## Enclosure 5

## TMD Form 1402.02-3 Telework Safety Checklist

The following checklist is designed to assess the overall safety of the alternative worksite/telework site (for At-home teleworkers). Please read and complete the selfcertification safety checklist.
Employee Name: $\qquad$
(Last Name, First Name, Middle Initial)
Directorate/Division: $\qquad$ Branch/Section/Unit: $\qquad$
Pay Plan/Grade: $\qquad$ Series-Band: $\qquad$
Position Title: $\qquad$
Supervisor Name/Title:
Directorate OIC Name/Title:

| Item \# | General | Yes | No |
| :---: | :---: | :---: | :---: |
| 1 | Workspace is away from noise, distractions, and is devoted to your work needs? |  |  |
| 2 | Workspace accommodates workstation, equipment, and related material? |  |  |
| 3 | Floors are clear and free from hazards? |  |  |
| 4 | File drawers are not top-heavy and do not open into walkways? |  |  |
| 5 | Phone lines and electrical cords are secured under a desk or along wall, and away from heat sources? |  |  |
| 6 | Temperature, ventilation, and lighting are adequate? |  |  |
| 7 | All stairs with four or more steps are equipped with handrails? |  |  |
| 8 | Carpets are well secured to the floor and free of frayed or worn seams? |  |  |
| 9 | Chair casters (wheels) are secure and the rungs and legs of the chair are sturdy? |  |  |
| 10 | Chair is adjustable? |  |  |
| 11 | Your back is adequately supported by a backrest? |  |  |
| 12 | Your feet are on the floor or adequately supported by a footrest? |  |  |
| 13 | You have enough leg room at your desk? |  |  |
| 14 | There is sufficient light for reading? |  |  |
| 15 | The computer screen is free from noticeable glare? |  |  |
| 16 | The top of the screen is at eye level? |  |  |
| 17 | There is space to rest the arms while not keying? |  |  |
|  | Fire Safety |  |  |
| 18 | There is a working smoke detector in the workspace area? |  |  |
| 19 | A home multi-use fire extinguisher, which you know how to use, is readily available? |  |  |
| 20 | Walkways aisles, and doorways are unobstructed? |  |  |


| 21 | Workspace is kept free of trash, clutter, and flammable liquids? |  |  |
| :--- | :--- | :--- | :--- |
| 22 | All radiators and portable heaters are located away from flammable <br> items? |  |  |
| 23 | You have an evacuation plan so you know what to do in the event of a <br> fire? |  |  |
| $\quad$ Electrical Safety |  |  |  |
| 24 | Sufficient electrical outlets are accessible? |  |  |
| 25 | Computer equipment is connected to a surge protector? |  |  |
| 26 | Electrical system is adequate for office equipment? |  |  |
| 27 | All electrical plugs, cords, outlets, and panels are in good condition? <br> No exposed/damaged wiring? |  |  |
| 28 | Equipment is placed close to electrical outlets? | Extension cords and power strips are not daisy chained and no <br> permanent extension cord is in use? |  |
| 29 | Equipment is turned off when not in use? <br> Other Safety/Security Measures |  |  |
| 30 | Equater |  |  |
| 31 | Files and data are secure? | Materials and equipment are in a secure place that can be protected <br> from damage and misuse? | You have an inventory of all equipment in the office including serial <br> numbers? |
| 33 | If applicable, do you use up-to-date anti-virus software, keep virus <br> definitions up-to-date, and run regular scans? |  |  |

