

MoDOT Telework Worksite Safety Checklist

Name: _____

Date: _____

Title: _____

District/Division/Office: _____

Supervisor: _____

Current Non-telework Work Location:

The following checklist is designed to assess the overall safety of the telework location. The employee must read and complete this Telework Worksite Safety Checklist. Upon completion, this checklist must be signed and dated by the employee.

The telework worksite is: _____
(Description (e.g. "employee's residence") and the actual physical address of the location where the employee will spend the majority of their telework time.)

Describe the designated work area: _____

Please complete the following to the best of your knowledge:

Workspace:

- ☐ Workspace is away from loud noise and other distractions; is adequate for work needs; and is suitable for the employee to represent the department in a professional manner during phone and video calls.
- ☐ Workspace is free of indoor air quality problems, with adequate ventilation.
- ☐ Workspace is free of continuous exposure to noise in excess of 85 decibels (louder than busy city traffic).
- ☐ Workspace is free of asbestos-containing materials or if asbestos-containing material is present, it is undamaged and in good condition.
- ☐ Workplace is free of excessive amounts of combustibles.
- ☐ All stairs with four or more steps are equipped with handrails.
- ☐ Aisles, doorways, and corners are free of obstructions to permit visibility and movement.
- ☐ Office equipment/desks/tables/chairs are in good working condition.
- ☐ Floor surfaces are clear of debris, dry, and carpets are well-secured and free of worn or frayed seams.
- ☐ All electrical equipment is free of recognized hazards that would cause physical harm (frayed wires, bare conductors, loose wires, flexible wires running through walls, exposed wires fixed to the ceiling).
- ☐ Sufficient electrical outlets are accessible (do not overload outlets; make sure they can handle the load).
- ☐ There is a working smoke detector in the workspace.

- ☐ A multi-purpose fire extinguisher is readily available.
- ☐ There is an evacuation plan in the case of a fire.
- ☐ There is a safe location accessible from the workspace in the event of severe weather.

Personal Health & Wellness:

- ☐ Workspace allows for movement and adequate personal space.
- ☐ Workspace is arranged in such a way that you are comfortable and can maintain safe and healthy body posture (e.g. lower back support, feet can be flat on the floor, appropriate keyboard/monitor height to minimize straining, etc.).

Department Equipment/Documents/Files Security:

- ☐ Workspace allows for all MoDOT equipment, documents, and files to remain secure and confidential.

My signature below indicates that this safety checklist regarding the proposed telework worksite is true and accurate to the best of my knowledge. I further understand that any intentional inaccuracies found in this checklist may be grounds for disciplinary action, up to and including termination.

Employee Signature

Date

This information will be stored electronically with the Human Resources department along with the MoDOT Telework Agreement.