

Premier Cleaning Audit

Construction

CLEANING AND EQUIPMENT

Is all equipment stored safely when not being used?

☐ Yes☐ No☐ Na

Is all material and equipment used in a safe manner?

☐ Yes☐ No☐ Na

Are nonslip shoes being used when working?

☐ Yes☐ No☐ Na

Are nonslip shoes in good condition?

☐ Yes☐ No☐ Na

Is all work completed in a safe manner?

☐ Yes☐ No☐ Na

Are appropriate gloves being worn?

☐ Yes☐ No☐ Na

Are the gloves in good condition?

☐ Yes☐ No☐ Na

Is the waste material disposed of properly?

☐ Yes☐ No☐ Na

ELECTRICAL

Is electrical equipment unplugged and stored away when not in use?

☐ Yes☐ No☐ Na

Do portable equipment have PAT test tags?

☐ Yes☐ No☐ Na

Are all cables safe during equipment use?

☐ Yes☐ No☐ Na

Are there any tripping hazards due to cables?

☐ Yes☐ No☐ Na

GENERAL

Name

textarea

Is a COSHH folder available?

☐ Yes☐ No☐ Na

Does the operative have an ID?

☐ Yes☐ No☐ Na

Are all items visible in the COSHH folder?

Yes

No

Na

Are items available in the store cupboard?

Yes

No

Na

Are all items stored in their original containers?

Yes

No

Na

Are MSDS sheets available for all products?

Yes

No

Na

Are the sheets updated?

Yes

No

Na

Are RAMS for the task carried out regularly?

Yes

No

Na

Are there any containers with liquids that are not marked or labeled?

Yes

No

Na

HOUSEKEEPING

Are all work areas clean and safe?

Yes

No

Na

Are entrance and exit clear and free from obstruction?

Yes

No

Na

Are fire doors kept closed?

Yes

No

Na

Is there appropriate signage in place?

Yes

No

Na

Is the signage visible to all?

Yes

No

Na

Are all cupboards kept locked when not in use?

Yes

No

Na

Are all materials stored safely?

Yes

No

Na

OTHER

Are site inductions carried out when needed

Yes

No

Na

Is an updated first aid kit available?

Yes

No

Na

Is the first aid kit stocked up?

Yes

No

Na

Is a buddy system in place?

Yes

No

Na

Is the first aid kit accessible to all?

Yes

No

Na

Additional comments

textarea

Name of auditor

textarea

Signature of auditor

SIGNATURE

Date completed

DATE

2017-01-01

PPE

Are all workers wearing adequate PPE?

Yes

No

Na

IS all PPE in good condition?

Yes

No

Na

Are COVID-19 measures being followed?

Yes

No

Na

Are all employees wearing masks?

Yes

No

Na

Does the site have adequate sanitizers and spare masks?

Yes

No

Na