ST. JEROME'S UNIVERSITY
Federated with the University of Waterloo

HOME OFFICE HEALTH AND SAFETY

CHECKLIST

YES NO

If you require modifications to your workspace that you need assistance with, please speak with your manager.

COMPUTER WORKSTATION

YES	NO	
○	○	Is your chair in good condition and adjusted to the appropriate height (i.e. thighs parallel to floor or knees slightly lower than the hips)?
○	○	Is the small of your back adequately supported by a backrest?
○	○	Are your feet on the floor or fully supported by a footrest?
○	○	Do you have sufficient leg room at your desk?
○	○	Is your computer screen(s) at eye level and free from glare?
○	○	Do you have a headset that is comfortable and allows for easy volume control?
○	○	If needed, do you have a document holder available to avoid awkward postures?
○	○	When keying or using a mouse, are your elbows close to the body and your forearms close to parallel to the floor
○	○	Are your wrists fairly straight when keying?
○	○	Are frequently used items positioned within easy reach of your normal working position?

WORK ENVIRONMENT

YES	NO	
○	○	Are temperature, noise, ventilation, and lighting levels adequate for maintaining your normal job performance?
○	○	Is the work area free from slip, trip, and fall hazards (e.g. electrical cords secured, floors free of clutter and trash carpet or rugs secured to the floor)?
○	○	Are doorways and walkways clear of obstruction?
○	○	Are file cabinets/drawers stored away from walkways and heavy items stored below shoulder height?
○	○	Is adequate surge protection used with all electrical equipment?
○	○	Are all electrical cords in good condition, working properly, and secured away from heat sources?
○	○	Is the work area equipped with appropriate emergency systems (e.g. a functioning smoke detector and carbon monoxide detector in the home?
○	○	Is the work area kept free of trash, clutter, and flammable materials?
○	○	If applicable, are portable heaters kept away from flammable materials?
○	○	Is electrical equipment turned off when not in use?
○	○	Do you have an evacuation plan in case of a fire?

HEALTHY WORK PRACTICES

YES	NO	
○	○	Do you take regular breaks from your workstation to stretch and move?
○	○	Do you take regular breaks to eat during the workday?
○	○	Do you ensure that you have daily contact with clients, coworkers, or your manager?
○	○	Do you regulate the hours you work so that you allow for adequate time off for family?
○	○	Do you keep your doors and windows closed and secured to prevent break-ins, theft, or other forms of violence?