



WORKING FROM HOME

Covenant Health

Employee Name:
Department:
Manager Name:
Date:

Working from Home Checklist

Date:	
Employee Name:	Employee Signature:
Manager Name:	Manager Signature:

All items are to be reviewed prior to employee starting to work from home location. Once completed, Manager to retain copy

Job Position Requirement	Reviewed with Employee	Employee Initial	Manager Initial
HR Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No		
bELITE Office Ergonomics CLiC	<input type="checkbox"/> Yes <input type="checkbox"/> No		
bE LITE Office Ergonomic Resources	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position Hazard Assessment	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Workplace inspection (Quarterly) <i>Including workspace pictures</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Working Alone FAQ	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Working Alone Plan Developed	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Employee Incident/Injury Reporting	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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Education

Education Checklist

Item	Date Completed	Initial Sign Off
CLiC Essential Education		
bE LITE Safe Office Ergonomics		

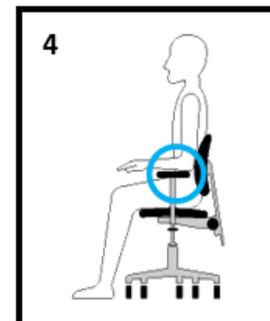
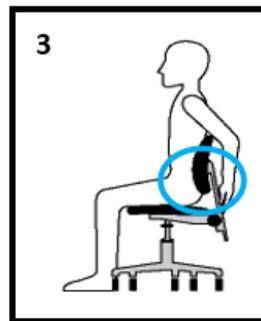
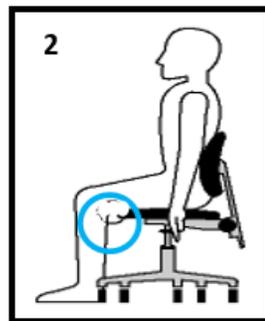
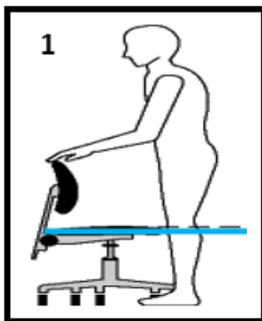
Employee: _____ Signature _____

Manager: _____ Signature _____

Office Ergonomics: Adjusting Your Chair

It is important to familiarize yourself with the adjustable features on your chair. Look at the user manual that came with the chair or look up the make and model online. If you share your chair/workstation make sure to adjust it to fit you at the beginning of your shift. Here are the basics for adjusting your chair:

1. Stand in front of your chair and adjust the seat pan (the part you sit on) so that it is just below your kneecap.
2. Sit on your chair so that your back rests on the backrest. Ensure that there is space for you to get 2-3 fingers between the back of your knee and the front edge of the seat pan.
3. Adjust the lumbar support so it fits comfortably and gently supports the natural curve in the small of your back.
4. Relax your shoulders with your arms hanging by your body and bend your elbows to 90°. Adjust the armrests to gently support your forearms.



Ideal Seated Posture



- Feet flat on the floor (or on footrest)
- Thighs parallel with the floor or slightly angled down
- Sit at the back of your chair with your back resting against the length of the backrest
- Your forearms should be parallel to the floor
- Your shoulders should be relaxed
- Your arms should be gently supported by the armrests
- You should be centered on your workstation
- Your head should be upright with your ears over your shoulders

Office Ergonomics: Single Monitor

Your monitor should be:

- Directly in front of you. Your head should be in a neutral position with your eyes looking forward and your chin parallel to the floor
- Located 18-36" from your eyes (approximately arms-length away)
- The top of monitor should be at or slightly below your eye level

Corrective Lenses:

- If you wear bifocals or progressive lenses you will require the monitor to be lower than eye level. This will make you view the monitor through the bottom of the lens and allow you to keep your chin level
- Typical bifocals are not designed for computer use as the field of vision is often too small to see the screen. Consider talking to your optometrist about what kinds of lenses will suit your needs in office

Controlling Glare:

- Light sources should be to your side, not in front or behind you
- Regularly clean your monitor as dust increases glare

Are your eyes fatigued? Try...

Blinking regularly will help relax your eyes.

