

Working from home OHS Self-Assessment Checklist – During COVID-19

Work Environment

We want to ensure that you have a safe work environment when working from home. While we cannot control your work at home we want you to take the time to have a look around the environment you will be working in to ensure the areas are clear of hazards. This includes checking areas such as walkways, amenities and other areas you may access during your working day.

This checklist is to guide you through these issues. Please complete it and return it before we agree that you can commence working from home.

Lighting

- The worksite is suitably lit for the proposed type of work Yes No

Ventilation

- The work site is well ventilated (natural or artificial) Yes No

Temperature

- The room is able to be suitably temperature controlled – heating/cooling Yes No

Floors

- Floor coverings do not present trip hazards Yes No
- Flooring at workstation allows easy movement of the user's chair Yes No

Chair (If possible)

- The chair is easily adjusted from a seated position (Seat back height & angle, seat height) Yes No
- When chair height is adjusted appropriately, the feet are positioned on the ground Yes No
- The forearms and wrists are parallel to the floor or angled down slightly when chair height adjusted Yes No
- Seat back angle is adjusted so user is in an upright position when using keyboard Yes No
- If you do not have an adjustable chair, you feel safe and comfortable with the chair you are using Yes No

Workstation Desk or Table

- Desk/table is large enough for the completion of mixed tasks (computer and reading / writing) Yes No

- If documents are regularly referred to, they can be positioned & supported (ie use of document holder, or desk slope) Yes No N/a

Monitor

- Is positioned at approximately an arms distance when in an upright seated position Yes No
- Is positioned at an appropriate height (neck remains in a neutral position - not required to look upwards or downwards to view monitor) Yes No
- If using a laptop, this is either raised, or this is positioned on a docking station Yes No
- You feel safe and comfortable with your computer and monitor set-up Yes No

Electrical

- Sufficient power outlets are available to avoid trip hazards Yes No
- Extension cabling is in good working order (ie not stretched or frayed) Yes No
- Approved current protection devices (ie earth leakage circuit breakers) fitted Yes No

First aid

- Access is available to suitable first aid supplies Yes No

Smoke detectors

- The building is fitted with suitable smoke detectors Yes No
- The smoke detectors are operational and tested regularly Yes No

Noise Levels

- Noise levels are not distracting from task concentration Yes No

Actions or Equipment Required

List any actions or equipment (eg document holder, monitor stand) or modifications (eg. workstation adjustments) required. Please if we cannot accommodate such requests you may not be permitted to work from home.

I confirm when working from home my workspace complies with the above requirement.

EMPLOYEE NAME & SIGNATURE:

DATE COMPLETED: