



Loss Prevention Topic



School Safety Checklist

Building _____ Date _____ Inspector _____

| I. Entrance | Yes | No | Action to be taken |
|---|--------------------------|--------------------------|---------------------------|
| 1. Lighting adequate with no shadows | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. All exit lights working | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. Inclement weather protection (mats, wet floor signs available, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Threshold plates secure | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Handrails secure | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Safety glass in doors | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Free of obstructions | <input type="checkbox"/> | <input type="checkbox"/> | |

| II. Stairs and Hallways | | | |
|--|--------------------------|--------------------------|--|
| 8. Housekeeping adequate | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Lighting adequate | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Treads in good repair - nonskid | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Landings free of obstacles | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. Ramps with non skid surface | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13. Hallways free of obstacles | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Lockers secure and in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. Handrails in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |

School Safety Checklist - continued

| III. Classrooms | Yes | No | Action to be taken |
|---|--------------------------|--------------------------|---------------------------|
| 16. Housekeeping adequate | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. Desks, chairs, tables in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. Floor in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. Electrical hazards controlled (extension cords, proper grounding, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. Adequate aisle space for quick exit | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21. Equipment secured and in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |

| IV. Shops | | | |
|---|--------------------------|--------------------------|--|
| 22. Tools in good condition - stored | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. Machines guarded – good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. Proper storage of flammable liquids | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. Ladders provided where necessary | <input type="checkbox"/> | <input type="checkbox"/> | |
| 26. Heavy items on floor or bottom shelf | <input type="checkbox"/> | <input type="checkbox"/> | |
| 27. Shelves adequate for load - secured | <input type="checkbox"/> | <input type="checkbox"/> | |
| 28. Personal Protective Equipment provided and utilized | <input type="checkbox"/> | <input type="checkbox"/> | |
| 29. Housekeeping adequate | <input type="checkbox"/> | <input type="checkbox"/> | |
| 30. Safety zones marked by or near machines | <input type="checkbox"/> | <input type="checkbox"/> | |
| 31. Electrical equipment grounded and in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32. Switches on machines in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 33. Adequate space for operation | <input type="checkbox"/> | <input type="checkbox"/> | |
| 34. Equipment secured to floor | <input type="checkbox"/> | <input type="checkbox"/> | |
| 35. Welding curtains in welding area | <input type="checkbox"/> | <input type="checkbox"/> | |
| 36. Shop adequately ventilated | <input type="checkbox"/> | <input type="checkbox"/> | |
| 37. Proper ventilation of toxic vapors | <input type="checkbox"/> | <input type="checkbox"/> | |
| 38. Personal items removed before operating equipment | <input type="checkbox"/> | <input type="checkbox"/> | |

School Safety Checklist - continued

| V. Labs and lab storerooms | Yes | No | Action to be taken |
|--|--------------------------|--------------------------|---------------------------|
| 39. Amount of chemicals and glassware kept to a minimum in work area | <input type="checkbox"/> | <input type="checkbox"/> | |
| 40. Housekeeping satisfactory | <input type="checkbox"/> | <input type="checkbox"/> | |
| 41. All electrical equipment grounded | <input type="checkbox"/> | <input type="checkbox"/> | |
| 42. Eye protection provided and worn | <input type="checkbox"/> | <input type="checkbox"/> | |
| 43. Heavy items on lower shelves | <input type="checkbox"/> | <input type="checkbox"/> | |
| 44. Chemicals kept at a sufficient operating level, not overstocked | <input type="checkbox"/> | <input type="checkbox"/> | |
| 45. Acids stored on bottom shelves or in acid storage cabinets | <input type="checkbox"/> | <input type="checkbox"/> | |
| 46. Areas available for working other than in stock rooms | <input type="checkbox"/> | <input type="checkbox"/> | |
| 47. Shelves attached to walls | <input type="checkbox"/> | <input type="checkbox"/> | |
| 48. Ventilation adequate for work | <input type="checkbox"/> | <input type="checkbox"/> | |
| 49. Electrical/gas control sources properly identified and secure | <input type="checkbox"/> | <input type="checkbox"/> | |

| VI. Gym/Locker Room Areas | | | |
|--|--------------------------|--------------------------|--|
| 50. Lockers in good condition/secure | <input type="checkbox"/> | <input type="checkbox"/> | |
| 51. Gym equipment in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 52. Bleachers in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 53. Shower floors clean | <input type="checkbox"/> | <input type="checkbox"/> | |
| 54. Stairs/handrails in good repair/secure | <input type="checkbox"/> | <input type="checkbox"/> | |
| 55. Housekeeping adequate | <input type="checkbox"/> | <input type="checkbox"/> | |
| 56. Supplies properly stored/secured | <input type="checkbox"/> | <input type="checkbox"/> | |
| 57. Shower controls working properly | <input type="checkbox"/> | <input type="checkbox"/> | |
| 58. Adequate first aid supplies | <input type="checkbox"/> | <input type="checkbox"/> | |