The 20-20-20 Rule:

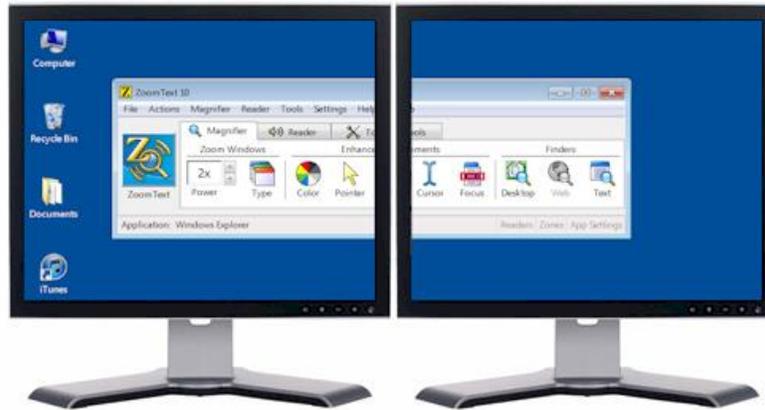
After working for 20 minutes, look 20 feet away for 20 seconds.

Palming:

Cup the palms of your hands over your eye sockets, without touching your eye lids.

Scheduling regular eye exams and using the appropriate corrective lenses.

Office Ergonomics: Dual Monitors



Distance

Single monitors should be positioned approximately an arm's length away from the user. Dual monitors need to be positioned slightly further than arm's length from the user to allow them to view the content on both screens without repeated neck rotation.

Height

Keep the screen height the same on both monitors. The top of the screen should be level with the user's eye.

Position

The monitors should be as close together as possible (touching) and angled slightly in towards the worker. If one monitor is used more frequently than the other, position that one slightly more in the central line of vision with reference screen off to the user's preferred side.

Consistency

Colour schemes and contrast should be the same between monitors.

Laptop and Computer Monitor

Position the bigger screen (computer monitor) ahead and then raise the laptop up to the height of the bigger screen. The tops of the screens should be level.

Office Ergonomics: **Keyboard and Mouse**

Keyboard Tray:

Depending on your height a keyboard tray or the desk surface may be appropriate. If your keyboard tray is adjustable, use the lever(s) to adjust the tray so you are appropriately positioned.

- The keyboard tray should be level or in a slightly negative tilt
- Elbows by your sides and bent near 90-110°
- Shoulders down and relaxed

Keyboard & Mouse:

Your keyboard and mouse should be side-by-side on the same level, directly in front of you. Ensure that your wrists and hands remain neutral. The “legs” on your keyboard should be down to avoid wrist extension.

Ergo Challenge: Try mousing with your left hand, rather than your right. Mousing with your left hand lets you maintain more neutral & ergonomic postures because your hand stays closer to the keyboard.

Hazard Assessment

Hazard Assessment Process

Alberta Occupational Health and Safety Code Part 2

- Step 1** **Determine the work or work-related activities to be assessed**
- The determination may be based on:
- 
- A new piece of equipment is purchased
 - A new chemical / hazardous material
 - A new job / position has been developed
 - An identified hazard through a workplace inspection
- Step 2** **Identify the hazards**
- Review the position description and discuss with 3-4 workers the tasks of the job. List out all work tasks and identify the existing and potential work-related hazards based on:
- 
1. Physical Hazards
 2. Chemical Hazards
 3. Biological Hazards
 4. Psychosocial Hazards
- Step 3** **Assess and prioritize the hazards**
- Once the existing and potential hazards have been identified, they are assessed based on risk using a rating scale for three separate factors:
- 
- Frequency (how often a worker is exposed to the hazard while completing the task)
 - Severity (extent of potential injury/illness)
 - Probability (likelihood of the worker becoming injured/ill when exposed to the hazard)
- *This rating is assigned as if **no controls** were in place.
- Step 4** **Identify and implement hazard controls**
- After the hazards have been identified and assessed, appropriate/effective control measures must be established to eliminate or minimize those hazards to protect workers. The hierarchy of controls are to be used when implementing hazard control measures:
- 
- Elimination or substitution
 - Engineering controls
 - Administrative controls
 - Personal protective equipment
 - Combination of the above
- Step 5** **Communicate the findings of the assessment to staff**
- The findings of the hazard assessment are to be communicated to affected workers including:
- 
- Identified hazards
 - Control measures
 - Their responsibilities
- Step 6** **Evaluate the effectiveness of the implemented hazard controls**
- The effectiveness of the hazard control measures must be evaluated to ensure they are providing the necessary protection. Review Hazard Assessments annually and following incidents/injuries/illnesses to ensure the controls are appropriate protection for the worker.



