

# General Laboratory Inspection Checklist

This inspection checklist is provided by the University of Auckland’s Health, Safety and Wellbeing Service as a template for assessing University laboratories. Users may need to amend it to fully address the specific requirements of the area that is being inspected.

If you cannot answer a question, have any queries or require further advice contact your Health, Safety and Wellbeing Manager before proceeding. Once completed, this inspection form should be made readily available to all staff/students within the area/s.

*Note: If using the form for a suite of laboratories, please indicate the room number where there is an issue.*

	AREA INSPECTED:					
	INSPECTION DATE:					
	INSPECTION TEAM:					
1	MANAGEMENT PROCEDURES AND ADMINISTRATION	Comments / Action required (Identify specific room number / location)				
1.1	Policy. Are copies of the following documents readily accessible to staff and students? (a) the University Health, Safety and Wellbeing Policy and associated guidance (b) The school/service’s health, safety and wellbeing documents/rules/procedures?	Yes	No	Partial	N/A	
1.2	Evaluation. Is there evidence of previously conducted safety surveys or regular safety checks?	Yes	No	Partial	N/A	
1.3	Follow up. Have all actions from previous inspections and audits been completed? If no, add details at the end of this checklist.	Yes	No	Partial	N/A	
1.4	Hazards and Risk. Where required, is access to work areas restricted to authorised people only?	Yes	No	Partial	N/A	
1.5	Hazards and Risk. Have approved risk assessments been carried out within the last three years?	Yes	No	Partial	N/A	
1.6	Hazards and Risk. Are copies of the current risk assessments and relevant safety documentation readily accessible to those people exposed to hazards?	Yes	No	Partial	N/A	
1.7	Hazards and Risk. Is everyone working or studying in the area familiar with those Risk Assessments?	Yes	No	Partial	N/A	

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1.8	Information. Is induction, awareness training and supervision (particularly for chemical, biological and radiological work, and work involving class 3B and 4 lasers) being provided?	Yes	No	Partial	N/A	
1.9	Information. Are staff and students informed of any required safe methods of work, for example SOPs, SMOUs?	Yes	No	Partial	N/A	
1.10	If necessary due to the presence of allergens, sensitisers and other hazards (magnetic fields etc.), are pre-employment, student induction and pre-entry checks made? See also 1.11 and 1.12 below.	Yes	No	Partial	N/A	
1.11	Information. Are procedures in place for the safe management of authorised visitors?	Yes	No	Partial	N/A	
1.12	Information. Are procedures in place for the safe management of faculty commissioned contractors?	Yes	No	Partial	N/A	
1.13	Supervision. Are Laboratory Managers/Supervisors aware of their responsibilities as per the University Health, Safety and Wellbeing Policy?	Yes	No	Partial	N/A	
1.14	Supervision. Are procedures in place to safeguard lone workers and/or people conducting work outside of normal working hours?	Yes	No	Partial	N/A	
1.15	Supervision. Are procedures in place to control apparatus and/or experiments running overnight and/or at weekends?	Yes	No	Partial	N/A	
1.16	Incident Reporting. Are procedures in place for reporting incidents such as accidents, near misses, spills of hazardous substances and instances of occupational health-related illness?	Yes	No	Partial	N/A	
1.17	Incident Reporting. Is there evidence of the reporting of incidents such as accidents, near misses, spills of hazardous substances and instances of occupational health-related illness (Damstra records or an accident register)?	Yes	No	Partial	N/A	
1.18	Incident Reporting. Is there evidence that incidents have been properly investigated and that arising recommendations have been implemented?	Yes	No	Partial	N/A	

