College of New Caledonia
CNC

Hybrid Work Arrangement Safety Inspection Checklist

Employees who work remotely are responsible for ensuring their workspace meets WorkSafeBC's normal occupational health and safety standards for a home office. Once hybrid work is approved, this checklist is to be completed, signed, and submitted to the employee's supervisor. The supervisor must have viewed the space, either by an in-person walk through, video or pictures.

Employee Name:	
Position:	
Department:	
Date of Inspection:	
Supervisor:	

Hybrid Workplace Location

Is this inspection for a workspace located at your home address?

☐ Yes ☐ No

Is your current home address on file with the CNC Human Resources department?

☐ Yes ☐ No

You can manage your home address on file by logging in to Self-Serve and navigating to User Options, User Profile.

Item	Satisfactory	Unsatisfactory	N/A	Comments
Floors	☐	☐	☐	
Are there loose materials, debris, worn carpets, or rugs?	☐	☐	☐	
Are the floors rough, splintered, slippery, oily, or wet?	☐	☐	☐	
Are there protruding nails or screws?	☐	☐	☐	
Stairways and aisles	☐	☐	☐	
Are all stairs and aisles clear and unblocked?	☐	☐	☐	

Are stairways well lit, and lined with handrails?	☐	☐	☐	
Are the aisles marked and visible?	☐	☐	☐	
General work area	☐	☐	☐	
Are there worn or broken chairs?	☐	☐	☐	
Are there sharp or splintered edges on desks and cabinets?	☐	☐	☐	
Is the desk organized, and the floor underneath clear of obstruction?	☐	☐	☐	
Are all cables stowed neatly?	☐	☐	☐	
Are all electrical cords intact and non-frayed?	☐	☐	☐	
Are electrical outlets and devices properly grounded (e.g. able to accept a 3-pronged plug)?	☐	☐	☐	
Are all extension cords and power bars being used safely?	☐	☐	☐	
Is there sufficient illumination and task lighting?	☐	☐	☐	
Workstation				
Does the workstation have adequate task and general lighting?	☐	☐	☐	
Is there significant glare / reflection from light source to computer screen?	☐	☐	☐	
Does the workstation have adequate physical space to perform work?	☐	☐	☐	
Is the workstation set up according to Worksafe BC guiding documents listed below?	☐	☐	☐	
Is the work surface height-appropriate?	☐	☐	☐	
Is the seat ergonomic and adjusted correctly?	☐	☐	☐	
Does the workstation have proper ventilation to ensure computers and/or monitors are operating at normal temperatures?	☐	☐	☐	

Does the location have appropriate temperature controls?	☐	☐	☐	
Is there clear access to the workstation?	☐	☐	☐	
Material storage				
Are all cabinets and shelves closed, tidy, and clear on top?	☐	☐	☐	
Are the cabinets and shelves secured with adequate overall storage?	☐	☐	☐	
Are all materials neatly and safely piled or stored?	☐	☐	☐	
Are all large, heavy objects stored on lower shelves?	☐	☐	☐	
Evacuation routes, emergency equipment				
Are all doors and emergency exit routes unobstructed and clear?	☐	☐	☐	
Are fire extinguishers, smoke detectors, and carbon monoxide detectors present and tested annually?	☐	☐	☐	
Is a first aid kit accessible?	☐	☐	☐	
Dangerous substances				
Are there any hazardous products (as per WHMIS) In the location?	☐	☐	☐	
If yes, are the products properly labelled?	☐	☐	☐	
If yes, is there a Safety Data Sheet?	☐	☐	☐	
Additional Hazards				
Are there any other issues to be aware of regarding your safety when working remotely?	☐	☐	☐	
Additional areas/comments including working alone policy	☐	☐	☐	
Do you have a regular check-in system established with your supervisor?	☐	☐	☐	

Is there someone nearby that can be contacted should you require help in the event of an emergency?	☐	☐	☐	
Are there people working in the space with you that could pose a risk to you?	☐	☐	☐	

If any items are marked as unsatisfactory please discuss with your supervisor prior to commencing the hybrid work arrangement.

WorksafeBC resources:

Setting up, organizing, and working comfortably in your home workspace How to make your computer workstation fit you

Ergonomics

WorkSafeBC guidelines for working at home or in isolation

_____ _____

Print Employee Name Employee Signature

Date:_____

_____ _____

Print Supervisor Name Supervisor Signature

Date: _____

Once signed by Employee & Supervisor, please submit to appropriate Vice President for signature.

_____ _____

Print Vice President Name Vice President Signature

Date:_____

Once signed, please submit to hr@cnc.bc.ca for approval by Human Resources.

_____

Human Resources Signature

Date: _____