Geotechnical/ Geochemical Lab Cross Audit

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| **Vessel Name** |  | **Date**  **(01-January-2020)** |  |
| **Name of Inspector (print)** |  | | |
| **Directions: Cross audits are to be performed by someone OUTSIDE that department. The point is to get fresh eyes and an outside perspective.** | | | |

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|  | **Housekeeping** | **Yes** | **No** | **N/A** | **Actions to be taken**  **(if any)** |
| 1 | Is the laboratory clean of debris, floors swept and dry, trash removed regularly? |  |  |  |  |
| 2 | Are all equipment, supplies, storage crates, and loose items secured against ship movement? |  |  |  |
| 3 | Are the cabinet doors secured? |  |  |  |
| 4 | Are the toolbox drawers secured and organized? |  |  |  |
| 5 | Is the lighting adequate? |  |  |  |
| 6 | Is the temperature/ air conditioning satisfactory? |  |  |  |
|  | **Safety** | **Yes** | **No** | **N/A** | **Actions to be taken**  **(if any)** |
| 7 | Is the location of the First Aid kits and Eye Wash Stations known by personnel and clear of obstructions? |  |  |  |  |
| 8 | Are the fire extinguishers obstructed? |  |  |  |
| 9 | Are exits clearly marked and not obstructed? |  |  |  |
|  | **Communications** | **Yes** | **No** | **N/A** | **Actions to be taken**  **(if any)** |
| 10 | Are navigation systems and displays secured and working correctly? |  |  |  |  |
| 11 | Is the phone (general ship communication line) working correctly? |  |  |  |
| 12 | Are tool box meetings completed daily? |  |  |  |
| **Additional Comments/ Observations** | | | | | |
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Deck Cross Audit

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| **#** | **Housekeeping** | **Yes** | **No** | | **N/A** | | **Actions to be taken**  **(if any)** | |
| 1 | Is the laboratory clean of debris, floors swept and dry, trash removed regularly? |  |  | |  | |  | |
| 2 | Are all equipment, supplies, storage crates, and loose items secured against ship movement? |  |  | |  | |
| 3 | Are the cabinet doors secured? |  |  | |  | |
| 4 | Are the toolbox drawers secured and organized? |  |  | |  | |
| 5 | Is the lighting adequate? |  |  | |  | |
| 6 | Is the work area clean of debris and organized? |  |  | |  | |
| **#** | **Safety** | **Yes** | **No** | **N/A** | | **Actions to be taken**  **(if any)** | |
| 7 | Are appropriate safety signs displayed? (PPE, Hearing protection, etc.) |  |  |  | |  | |
| 8 | Is the location of the First Aid kits and Eye Wash Stations known by personnel and clear of obstructions? |  |  |  | |
| 9 | Are extra PPE supplies available? |  |  |  | |
| 10 | Are the fire extinguishers or exit hatches/ doors obstructed? |  |  |  | |
| 11 | Were any other notable hazards seen? I.e. any slip/ trip hazards in common walkways? |  |  |  | |
| 12 | Are the lifebuoys easily accessible, lights/smoke in date? |  |  |  | |
| 13 | Are the life rafts and boat clear of obstructions and not filled with water? |  |  |  | |
| 14 | Are all emergency lights and speakers working? |  |  |  | |
| 15 | Are all non- removable trip hazards painted and clearly marked? (welding tabs) |  |  |  | |
| **#** | **Environmental** | **Yes** | **No** | **N/A** | | **Actions to be taken**  **(if any)** | |
| 16 | Are any hose lines dripping or covered in oil? |  |  |  | |  | |
| 17 | Is there an oil sheen on the deck or around machinery? |  |  |  | |
|  |  |  |  |  | |
|  | **Communications** | **Yes** | **No** | **N/A** | | **Actions to be taken**  **(if any)** | |
| 18 | Are navigation systems and displays secured and working correctly? |  |  |  | |  | |
| 19 | Is the phone (general ship communication line) working correctly? |  |  |  | |
| 20 | Are tool box meetings completed daily? |  |  |  | |
|  | **Additional Comments/ Observations** | | | | | | | |
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Navigation Cross Audit

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| **#** | **Housekeeping** | **Yes** | **No** | **N/A** | **Actions to be taken (if any)** | |
| 1 | Is the navigation room clean of debris, floors swept and dry, trash removed regularly? |  |  |  |  | |
| 2 | Are all equipment, supplies and loose items secured against ship movement? |  |  |  |
| 3 | Are the cabinet doors secured? |  |  |  |
| 4 | Are there any open drinks near computers and laptops? |  |  |  |
| 5 | Is the lighting adequate? |  |  |  |
| 6 | Is the temperature/air conditioning satisfactory? |  |  |  |
| **#** | **Safety** | **Yes** | **No** | **N/A** | | **Actions to be taken (if any)** |
| 7 | Are the locations of the First Aid kits known by personnel and clear of obstructions? |  |  |  | |  |
| 8 | Are the fire extinguishers obstructed? |  |  |  | |
| 9 | Are wire cables sufficiently bundled or tied down to prevent hazards? |  |  |  | |
| 10 | Are exits clearly marked and not obstructed? |  |  |  | |
| **#** | **Communications** | **Yes** | **No** | **N/A** | | **Actions to be taken (if any)** |
| 18 | Are navigation systems and displays secured and working correctly? |  |  |  | |  |
| 19 | Is the phone (general ship communication line) working correctly? |  |  |  | |
| 20 | Are tool box meetings completed daily? |  |  |  | |
|  | **Additional Comments/ Observations** | | | | | |
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Galley/ Mess Area Cross Audit