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1.19	Emergency Planning. Is there an emergency response plan that caters for likely emergencies such as fire, earthquakes and bomb threats, and specific laboratory emergencies such as large spills and exposure to hazardous materials?	Yes	No	Partial	N/A	
1.20	Emergency Planning. Is the location of all hazardous substance storage areas clearly marked on the emergency response plan?	Yes	No	Partial	N/A	
1.21	Legal Requirements. Has the laboratory or laboratory suite been designated as a Containment Laboratory for pathogen and/or genetic modification work? If so, additional specific risk assessments are to be carried out	Yes	No	Partial	N/A	
1.22	Legal Requirements. Where necessary, has occupational health monitoring of staff and students been implemented via the University's referral process?	Yes	No	Partial	N/A	
1.23	Legal Requirements. Has the laboratory or laboratory suite been designated as a irradiation facility or radioactive lab? If so, additional specific risk assessments are to be carried out	Yes	No	Partial	N/A	
1.24	Legal Requirements. Has a laboratory manager been designated for the laboratory (or part of)?	Yes	No	Partial	N/A	
2	<b>HIGH PROFILE SIGNAGE</b>					Comments / Action required (Identify specific room number / location)
2.1	Is a hazardous substance summary and, if applicable, mandatory hazard pictograms or level of containment displayed on the exterior of laboratory access doors?	Yes	No	Partial	N/A	
2.2	Where necessary, are hazard warnings marked on floors – e.g. Tesla lines – or walls near the hazard	Yes	No	Partial	N/A	
2.3	Is emergency instruction signage in place?	Yes	No	Partial	N/A	
2.4	Are fire exits clearly identified?	Yes	No	Partial	N/A	
2.5	Are evacuation instructions clearly displayed?	Yes	No	Partial	N/A	
2.6	Are emergency contact numbers clearly displayed?	Yes	No	Partial	N/A	

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2.7	Are the locations of fire extinguishers, first aid kits, eye wash stations, and spill kits clearly identified?	Yes	No	Partial	N/A	
3	<b>FIRE SAFETY</b>					Comments / Action required (Identify specific room number / location)
3.1	Are fire exits able to be opened without keys or combinations?	Yes	No	Partial	N/A	
3.2	Are fire exits clear of obstructions?	Yes	No	Partial	N/A	
3.3	Are all smoke and fire doors kept closed when not in use? (except doors on magnetic catches linked to the fire alarm system)	Yes	No	Partial	N/A	
3.4	Are potential ignition sources eliminated or minimised?	Yes	No	Partial	N/A	
3.5	Do staff and students know what to do in the event of a fire?	Yes	No	Partial	N/A	
3.6	Have personal evacuation plans been developed for any person with disabilities (permanently or temporarily impairing ability to evacuate the building) who are regularly in the area (staff or students)?	Yes	No	Partial	N/A	
3.7	Is fire fighting equipment readily available, and is the fire fighting equipment suitable for use with the likely types of fire (CO2 extinguishers for energised fires, foam for flammable liquids etc.)?	Yes	No	Partial	N/A	
3.8	Are people working in this area familiar with the location of this equipment and how to use it?	Yes	No	Partial	N/A	
3.9	Have Building and Floor Wardens been appointed to cover this area?	Yes	No	Partial	N/A	
3.10	Are the monthly fire checks being carried out?	Yes	No	Partial	N/A	
3.11	Is a biannual (semester) fire drill carried out and recorded?	Yes	No	Partial	N/A	
4	<b>FIRST AID</b>					Comments / Action required (Identify specific room number / location)
4.1	Are there sufficient trained first aiders (1/20 staff) available or on call?	Yes	No	Partial	N/A	
4.2	Are any unusual first aid considerations catered for? (Such as neutralising of hazardous substances, containment of biological contamination, requirements for supplementary oxygen, etc.)	Yes	No	Partial	N/A	

