

# Working From Home Risk Assessment

Name of remote worker: Sally Fullwood	Address, location, phone number: 5 Tor Down, Belstone, EX20 1QU		
Work activity: Parish Clerk			
Name of assessor: Theresa Weaver Vice Chair	Date: 7.10.22		
	Date of next review: 7.10.23		
General working environment	Yes/ No	Management action required?	Done

## 1. Environment

Does the employee need additional lighting?	No		
Do windows or lighting cause glare on their screens?	No		
If windows cause glare, are blinds or curtains available?	Yes		
Does the employee find the heating and ventilation acceptable?	Yes		

## 2. Electrical

Does they know how ensure portable appliances are maintained safely? And how to visually check for faults?	Yes		
Are there enough sockets for their equipment?	Yes		
Is the electrical system in good condition?	Yes		
Are there any faults on existing electrical equipment?	No		

## 3. Fire

Are flammable materials/ ignition sources kept to a minimum?	Yes		
Do you have an escape route in case of a fire?	Yes		
Is there a smoke detector or fire alarms regularly checked?	Yes		

General working environment (continued)	Yes/No	Management action required?	Done
4. Workspace and storage			
Is there enough space for the employee to comfortably work?	Yes		
Do they have enough privacy to work? Are they free from disturbances?	Yes		
Do they have enough storage space?	Yes		
Is there appropriate separation from non-workers?	N/A		
Are there any trip or slip hazards?	Yes		
5. Others			
Does the employee have any issues with managing their work-life balance? Workload? Work hours?	Yes	This is being monitored by Vice Chair and will be discussed at next annual appraisal.	
Are they aware of arrangements for lone working?	Yes		
Do they know how to contact their manager or office if they had a problem?	Yes		
Do they know how to get help with using their computer or other equipment?	Yes		
Do they have to carry out significant manual handling? (If yes, you need to carry out a manual handling risk assessment).	No		
Are there any security risks?	No		
Are there any other concerns?	No		

Computer work	Yes/ No	Management action required?	Done
6. Workstation and computer use			
Does the employee know how to set up their workstation and chair safely?	Yes		
Are their screens clear, readable, and flicker-free?	Yes		
Are the employee's eyes level with the top of their screen?	Yes		
Is there enough space in front of their keyboard to rest hands?	Yes		
Are the keyboard, screen, and computer kept clean?	Yes		
Are they able to adjust their chair to a suitable height?	Yes		
Is there enough legroom? (Feet should be flat on the floor when typing).	Yes		
Is there enough space on the desk to work?	Yes		
Are other equipment in reachable distance?	Yes		
Does they take appropriate breaks from computer work?	Yes		
When using the computer, does the employee get aches, pains, or pins and needles?	No		
Do the symptoms stop after they have stopped working on the computer?	N/A		
Do they suffer from blurred vision, dry eyes, or headaches while using the computer?	No		

Computer work (continued)	Yes/ No	Management action required?	Done
---------------------------	------------	-----------------------------	------

7. Laptops

Does the employee need a screen, keyboard, mouse, or docking station? (Using laptops for long periods of time may require extra equipment).	No		
Do they need a rucksack or bag to transport their laptop?	No		
Are they over-reliant on handheld devices for written communication? Do they need a desktop computer or full-size laptop?	No		
Are there any other concerns?	No		