure that can produce an injury/illness and should be addressed as quickly as possible.

All other deficiencies/hazards not included in this checklist should be corrected when they are uncovered. However, priorities must be set so this rating system is designed to help you determine what should be done first.

Version 1: 2/07/03

WASTE WATER TREATMENT DEPARTMENT

SELF INSPECTION LIST

ENTITY _____

DATE: _____

DEPARTMENT OR FACILITY _____

SECTION COMPLETED BY: _____

SECTION I HAZARDOUS ATMOSPHERIC EXPOSURES	<u>RATING</u>	<u>YES</u>	<u>NO</u>	<u>N/A</u>
Is the Hazardous Communications/Right To Know programs current and in place?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a program in place and staff trained in emergency spills procedures?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there an audible leak alarm provided in the chlorination & chlorine storage areas?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a full confined space entry program with required training and equipment in place?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there periodic training of the staff in emergency procedures including drills with local emergency agencies?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is emergency response equipment available and regularly serviced?	B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are emergency showers and eyewash stations fully functional with free access?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the emergency generator periodically tested and at least once a year tested under load?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the ventilation equipment fully functional?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In those areas where toxic/flammable gases may accumulate are there sensors to alert their presence?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In those areas where toxic/flammable gases may be present is there explosion proof electrical wiring in place for hazardous atmospheres?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION II PERSONAL PROTECTIVE EQUIPMENT	<u>RATING</u>	<u>YES</u>	<u>NO</u>	<u>N/A</u>
Are there hardhats provided for employees who are working in an area where head injuries can occur?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing protection provided & used where needed?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there proper respirators available and is there a respirator program in place?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Where danger from any corrosives exist, is there adequate personal protective equipment available?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a lockout/tagout program in place?	A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>