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4.3	Are first aid kits (appropriate for the work area) readily available?	Yes	No	Partial	N/A	
4.4	Are first aid kits checked monthly to ensure that they are kept well stocked, with contents in good condition?	Yes	No	Partial	N/A	
5	HYGIENE CONTROL					Comments / Action required (Identify specific room number / location)
5.1	Are there adequate washing facilities close by, with soap and towels/dryers?	Yes	No	Partial	N/A	
5.2	Are there facilities available near this area where people can eat and/or drink, and do these facilities include an adequate supply of potable water for drinking or filling kettles etc?	Yes	No	Partial	N/A	
5.3	Is eating, drinking, smoking and applying cosmetics banned in laboratory areas?	Yes	No	Partial	N/A	
5.4	Can outdoor/street clothing be stored in such a way that there is no risk of contamination?	Yes	No	Partial	N/A	
5.5	Is it compulsory that long hair is tied back in the laboratories?	Yes	No	Partial	N/A	
6	LIGHTING					Comments / Action required (Identify specific room number / location)
6.1	Are lighting levels sufficient for the tasks being performed?	Yes	No	Partial	N/A	
6.2	Is glare from both external and internal sources adequately controlled?	Yes	No	Partial	N/A	
6.3	Are light fittings, diffusers and tubes/bulbs clean and in good condition?	Yes	No	Partial	N/A	
7	VENTILATION/THERMAL COMFORT					Comments / Action required (Identify specific room number / location)
7.1	Is general ventilation within the laboratory adequate?	Yes	No	Partial	N/A	
7.2	Are ambient temperatures in the laboratory suitable?	Yes	No	Partial	N/A	
8	NOISE					Comments / Action required (Identify specific room number / location)
8.1	Is excessive noise in the workplace prevented?	Yes	No	Partial	N/A	
8.2	Are noise controls adequate?	Yes	No	Partial	N/A	
8.3	Are photocopiers located away from personal workstations?	Yes	No	Partial	N/A	

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9		GENERAL LABORATORY AREA				Comments / Action required (Identify specific room number / location)
9.1	Are the interior surfaces, structures and equipment suitable for the work being undertaken?	Yes	No	Partial	N/A	
9.2	Are benchtops and work stations intact and easily cleaned?.	Yes	No	Partial	N/A	
9.3	Is there in place a cleaning programme to ensure dust free benches and laboratory shelves?	Yes	No	Partial	N/A	
9.4	Are floor coverings intact and non-slip?	Yes	No	Partial	N/A	
9.5	Are floor coverings impermeable and sealed to prevent leakage around walls, pipes and inspection hatches?	Yes	No	Partial	N/A	
9.6	Are floors clean?	Yes	No	Partial	N/A	
9.7	Are all working areas clear of obstructions, clutter, and tripping/slipping hazards e.g. cables, stock, rubbish, junk, etc.?	Yes	No	Partial	N/A	
9.8	Is there facility to store bags, jackets and other personal effects outside the laboratory to prevent clutter and tripping hazards?	Yes	No	Partial	N/A	
9.9	Are general rubbish receptacles free from hazardous, healthcare or offensive wastes?	Yes	No	Partial	N/A	
9.10	Is all other hazardous waste disposed of in accordance with the relevant University guidelines?	Yes	No	Partial	N/A	
9.11	Is healthcare waste disposed of in accordance with the relevant standard?	Yes	No	Partial	N/A	
9.12	Are all waste containers emptied regularly?	Yes	No	Partial	N/A	
9.13	Where compatible chemical waste is mixed prior to disposal, is the container suitable, and is this disposed of regularly?	Yes	No	Partial	N/A	
10		EQUIPMENT				Comments / Action required (Identify specific room number / location)
10.1	Have all staff using laboratory equipment received suitable instruction, training, and where necessary, certification?	Yes	No	Partial	N/A	