HAZARD ASSESSMENT

HAZARD IDENTIFICATION AND CONTROL

Job Title: Home Office Worker	
Location: Home Office	Date:
Report all Injury and Near Miss incidents to the Employee Incident/Injury Reporting Line 1-855-342-8070	

New
 Revision

Hazard Assessment Team:	
Name:	Title:
Name:	Title:
Name:	Title:

Task	Hazard Identification	F	S	P	Total	Priority	Control Measures
Computer work	Physical Static position (back, neck, eyes, wrist, etc)						Eng.: Keyboard tray, adjustable chair, adjustable monitors Admin.: daily work planning to ensure regular breaks away from computer, bE-LITE Safe Office Ergonomics training
	Physical Prolonged exposure to screen						Eng: proper lighting, adjustable chair and monitor Admin.: regularly clean monitor to decrease glare, daily work planning to ensure regular breaks away from computer, bE-LITE Safe Office Ergonomics training
Using the telephone	Physical Awkward Posture (back, neck)						Eng.: Headset and/or speakerphone Admin.: If no headset or speakerphone available, holding phone receiver with hand; do not cradle phone to ear while bending neck to hold phone with shoulder
Working Alone	Physical Isolation						Admin.: Working Alone Policy II-140, working alone communication plan, regular contact with employer, Homewood Health
Driving to and from sites <i>Personal Vehicle use</i>	Physical Contact with object (ie. tree, pole, pedestrian, other vehicle, animal)						Eng: Seatbelts Admin: Valid driver's license and/or appropriate license classification, review policy and procedure for driving, adhere to Covenant Health's Cell Phone Policy (II-120), adhere to the laws under the Traffic Safety Act & Distracted

F – Frequency 4 – Often; one or more times per day 3 – Frequently; one or more times per week 2 – Occasionally; one or more times per month 1 – Rarely; less than once a month	S – Severity 4 – Catastrophic; serious injury/death 3 – Critical; probability high for medical aid, serious injury, illness. damage 2 – Marginal; first aid, minor injury/illness/damage 1 – Negligible; injury/illness/damage not likely	P – Probability 4 – Will very likely occur; expected to happen 3 – Could probably occur; has better than 50/50 chance 2 – Possibility of occurring; known to have happened 1 – Practically impossible to occur; one in a million	Priority 10-12 High 7-9 Medium 3-6 Low
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Quarterly Workplace Inspection

Guidelines for Completing Quarterly Workplace Inspections

Overview:

- As per Covenant Health's OHS policy; Workplace Inspection will be conducted on a *minimum* quarterly basis.
- The entire workplace is inspected including where no work is done regularly, such as parking lots, rest areas, office storage areas and locker rooms.
- The minute taker for the JWHS committee will remind the Managers/Supervisors which months the inspections are to be completed via email and through the JWHS meetings.

Prior to inspection:

- Each Manager/Supervisor is responsible for adding information to the Workplace Inspection form that pertains to the specific work area. (http://www.compassionnet.ca/Workplace/OHS_WorkplaceInspectionFormPart1.docx). Take a look at the hazard assessments in your area and ensure engineered controls are added to the inspection checklist for your areas (ie, **Eng**: Guard on meat slicer)
- Managers/Supervisors are responsible to work with their staff to complete the Inspection in a timely manner.

1. Assign your Inspection Team:

- Provide your team with the previous quarter's Workplace Inspection.
- List any deficiencies from the previous inspection on the current inspection form **OR** attach a copy of the last inspection to the current form. The inspectors will double check to ensure these deficiencies have been corrected.