School Safety Checklist – continued

| VII. Playground Equipment and Parking Lot Areas | Yes | No | Action to be taken |
|---|--------------------------|--------------------------|---------------------------|
| 59. Playground equipment in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 60. Parking lot lights working | <input type="checkbox"/> | <input type="checkbox"/> | |
| 61. Adequate traffic control on school grounds with parking lanes properly marked | <input type="checkbox"/> | <input type="checkbox"/> | |
| 62. Sidewalks in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 63. Guardrails where needed | <input type="checkbox"/> | <input type="checkbox"/> | |
| 64. Parking lot surface in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 65. Grounds in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 66. Trees, shrubs, etc. trimmed | <input type="checkbox"/> | <input type="checkbox"/> | |
| 67. Fence in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 68. Entrance cables in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 69. Stadium bleacher and fields in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 70. Tennis courts in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 71. Adequate ground erosion measures | <input type="checkbox"/> | <input type="checkbox"/> | |
| 72. Stadium score boards in good condition and covered in off season | <input type="checkbox"/> | <input type="checkbox"/> | |
| 73. Playground game lanes marked | <input type="checkbox"/> | <input type="checkbox"/> | |
| 74. Adequate mowing of grounds | <input type="checkbox"/> | <input type="checkbox"/> | |
| 75. Grounds free of debris, glass, dried grass, leaves, weeds, tree limbs, etc. | <input type="checkbox"/> | <input type="checkbox"/> | |

| VIII. Miscellaneous | | | |
|--|--------------------------|--------------------------|--|
| 76. Folding doors/gates in good repair | <input type="checkbox"/> | <input type="checkbox"/> | |
| 77. Door closures operating properly | <input type="checkbox"/> | <input type="checkbox"/> | |
| 78. Stage areas in good condition | <input type="checkbox"/> | <input type="checkbox"/> | |
| 79. Adequate first aid equipment | <input type="checkbox"/> | <input type="checkbox"/> | |

School Safety Checklist - continued

| VIII. Miscellaneous-continued | Yes | No | Action to be taken |
|--|--------------------------|--------------------------|--------------------|
| 80. Elevator working properly/inspected | <input type="checkbox"/> | <input type="checkbox"/> | |
| 81. Electrical outlets, breaker boxes, wires, equipment secured and grounded | <input type="checkbox"/> | <input type="checkbox"/> | |
| 82. Custodial closets and storage areas clean | <input type="checkbox"/> | <input type="checkbox"/> | |
| 83. Adequate housekeeping in cafeteria | <input type="checkbox"/> | <input type="checkbox"/> | |
| 84. Slip resistant mats in dishwashing areas. | <input type="checkbox"/> | <input type="checkbox"/> | |
| 85. Nurses office properly equipped | <input type="checkbox"/> | <input type="checkbox"/> | |
| 86. Fire alarm system operating | <input type="checkbox"/> | <input type="checkbox"/> | |
| 87. Current inspection on all fire extinguishers | <input type="checkbox"/> | <input type="checkbox"/> | |
| 88. All flammables properly stored | <input type="checkbox"/> | <input type="checkbox"/> | |
| 89. Plans for drills and emergencies | <input type="checkbox"/> | <input type="checkbox"/> | |
| 90. Is the building structurally safe | <input type="checkbox"/> | <input type="checkbox"/> | |
| 91. Building security system working | <input type="checkbox"/> | <input type="checkbox"/> | |
| 92. Heating and air condition system in good condition and inspected | <input type="checkbox"/> | <input type="checkbox"/> | |
| 93. Power rooms secured and without hazards | <input type="checkbox"/> | <input type="checkbox"/> | |
| 94. Boiler rooms, power rooms, etc. not being used for storage | <input type="checkbox"/> | <input type="checkbox"/> | |
| 95. Asbestos control program | <input type="checkbox"/> | <input type="checkbox"/> | |

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