

## Sample Health and Safety checklist for working from home

This checklist is to be completed by staff members intending to work from home. Please print, complete, sign and return to hr/your supervisor/line manager. You must contact hr/your supervisor/line manager immediately if you are unable to tick "yes" to all items on this checklist, to discuss alternative arrangements.

Name:

Position:

### ERGONOMICS AND PHYSICAL SET UP

Is the computer screen facing away from an uncovered window or any other source of glare?

Is the area properly ventilated?

Does the overhead lighting cast satisfactory light?

Is the work area and items to be used appropriate and laid out so as to prevent twisting or lifting?

Is the area free from obstacles?

Is there an absence of slip and trip hazards?

Is the noise level appropriate?

Is the room temperature appropriate?

Is the seat back height and width adjustable?

Is the seat appropriate?

Can the feet rest comfortably on the floor with knees bent at 90 degrees?

Is the top of the computer screen is eye level when seated in the chair?

Is the keyboard straight on the desk and in line with the body and the monitor?

Is the monitor at least at arms distance when seated in front?

If using a laptop, is it raised, or is it positioned at a comfortable level?

Are the characters on the computer display set at an appropriate size and colour for reading?

Is the mouse being used at the same level and as close as possible to the keyboard?

Are all electrical cords and connections safe and in good working order?

Is the work area segregated from other hazards in the home, for example, hot cooking surfaces in the kitchen?

Is the area is a non-smoking environment?

### PHYSICAL PRACTICES

Do you ensure that long periods of continuous activity are broken by performing other tasks, changing position, standing up and stretching?

### REMAINING IN TOUCH

Do you maintain regular contact with your Manager?

Have you ensured that emergency contact numbers and details are known?

Will you ensure that workplace incidents (such as injuries or illnesses) are immediately reported to your supervisor?

\_\_\_\_\_  
Signature of employee

Date \_\_\_\_\_