## **Working From Home Checklist**

Employee Name
Job Title
Line Manager
Business Unit
Address where you will be working from
Phone number where you will be working from
Days and hours, you will be working from home
Safety Rules □
I understand that it is a condition of the agreeing to me working from home, that I mus
☐ Maintain my home work areas to ensure the housekeeping and safety standards outlined in this document are maintained at all times.
$\square$ Fix and report any problems immediately.
Followpolicies and procedures as I would when working in the office, at all times while working from home.
Signature Date
To enable to assess your application to work from home you must complete the below checklist prior to working from home, and then on a 3-monthly basis from the time you commence working from home until such arrangement ends. Send this completed form to your Manager.
Work Area Photographs
To help us assess your application to work from home you are required to submit photographs of your home work area(s), work station and any equipment you will use for work purposes. Please submit them to your Manager with this form.
Work Area Checklist □
Paths and Parking Areas
adequate and suitable lighting
$\ \square$ there are no obstructions in the parking area or on footpaths
☐ there are no unsafe uneven walking surfaces

Building Entrances/Exits
$\square$ there are no slippery areas where water collects
$\square$ mats provided to collect rain water are suited to the task
$\square$ entry and exit doors open and close safely
Toilets
$\square$ tiled areas are not slippery when wet
$\square$ water does not collect on the floor
Internal Stairways and Corridors
$\square$ stairs are not difficult to distinguish
$\square$ stairs are not slippery
$\square$ handrails are not loose, or inadequate for safely using the stairs
$\square$ grease, oil or obstacles are not present on the stairs
$\square$ corridors and walkways are clear of obstacles and not used for storage of items
Storage Areas
$\square$ storage is suitable or adequate for the type and number of items to be stored
$\square$ access to stored items is safe and not difficult to reach
$\square$ containers of hazardous substances are kept in a secure area
$\square$ areas around work equipment are kept clear and are not slippery
Kitchen
$\square$ spills are cleaned up promptly and with appropriate equipment
$\square$ floors are not wet
$\square$ bins are kept clean and emptied regularly
Home Offices
$\square$ computer and phone cables do not trail over the floor
$\square$ storage is adequate and suitable for the type and number of items to be stored
$\square$ seating and desk areas are suitable for the task
$\square$ items are stored neatly and in easy reach
$\square$ areas around equipment are clean and tidy
$\square$ floor coverings and carpets are not worn or damaged
Workshop (where applicable)
$\square$ tools and equipment are neatly stored and packed away after use
$\square$ plant and equipment are kept in good condition
$\square$ tools, plant and equipment are cleaned and tidied after use
cords, hoses and leads do not trail over the floor
$\square$ floors are kept clean and there are clear walk areas without obstacles
Working Hours
☐ I understand I must work only those hours I am authorised to work, and record hours worked from home (send recordings to Manager on a weekly basis).
☐ I understand that when I am working at home work hours must be dedicated to work activities and that any breaks taken for domestic activities are not considered "work time".
$\square$ I understand I must not work more than normal shift hours without authorisation from the Manager.
☐ I understand that if I feel fatigued and unable to work safely I must report this immediately to my Manager.

Hazard Identification and Risk Management	
$\square$ I understand that hazards in my home work area must be identified and controlled as quickly as possible.	
$\ \square$ I will undertake a daily pre-start inspection of my work area to ensure it is safe.	
☐ I understand that hazards associated with equipment or items provided byn reported to my Manager immediately.	nust be
☐ I understand I must not use any items or equipment which are faulty or damaged and will not attempt to repaitems unless I am authorised to do so by my Manager.	air
$\square$ I understand I must submit a "working from home safety checklist" every 3 months for the duration of the per I am working from home.	iod
☐ I understand that, if I experience any accidents, injuries, pain or other symptoms when working from home I report these to my Manager as soon as possible using theHazard and Incide Report Form.	
Emergency Response	
$\square$ There is an appropriate first aid kit in the home work area.	
$\square$ There is a suitable fire extinguisher in the home work area.	
$\ \square$ I understand I must notify my Manager by SMS or email when I commence and finish working each day.	
$\Box$ There is a ready means of communication to seek assistance in the event of an emergency.	
Signature	
Signature Date	
☐ Photographs attached	
☐ Action plan for any items not ticked:	
Manager's Assessment	
Safety Checklist is satisfactory:   Yes  Date	
Comments	

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