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10.2	Are all large items of laboratory equipment suitably placed to avoid overcrowding and anchored to ensure stability and anti-vibration tables where required?	Yes	No	Partial	N/A	
10.3	Has all fixed wire electrical equipment been electrically tested and labelled with the date of test?	Yes	No	Partial	N/A	
10.4	Are safe lock out, isolation and/or emergency stop and shut-down systems established where required?	Yes	No	Partial	N/A	
10.5	Are hand tools serviceable and properly maintained?	Yes	No	Partial	N/A	
10.6	Are all ladders rated for industrial use and suitable for the tasks to be undertaken? (Compliant with AS/NZS 1892 and rated greater than 120kg)	Yes	No	Partial	N/A	
10.7	Are all ladders and access equipment serviceable?	Yes	No	Partial	N/A	
10.8	Are ladders subject to regular inspection and tagging?	Yes	No	Partial	N/A	
10.9	Are users trained in the safe use of ladders?	Yes	No	Partial	N/A	
10.10	If exposed Class 3B or Class 4 Lasers are being operated, does the laboratory meet the requirements of the University's laser safety protocol?	Yes	No	Partial	N/A	
10.11	Is all equipment (especially flame proof equipment) free of Asbestos or Asbestos Containing Materials?	Yes	No	Partial	N/A	
11	<b>LOCAL EXHAUST VENTILATION (LEV)</b>					Comments / Action required (Identify specific room number / location)
11.1	Where applicable, are suitable Local Exhaust Ventilation (LEV) systems available to remove hazardous or nuisance substances or materials?	Yes	No	Partial	N/A	
11.2	Where fume cupboards are used to control exposure to hazardous substances, are they labelled as having been inspected and tested within the past 12 calendar months?	Yes	No	Partial	N/A	
11.3	Are automatic maximum height stops fitted to the sash on the fume cupboard(s) in this area?	Yes	No	Partial	N/A	
11.4	If no, have arrowed labels been affixed to indicate the safe working height?	Yes	No	Partial	N/A	

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11.5	Where microbiological safety cabinets are used to control exposure to biological agents, are they subject to servicing every 12 months?	Yes	No	Partial	N/A	
11.6	Is a valid operator protection test certificate available for each microbiological safety cabinet in this area?	Yes	No	Partial	N/A	
12	<b>HANDLING AND STORAGE OF MATERIALS</b>					Comments / Action required (Identify specific room number / location)
12.1	Are cabinets and shelving uncluttered and securely fixed in place?	Yes	No	Partial	N/A	
12.2	Are heavy items stored on/in low shelves or cupboards?	Yes	No	Partial	N/A	
12.3	Are spill trays regularly inspected and emptied and cleaned as needed?	Yes	No	Partial	N/A	
12.4	Are bagged dry powders stored in a hard container or tray?	Yes	No	Partial	N/A	
12.5	Are bottles/Winchesters stored where they cannot be knocked or kicked over?	Yes	No	Partial	N/A	
12.6	Do shelves that store chemicals have a protective lip or restraint on the edge?	Yes	No	Partial	N/A	
13	<b>HAZARDOUS SUBSTANCES MANAGEMENT</b>					Comments / Action required (Identify specific room number / location)
13.1	Are hazardous substances within the laboratory managed by a competent person?	Yes	No	Partial	N/A	
13.2	Is the SciTrack inventory up-to-date with all chemicals in the lab?	Yes	No	Partial	N/A	
13.3	Are all hazardous substances clearly labelled with chemical name and associated hazards as a minimum?	Yes	No	Partial	N/A	
13.4	Are full safety data sheets for each substance readily available? (These may include data sheets from other laboratories if part of a suite)?	Yes	No	Partial	N/A	
13.5	Do all lab chemical users know how to access safety data sheets (printed or digital)?	Yes	No	Partial	N/A	
13.6	Are containers of hazardous substances stacked or stored in such a way that they will not spill their contents, and secondary containment provided where needed?	Yes	No	Partial	N/A	



