island health

Playspace Safety Maintenance Checklist
Outdoor Daily Monthly & Annual Inspection
Child Care

Place a check mark in the corresponding box for an inspection done Shaded boxes indicate days when the facility is closed (weekends, stats, etc.)

- **Daily**: Check gate latches, pooper scoop, garbage check, check condition of toys, protective surfacing and others: _____
- **Monthly**: Check low vegetation (e.g. branches, brambles) is not causing hazards, check fences are in good repair, check wood climbing items (apparatus, stairs, balance beams) for slippery surfaces and others:_____
- **Annually**: Check tree limbs for safety, others: _____

Annual												**2027**
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Monthly												
Daily												
1	■				■		■	■				
2	■				■			■		■		
3	■			■			■			■		
4				■			■		■			■
5						■			■			■
6		■	■			■			■		■	
7		■	■					■			■	
8					■			■				
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12						■			■			■
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31	■						■			■		

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