



WFH Risk Assessment Template

Desk Area	Yes/No	Action Required
<u>Do you have adequate space to work comfortably?</u>		
<u>Is there enough space underneath your desk to stretch your legs?</u>		
<u>Are there trailing electrical cables around your working area that need to be tied up?</u>		
<u>Is your working area warm, well-lit and well-ventilated?</u>		
<u>Do you need a desk lamp to improve lighting?</u>		
<u>Is your working area clutter free so that you can focus easily on the task?</u>		

Display Screen	Yes/No	Action Required
<u>Is your desk chair set up correctly? Is your lower back supported, are there armrests and are your feet flat on the floor?</u>		
<u>Do you have enough surface space on your desk to work comfortably? Are your keyboard and mouse clean and within easy reach, without having to stretch?</u>		
<u>Is your display screen clean and positioned so there is no glare from a window or light?</u>		
<u>Is your display screen level with your eyes so it doesn't cause discomfort to your neck or head?</u>		
<u>Can you easily reach everything that you need without twisting and straining your upper body?</u>		

Environmental Safety

Fire & Electricity Safety	Yes/No	Action Required
<u>Are smoke detectors working and checked regularly, e.g. every month? Do you regularly dispose of waste, including papers, to prevent a buildup of fire 'fuel'?</u>		
<u>Does any electrical equipment spark or show signs of burns and so needs removing from use?</u>		
<u>Do any wires look damaged or frayed and so need removing from use? Do you regularly inspect your electrical equipment to check for signs of wear and tear?</u>		
<u>Do you switch off equipment when not in use?</u>		
<u>Do you have emergency arrangements in place in case of fire?</u>		

Boundaries

Stress & Welfare	Yes/No	Action Required
<u>Do you take regular breaks away from your workstation?</u>		
<u>Do you carry out regularly stretches at your desk to avoid stiff or sore muscles?</u>		
<u>Do you sit with a good posture or are you hunched over the desk?</u>		
<u>Do you have easy access to first aid equipment if required?</u>		
<u>If you regularly use a computer, do you have your eyes tested every year?</u>		
<u>Can you easily reach everything that you need without twisting and straining your upper body?</u>		

Planning

Lone Working	Yes/No	Action Required
<u>Are you familiar with your employer's lone working health and safety policy?</u>		
<u>Do you know the name and number of a manager or supervisor who you can get in touch with easily?</u>		

Lone Working	Yes/No	Action Required
<u>Do you have a system for regularly 'checking in' with your employer if you are not visibly online each day?</u>		
<u>Is your home kept secure whilst you're working there?</u>		
<u>Are important files and laptops kept locked away securely when not in use?</u>		