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13.7	Are incompatible chemicals stored separately? (this includes acids/alkalis; cyanides/acid; flammables/oxidisers; reducing agents/oxidisers, flammable solids/flammable liquids, nitric acid/flammables and; water reactive/aqueous)	Yes	No	Partial	N/A	
13.8	Are bottles containing strong acids, strong alkalis, flammable liquids or other high hazard chemicals kept on spill trays when not in storage?	Yes	No	Partial	N/A	
13.9	Are very toxic and other high hazard chemicals kept in locked fire resistant cupboards or cabinets?	Yes	No	Partial	N/A	
13.10	Are peptide coupling agents kept in locked storage and used only in designated fumehoods?	Yes	No	Partial	N/A	
13.11	Are corrosives kept in a non-metallic cupboard or cabinet?	Yes	No	Partial	N/A	
13.12	Are eyewash facilities located near where corrosives are being used?	Yes	No	Partial	N/A	
13.13	Are all pressurised gas cylinders secured by restraining chains, bench clamps or similar?	Yes	No	Partial	N/A	
13.14	Are gas cylinders sited away from doors, escape routes or hazardous substance storage areas?	Yes	No	Partial	N/A	
13.15	Are there properly designed gas cylinder trolleys to transport heavy gas cylinders?	Yes	No	Partial	N/A	
13.16	Are there systems in place to dispose of chemicals or substances that have expired?	Yes	No	Partial	N/A	
13.17	Are there clear systems in place to prevent inappropriate disposal of chemicals, oils or solvents down drains (e.g. signage over sinks and clear disposal procedures)	Yes	No	Partial	N/A	
13.18	Are there systems in place to ensure nobody enters lifts with liquid nitrogen?	Yes	No	Partial	N/A	
14	<b>SPILLS AND LEAKS</b>					Comments / Action required (Identify specific room number / location)
14.1	Is there an approved spill/leak emergency response plan? (This plan may include the requirement to seal rooms to prevent gas escape and/or closing off drains to prevent the escape of liquids)	Yes	No	Partial	N/A	

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14.2	In the case of biological agents do the plans specify appropriate decontamination and disinfection procedures?	Yes	No	Partial	N/A	
14.3	Are there people with experience and knowledge, designated to deal with spills/leaks involving very hazardous substances?	Yes	No	Partial	N/A	
14.4	Do people know what to do in the event of a spill or leak?	Yes	No	Partial	N/A	
14.5	Are appropriate spill kits and personal protective equipment readily available to deal with spills/leaks of hazardous substances?	Yes	No	Partial	N/A	
14.6	Are spill kits checked regularly to ensure that they are kept well stocked, with contents in good condition?	Yes	No	Partial	N/A	
14.7	Is there evidence that the spill/leak emergency response plan has been practised in the last year?	Yes	No	Partial	N/A	
14.8	Where required, is there a suitable and accessible eye wash station/emergency shower installed?	Yes	No	Partial	N/A	
14.9	Where plumbed eye wash stations and emergency showers are installed, are they functionally tested and flushed on a regular basis? (Monthly or as per manufacturers recommendations)	Yes	No	Partial	N/A	
14.10	Where a liquid nitrogen leak could displace oxygen to a hazardous level, is there a risk assessment in place and have all the users been inducted accordingly?	Yes	No	Partial	N/A	
15	<b>PERSONAL PROTECTIVE EQUIPMENT (PPE)</b>					Comments / Action required (Identify specific room number / location)
15.1	Does the PPE in use by staff and students match that specified in Laboratory Risk Assessments and Safe Work Instructions? (E.g. overalls, eye protection, appropriate gloves, respirators etc.)	Yes	No	Partial	N/A	
15.2	Are persons using PPE trained in its safe use?	Yes	No	Partial	N/A	
15.3	Are persons using PPE correctly?	Yes	No	Partial	N/A	
15.4	Are there PPE available for visitors?	Yes	No	Partial	N/A	





Health, Safety and Wellbeing

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Once the inspection is completed, those items which require remedial attention should be addressed and signed off. Copies of the inspection form and requests for remedial action should be retained on file.

	NAME	SIGNATURE	DATE
Inspection carried out by:			
Sighted by HoD			
Sighted by HSW Service			
Filed in Laboratory HSW Folder			

Approved by: Associate Director, Health, Safety and Wellbeing  
Document Owner: Associate Director, Health, Safety and Wellbeing  
Content Manager: Health, Safety and Wellbeing Manager

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