2. How to conduct the Inspection (Part I)?

- Explain to the Inspection team to look at the environment, equipment, facility, employees and work of every area listed on their sheet to identify substandard conditions and defective equipment.
 - Identify hazards. Look up, down, around and inside. Be methodical and thorough.
 - The environment includes such hazards as noise, vibration, lighting, temperature and ventilation, as well as physical, chemical and biological hazards. Equipment includes materials, tools, machinery and vehicles.
 - Pay particular attention to items most likely to develop unsafe or unhealthy conditions.
 - Describe each hazard and its exact location in your notes.
- Ensure all items in Part I are marked as either "S" (satisfactory), "U" (unsatisfactory) or N/A if it is not applicable to that area. (eventually all N/A should be removed from the checklist to make it relevant)
- The Inspection team returns the checklist to the Manager/Supervisor at which time the findings and recommendations for corrective action should be discussed

3. Completing Workplace Inspection Form Part II

- The Manager/Supervisor is responsible for transferring all deficiencies ("unsatisfactory") from Part I to Part 2 and completing Part 2 for each deficiency
- Part 2 of the inspection check list remains "open" until all outstanding items have been corrected
- The Manager/Supervisor indicates on Part 2 what corrective measures have been implemented before signing off (i.e. equipment taken out of circulation, E-facilities requisition completed, etc.)

Note: Each time an inspection is done; the previous deficiencies are to be listed and checked to see if corrected **OR** attach a copy of the last inspection to the current form.

4. Follow up & Tracking:

- The completed inspection checklists are kept for three years.
- The original copy is to be kept in the OHS binder in your area.
- Review and share the completed workplace inspections with your employees at staff meetings and/or post the inspection on your OHS bulletin board.
- Get feedback and advise employees of what action you have taken for any deficiencies.
- Corporate OHS will be monitoring the completion of the Workplace Inspections. This will part of the *Site's Quarterly Report Card*.

5. Issue Resolution Process:

- Refer to the attached Issue Resolution Process provided by OHS
http://www.compassionet.ca/Workplace/2014_March11_Workplace_OHS_IssueResolutionMatrix.pdf



Workplace Inspection Checklist (Part 1) Working from Home

Inspection Information		
Date & Time of Inspection:	Department:	
Inspected By:		
Reviewed By:	Date:	Signature:

Previous Inspection Information		
Identified deficiency from previous inspection:	Has it been corrected?	
1.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> No deficiencies were noted on the last inspection.		

Rating S = Satisfactory U = Unsatisfactory	S	U	Comments
WORK ENVIRONMENT			
• Lighting is adequate for the tasks being performed.			
• Floor is free from slip/trip/fall hazards			
• Shelves are secure and items stored properly (heavy items on mid-level shelves)			
• Waste receptacles readily available and not overflowing			
• Cords are intact (not frayed)			
• Electrical outlets are not overloaded			
• Electrical cords are tidy safely stowed out of the way			
• Computer is protected by a surge protector			
• Office equipment in good working order			
WORK STATION			
• Frequently used items are within easy reach			
• Surfaces do not have sharp edges or corners			
• There is adequate work surface and sufficient leg space under the workstation			
• be LITE Office Ergonomics Resource documents have been reviewed and recommendations put in place			
<i>Office Chair</i>			
• The chair is in good working condition and includes adjustable features to meet my needs			
• The chair height is adjusted so that feet are flat on the floor and knees are bent at right angles with thighs parallel to the floor			
<i>Computer Monitor</i>			
• Monitor to body distance is roughly one arm's length away			
• The top of monitor is at or slightly below eye level			
<i>Keyboard and Mouse</i>			
• Keyboard and mouse are side-by-side on the same level			
• Wrists and hands remain neutral when in use with arms parallel to the floor			
EMERGENCY RESPONSE			
• Emergency contact numbers and details are known and posted			
• Smoke detector has been tested and is functioning properly			
• Exits are clear of obstructions			



Workplace Inspection Checklist (Part 1) Working from Home

Rating S = Satisfactory U = Unsatisfactory	S	U	Comments
PHOTO			
<i>Attach photo of work environment following inspection</i>			

Working Alone

Alberta Occupational Health and Safety Code Part 28

What is considered “Working Alone”?

Working alone applies if a worker is working by themselves at a work site and where assistance is not readily available if there is an emergency or the worker is ill or injured.

5 Working Alone situations that may put employees at risk

Employees who:

- handle cash
- work from home
- do hazardous work but have no routine interaction with customers or public
- are at risk of a violent attack because their work site is isolated from the public
- travel away from a base office to meet clients or travel alone with no routine interaction with customers or public view (isolation)

If deemed to be Working Alone the following must be completed

1. Conduct a hazard assessment for the position to address working alone
2. Inform employees of the hazards associated with working alone
3. Develop a working alone communication plan. This must include:
 - radio, landline or cellular telephone and
 - regular contact with the employer or designate at pre-determined intervals
4. Train and educate employees on hazard controls to perform their job safely

Examples

A facility worker doing repairs, such as, changing light bulbs on a nursing unit during regular working hours

- This is not considered working alone - There are other workers around to help if assistance is required.

