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Mitchell Park • 20 Indian Hill Road • Wilton, CT 06897 203.563.9999 • 911Consulting.net

Work From Home Safety Checklist for Employees

Your safety remains our priority when you work from home. Please print and complete this checklist to identify any hazards in your home-based workspace.

Our goal is to correct any safety risks. Evaluate each item on this checklist. Check each item that is *not* a risk.

If any item is a risk, please describe so we can help you address it.

When you've completed this checklist, sign and date it to confirm your understanding of this Work From Home agreement. Scan and email the signed and dated checklist to your supervisor by the agreed date.

| Ple | Please print | | | |
|-------------|--|-------------------|--------------------------------|--|
| Em | mployee's name: | | | |
| Home phone: | | Cell phone: | | |
| WF | VFH street address: | | | |
| City | ity | _ ST | Zip | |
| Но | lousekeeping | | | |
| | Floors are clear and free of tripping hazards | | | |
| | Carpets are well secured to floor, free of frayed or loose seams | | | |
| | Rugs have foam backing or anti-slip matts | | | |
| | Office space is neat, clean and free of excessive combustibles (paper, flammable boxes, files, etc.) | | | |
| | Work area is reasonably quiet and free of distra | ctions | | |
| | File cabinets are not top heavy | | | |
| | Cabinets, shelves or furniture greater than 5' hi earthquake | gh are secured | d to prevent toppling during | |
| | Books and supplies are stored to prevent falling | g during an ear | thquake | |
| | Wheels on rolling files, or other mobile equipme can be locked to prevent rolling | ent, are free fro | m binding when rolled, and | |
| | Cords, cables and other items are secured to p | revent a trippir | ng hazard | |
| | Phone lines and electrical cords are secured under | er desk or alonç | g wall, away from heat sources | |
| | Work area is well ventilated and heated/cooled | to provide wo | rker comfort | |
| | Office space is equipped with a plug-in or hard detectors with battery backup, installed per ma | | | |
| | If the home office is located below grade (base) | • | | |

| Fire | e Safety | | |
|------------------|---|--|--|
| | Walkways, aisles and doorways are clear and unobstructed | | |
| | Working smoke detector/s cover the designated work space. The batteries are functioning | | |
| | Charged and accessible dry chemical fire extinguisher is quickly accessible | | |
| | There is more than one exit from work area | | |
| | Work area is kept free of flammable liquids, trash and clutter | | |
| | Combustible materials are kept at least 3' from radiators, portable heaters and other heat sources | | |
| Ele | ectrical Safety | | |
| | All electrical office equipment is connected to a surge protector | | |
| | Electrical system is adequate for office equipment | | |
| | All plugs, cords, outlets and panels are in good condition and free of exposed conductors or broken insulation | | |
| | Electrical switches, outlets, receptacles and junction boxes are covered with plates | | |
| | Extension cords and power strips are not daisy-chained, and no permanent extension cords are in use | | |
| | Electrical equipment is turned off when not in use | | |
| | Electrical outlets are grounded with three-pronged plugs | | |
| | There's sufficient ventilation for electrical components | | |
| Ergonomic Safety | | | |
| | Desk chair is in good condition, adjustable and I know how to correctly adjust it. No loose wheels/casters or broken hardware/components | | |
| | When keyboarding, forearms are close to parallel with the floor. Wrists/hands in neutral position, i.e., in the same plane as forearms | | |
| | Computer monitor is roughly arm's length from eyes, with top of viewable portion of screen slightly below eye level, and free from noticeable glare during work times | | |
| | When seated, feet reach the floor, or are fully supported by a footrest | | |
| | Back is fully supported by chair or lumbar cushion | | |
| | Work area lighting is directed toward the side or behind line of vision, not in front or above it | | |
| | I have a clear understanding of neutral posture and how to property adjust my workstation | | |

| Ov | rerall Safety | | | |
|------|--|--|--|--|
| | All stairs with four or more steps have sturdy handrails | | | |
| | Emergency phone numbers (hospital, fire department, police department) and my street address are clearly posted near phone | | | |
| | First aid kit or materials are easily accessible and properly supplied | | | |
| | Files and data are secured | | | |
| | Written inventory with serial numbers of all office-provided equipment | | | |
| | Online access to employer computer network via secured path (VPN or secured log in) | | | |
| No | tes/Concerns (please describe) | | | |
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| | he employee, will designate a workspace as a "home office" and will maintain this workplace a safe condition, free from hazards and other dangers to people and equipment. | | | |
| I ha | I have reviewed and understand all items on this checklist. | | | |
| | | | | |
| WF | FH Employee Signature Date | | | |