

Office Safety

OHBA Safety Pages

- Replace broken or defective chairs immediately
- Only open one file cabinet drawer at a time. If more are opened the file cabinet could tip over.
- Never use a chair, desk, box, bucket or other object in place of a ladder, stool or portable stairs to reach high areas.
- Keep floors clean and free of slip hazards; such as spilled beverages, rainwater, etc. Clean up all spills immediately.
- Keep aisles, hallways, and stairs clear of clutter, debris, and trip hazards such as wastebaskets, electrical and computer cords, footstools, office supply boxes and open drawers.
- Use cord covers to run cables and wires across floors to protect them and eliminate trip hazards.
- Avoid overloading electrical outlets or power strips.
- Close file, desk and cabinet drawers when not in use.
- Report to a supervisor immediately, torn or loose carpets, curled walk off mats, loose tile, uneven floor surfaces or any other conditions that could cause a slip, trip or fall.
- Always walk, no running.
- Do not enter production or shop areas unless you have received proper safety orientation and training. Remember to wear your Personal Protective Equipment, i.e. safety glasses, ear plugs, hard hat, as required.
- If an injury occurs, report it immediately to your supervisor.



The information we provide is not intended to include all possible safety measures and controls. In addition, the safety information we provide does not relieve the Members of its own duties and obligations with regard to safety concerns, nor does Oregon Home Builders Association guarantee to the Members or others that the Member's property, job sites and/or operations are safe, healthful, or in compliance with applicable laws, regulations or standards. The Members remain responsible for their own operations, safety practices and procedures and should consult with legal counsel as they deem appropriate.

SAFETY PAGE MEETING GUIDE

Topic: Office Safety

Employer: _____ Project: _____

Date: _____ Time: _____ Shift: _____

Number in crew: _____ Number attending: _____

Safety or Health issues discussed. Include recent accident investigations and hazards involving tools, equipment, the work environment, work practices and any Safety or Health recommendations:

Follow up on recommendations from last safety meeting:

Record of those attending:

Name: (please print)	Signature:	Company:
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

Supervisor's remarks: _____

Supervisor: _____ (Print) _____ (Signature)