Nursing staff working in a room alone with a patient

- This is not considered working alone - Other workers available on the unit to assist if required.

One worker scheduled in a locked unit with a pendant alert and regular contact with a designated staff member

- This is not considered working alone – The worker is working by themselves, however, a communication plan has been developed that includes a designated check-in process and communication devices which ensures assistance is available if needed.

View Covenant Health’s Working Alone Policy <http://compassionet.ca/Policy/ji-140.pdf>
[Contact your Site Safety & Hygiene Advisor with any questions or concerns.](#)

Working Alone

Process for Staff Members Working at Home

Staff member working at home must have contact with their Supervisor/Manager at regularly scheduled intervals. Contact can be made via phone, text, or email.

1. Affected staff member must contact their Supervisor/Manager every hours

If no answer:

- Staff member to leave a message
 - Supervisor/Manager to call back with message received confirmation as soon as reasonably possible.
2. Supervisor/Manager documents worker's contact, including method and time, on the "Working Alone – Working from Home Monthly Record"
 3. If check-in from staff member is not received by Supervisor/Manager within 30 minutes of the scheduled check-in, Supervisor/Manager will call worker directly.
 - Missed check-in or additional information are to be documented in the notes column on the "Working Alone – Working from Home Monthly Record"
 4. The Supervisor/Manager will be responsible for maintaining the "Working Alone – Working from Home Monthly Record." Records must be retained for 3 years.

Working Alone

Working from Home Monthly Record

Employee Name:				
Month:	Contact Method	Time	Call Back (Y/N)	Notes
1				
2				
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Employee Incident/Injury Flow Sheet

Alberta Occupational Health and Safety Act

'**Incident**' is an "undesired event" which *has the potential* to **or** does result in an injury, illness, unintended harm to a person or property. This includes near miss incidents.

Employee

If incident requires first aid, follow site first aid plan

If incident involves Blood / Body Fluid Exposure, follow site protocols

As soon as possible the employee must:

1. Report incident to manager/supervisor or designate
2. Call the Employee Incident/Injury Reporting Line to report the event to Occupational Health and Safety at 780.342.8070 or Toll free 1.855.342.8070
3. You will receive email notification that your report has been submitted.

If medical aid, lost time or modified work is required, **employee must complete Workers WCB report and submit to WCB.** Visit <https://www.wcb.ab.ca/claims/report-an-injury/for-workers.html> for information on reporting.

Manager/Supervisor



- Ensure injured employee receives first aid and, if applicable, offer *Occupational Injury Service (OIS) clinic to employee
- Discuss incident with employee & discuss reporting responsibilities regarding progression to medical aid and/or lost time
- Investigate incident
- Complete the investigation via email link within 7 days of the incident being reported. Ensure corrective actions are put in place to prevent recurrence of incident
- Upon completion of the electronic investigation, an email notification will be sent to the next level of management for review and approval.
- Communicate findings to staff members who may be affected
- If any comments are made regarding the investigation an email notification will be sent to you to update the investigation
- **The report must be retained onsite for 3 years** (electronic or hard copy)

Occupational Health, Safety & Wellness

Ability Management

- Completes WCB Employers report and sends to WCB
- Assist with the WCB claim and return to work processes

Occupational Health

- Follows up on medical information, as required

Safety

- Reviews all incidents and investigations
- Records incidents, compiles incident statistics, and submits to Joint Worksite Committees and Management ensuring confidentiality, reliability and objectivity of reports
- Investigates ALL "serious injuries and incidents"

* For **OIS Clinic Information** visit:
<http://www.compassionnet.ca/Page489.aspx>

Serious incidents/injuries **must be IMMEDIATELY REPORTED** to OHS Safety On-Call at 780.342.8070

Serious Injuries & Incidents

These include

*any injury that results in death,
a working being admitted to the hospital,
the collapse or failure of any component of a building or structure
necessary for the structural integrity of the building or structure,*

*a fire or flood that causes or has the potential to cause a
serious injury,
an unplanned or uncontrolled explosion, or
the collapse or upset of a crane, derrick, or hoist.*