

1. Purpose

This procedure describes how Kennesaw State University (KSU or the University) conducts workplace environmental and occupational safety inspections and audits to ensure all work areas are free from recognizable hazards and to evaluate the effectiveness of implementation of the Environmental and Occupational Safety Management System (EOSMS).

2. Scope

This procedure covers the entire KSU campus and applies to all faculty, staff, students and third parties working on or under the control of KSU.

3. Responsibilities

A. The EHS Department is responsible for the following:

- i. Developing and maintaining inspection and audit tools.
- ii. Coordinating and conducting compliance inspections and audits of the EOSMS.
- iii. Providing technical support to departments or units in conducting self-inspections and addressing identified hazards and risks.
- iv. Maintaining consolidated records of inspections and audit reports.

B. Academic departments and administrative units are responsible for the following:

- i. Conducting inspections of their respective areas of operations to ensure the safety of the KSU employees and students.
- ii. Ensuring corrective actions are implemented in a timely manner and closed out.

4. Procedure

A. Department or Unit Level Inspections

- i. Each department or unit conducts self-inspections of their operations/activities to identify and address potential hazards and risks.

- ii. The head of the department or unit establishes an inspection schedule and a team. The team can be made up of members of the Safety Committees or other personnel within the department/unit
- iii. The frequency of inspections is determined by the department or unit in consultation with the EHS Department but should not be more than the guidelines provided below:

Laboratories, art studios, theater, facilities shops	3 months
Offices and general areas	Annually
- iv. The manager or supervisor coordinates the timing of workplace inspections taking into account level of risk and nature of their areas or operations.
- v. The EHS Department provides support and assistance to various departments or units in determining what to inspect, how to conduct the inspection, and appropriate frequency of inspections.

B. Compliance Inspections

- i. The EHS Department conducts routine inspections of particular areas of the campus, focusing on particular EOS programs to ensure that the work areas are free from recognizable hazards and university's continued compliance with applicable laws, rules, regulations and standards.
- ii. The frequency of inspections is determined by EHS department taking into account nature of various university operations/activities and levels of risk associated with the operations/activities.
- iii. The EHS Department communicates the findings of the inspections to the particular departments or units covered in the inspection, reporting any issues that need to be addressed.

C. Inspection Tools

- i. The EHS Department develops and publishes a suite of inspection forms and checklists for various operation/activities.
- ii. The forms and checklists are available through the [EHS website](#).

D. Completing inspections

- i. The inspector or inspection team conducts and documents workplace inspections using the appropriate inspection forms or checklists.

- ii. The inspector/inspection team reviews the previous workplace inspection report to ensure that previously identified action items have been addressed or are not re-emerging as potential hazards.
- iii. Personnel performing tasks or who work in the area being inspected are involved in the inspection process.

E. Managing Corrective Action Items

- i. If potential hazards or risks are identified during the inspection, a record of the hazard or risks are made on the inspection checklist and recommendations of corrective actions for addressing the potential hazards or risks are identified.
- ii. Appendix A provides guidelines on appropriate recommendation for corrective items.
- iii. The department head or supervisor is responsible for ensuring timely implementation of the corrective actions or the escalation of the corrective action.
- iv. Where a corrective action is escalated, the manager or supervisor:
 - a. Ensures that a suitable person responsible for the corrective action is identified; and
 - b. Contacts the person to advise them of the recommended corrective action that may be needed.
 - c. Completion of the action items is documented.
- v. If the issue requires a significant period of time to be addressed, the responsible person provides a status update on the progress of the actions being taken.
- vi. After the issue has been addressed, the EHS Department may conduct a follow-up inspection to confirm that the hazard or risk has been abated.

F. Audits

- i. Once every three years, the EHS Department arranges for a comprehensive audit of the EOSMS and related operations to evaluate the effectiveness of implementation of the EOSMS and safety programs in general.
- ii. The audit is system oriented rather than compliance oriented with the goal of assessing how well the various components of the EOSMS (e.g. training, incident management, inspections) are working.
- iii. The audit is conducted by individuals who are independent of the activities being examined. Such individuals may be internal or external to KSU e.g. EHS staff, other campus experts, personnel from the University System of Georgia (USG), and/ or an external third party hired by KSU.

- iv. Findings of the audit are documented and communicated to the following:
 - a. University Safety Council
 - b. Heads of Departments or Units, within the area being audited and
 - c. Those responsible for corrective action items.
 - d. Others as needed.
- v. Each department or unit should promptly address the issues, pertaining to the department or unit, identified by the audit.

5. Record keeping

- A. The head of department or unit ensures that records of inspection conducted by the department or unit are maintained. This includes:
 - i. Ensuring that corrective actions are followed through and closed out; and
 - ii. Maintaining an auditable system that demonstrates corrective actions have been closed out.
- B. The EHS Department ensures that records of all compliance inspections and audits are maintained and corrective actions are closed out.

Appendix A

Guidelines for determining the appropriate corrective action item

Corrective action scenario	When is this appropriate?	Examples
The hazard is rectified immediately by the inspection team.	The team is able, capable and competent to fix the hazard.	Tripping hazards such as an extension cord across a thoroughfare. Empty cardboard boxes blocking an emergency exit.
The hazard is rectified by the inspection team at the completion of the inspection.	The team is able, capable and competent to fix the hazard but it would cause delays in the inspection process.	Furniture has blocked access to an extinguisher and it will require some time to rearrange the layout of the area. Missing MSDS for a chemical.
Corrective action required to be addressed within a specified timeframe (e.g. 1 week). Determine the appropriate responsible person. Initiate temporary measures to manage the hazard.	The hazard presents a risk that can be temporarily managed with administrative controls.	Broken or faulty equipment that can be effectively tagged out or removed from general use.
Activities or access in the area needs to be halted immediately. Determine the appropriate responsible person. Initiate immediate measures to control the hazard.	A hazard that presents an immediate danger to personnel that could result in serious injury or death.	Exposed electrical wires. Chemical spill emitting toxic vapors. Explosion hazard.
Requires corrective action that is outside the scope of the workplace inspection. Determine the appropriate responsible person. Initiate temporary measures to manage the hazard.	A long standing hazard that has been difficult to control or manage. It may involve corrective actions and plans that are: complex; time consuming; or costly.	A chemical laboratory that does not have an emergency shower or eyewash within the requirements of the Standards. Manual material handling or ergonomic hazards.