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| **#** | **Housekeeping** | **Yes** | **No** | **N/A** | **Actions to be taken (if any)** | |
| 1 | Are foodstuffs and cleaning materials adequately segregated? |  |  |  |  | |
| 2 | Are trash cans emptied on a regular basis? Are garbage cans kept covered? |  |  |  |
| 3 | Are all utensils and equipment serviceable? |  |  |  |
| 4 | Are all foodstuffs covered while stored in the refrigerators or cold shelves, etc.? |  |  |  |
| 5 | Is food put away promptly after meals? |  |  |  |
| 6 | Are all electrical appliances and any extension cables etc., in good condition? |  |  |  |
| **#** | **Safety** |  |  |  |  | |
| 7 | Is the first aid kit available and stocked? |  |  |  |  | |
| 8 | Extinguishers and fire blankets in place and easily accessible? |  |  |  |  | |
| 9 | Do personnel know how to use the fire equipment in the galley ? |  |  |  |  | |
| 10 | Do personnel know where the emergency power cut off is for the grill/stove/ kitchen? |  |  |  |  | |
| **#** | **Storeroom** | **Yes** | **No** | **N/A** | | **Actions to be taken (if any)** |
| 11 | Is food kept away from chemicals and other non-food items? |  |  |  | |  |
| 12 | Are opened items covered/ closed or otherwise sealed from pests? |  |  |  | |
| 13 | Is the area clean and maintained? |  |  |  | |
| 14 | Are foods in date and stored per manufacturer’s instructions? |  |  |  | |
| **#** | **Freezer/ Refrigerators/ Coolers** | **Yes** | **No** | **N/A** | | **Actions to be taken (if any)** |
| 15 | Are the temperatures in the freezers and refrigerators within the correct ranges? Refrigerators: 35° – 39° F ( +2° to +4°C)  Freezers: 0° F or lower ( -18°C or lower) |  |  |  | |  |
| 16 | Is raw food kept separated from and stored below cooked food? |  |  |  | |
| 17 | No food on the floor. Food kept on racks and covered? |  |  |  | |
| 18 | Are alarms for man trapped in freezer working? |  |  |  | |
| 19 | Signs of food spoilage? |  |  |  | |
| **#** | **Mess area** |  |  |  | |  |
| 20 | Is mess room clean of debris, floor swept regularly and trash removed regularly? |  |  |  | |  |
| 21 | Are all equipment, supplies and loose items secured against ship movement? |  |  |  | |
|  | **Additional Comments/ Observations** | | | | | |
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Engine Room Cross Audit

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| --- | --- | --- | --- |
| **Vessel Name** |  | **Date (01-January-2020)** |  |
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| **#** | **Housekeeping** | **Yes** | **No** | **N/A** | **Actions to be taken (if any)** |
| 1 | Are all warning signs adequate, legible and are painted warnings fresh and obvious? |  |  |  |  |
| 2 | Is the appropriate PPE worn as required in the machinery spaces and is hearing protection provided and worn? |  |  |  |
| 3 | Are workshop areas tidy and are tools and hazardous materials stored safely? |  |  |  |
| 4 | Is housekeeping satisfactory throughout, and are all trash cans emptied on a regular basis? |  |  |  |
| 5 | Are the trash cans made of non-flammable material and do they have close fitting lids? |  |  |  |
| 6 | Are all emergency exits and routes marked and unobstructed and are hatches free to open? |  |  |  |
| 7 | Are all fire extinguishers, hoses, hydrants and alarms identified? Are they accessible and ready for use? |  |  |  |
| 8 | Are the locations of the First Aid kits and the Emergency Eyewash stations known by personnel? (Ask someone at random) |  |  |  |
| 9 | Are all ladders in good condition and are safety chains fitted where necessary? |  |  |  |
| 10 | Are all decks free from Slip, Trip and Fall hazards and are deck plates secured? |  |  |  |
| 11 | Is the appropriate PPE available at all the battery storage areas? |  |  |  |
| 12 | Are procedures for the change over to emergency steering posted? |  |  |  |
| 13 | Are all areas in the machinery spaces well lit and ventilated? |  |  |  |  |
| 14 | Can the ship’s alarm and lights be seen or heard throughout the machinery spaces? |  |  |  |
| 15 | Are all heavy items and wheeled apparatus secured against the ship’s movement? |  |  |  |
| 16 | Are all hand, power tools and any extension cords in good condition? |  |  |  |
| 17 | Do all fixed machines have their guards in place and is PPE readily available and in good condition? |  |  |  |
| 18 | Is all the electric and gas welding apparatus, tools and PPE in good order? |  |  |  |
| 19 | Are voice communications within the machinery spaces and to the bridge good? |  |  |  |
|  | **Additional Comments/ Observations** | | | | |
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