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Computer Screen Equipment Risk Assessment Form				
Assessor:	Me		Date:	
Job Title:	Assessor		Assessment Date:	
Assessment location:	Reception	Person:	How much time does the user spend using a screen per day/in one go?	5-6 hours
Does the user have any health issues?	No		Average	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Comments Na
Hz No	Potential hazard description	Describe the hazard	Control measures	Is there anything else that needs to be done?
1. Environment				
1.1	Is the lighting sufficient? Is it natural light or artificial?	There is natural light	day.	Na
1.2	Does it cause glare? Do you have enough shade? Does the sun blind you at different times of the day?	In the morning causes a problem	sun	Consider fitting a blind.
1.3	Where are you working? In an office with normal levels of background noise? In or near a noisy manufacturing workshop? On a building site? In your car/van?	Quiet reception		Na

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Hz No	Potential hazard description	Describe the hazard	Is there anything else that needs to be done?
1.4	Is the noise an issue?	No.	Na
1.5	Is the general temperature in your workplace suitable for you? Is it too hot/cold? Does it change during the day? Do you have portable heaters? Are they adequate?	It can get very hot if the door is open or used a lot. There are no heaters at the desk. They are warm but the user is not.	
1.6	Does air conditioning dry the air?	Na	Na
1.7	Are there enough power sockets for the IT equipment you use? Are there extension leads that could cause you or anyone to trip? Are trailing leads enclosed in cable guards?	Plenty of sockets.	Na

2. Your desk/work station

2.1	Is the desk/bench etc the right height for you? Can it be adjusted to suit?	Yes.	
2.2	Is it large enough for the work you do? Can the monitor be positioned to suit your needs? Is there enough room for you to use a mouse/pointer?	Yes it is a large desk. There are a lot of files stored on the desk. There is a mouse and a pointer placed on the desk which suits the user.	Arrange to have the files cleared to allow more usable space.
2.3	Is it deep enough to allow you to rest your forearms? See Section 3.	Yes.	

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Hz No	Potential hazard description	Describe the hazard	Is there anything else that needs to be done?
2.4	Do you have a 'normal' office chair or a specialist type? ie 'saddle' or 'kneeling'	High back chair.	
2.5	Can your chair be adjusted for height, tilt etc? Does it have casters? Is it stable or does it tip when you sit on it?	It can be adjusted. One of the casters does not move.	Recommend a new chair is obtained.
2.6	Does it have built in lumbar support? Do you need lower back support?	There is no lumbar support. User has complained of lower back pain.	Contact HR to get a lumbar support with the new chair.
2.7	Can you place your feet flat on the floor? Is it comfortable for you? Do you need to have your legs/feet raised?	Feet are comfortable on the floor.	Consider a footrest.
2.8	When working, are your wrists and forearms supported? Are they raised?	The seating height is not suitable for the user's forearms and wrists.	
2.9	Do your arms/wrists ache after working for a period of time?	Nothing has been done to address this.	
2.10	Can you stop using a screen to rest your eyes and arms or is your job process driven?	There is no screen. Typing is followed. Typing with visitors.	
2.11	Do you have a desk lamp to provide topical light where you need it?	Yes there is a desk lamp. Adequate for the task.	

Hz No	Potential hazard description	Describe the hazard	Is there anything else that needs to be done?
2.12	Is it adjustable, suitable for your needs?	As above.	

3. Screen and Keyboard

3.1	Do you have a flat screen monitor? Do you use a laptop or tablet?	Flat screen	
3.2	Can it be positioned closer/farther away from you as needed?	Yes it has back of the desk.	
3.3	Can you adjust the tilt to suit your height/eyeline?	Yes.	
3.4	Do you have/need an anti-glare filter?	Don't need	
3.5	Do you have a standard keyboard or an ergonomic 'shaped' one?	Standard w	use.
3.6	When using a desktop monitor, is the top of your screen approximately level with your eyes? Is it just below eyes?	Yes.	
3.7	Are you able to place your laptop /tablet in a comfortable position?	Na	

Hz No	Potential hazard description	Describe the hazard	Is there anything else that needs to be done?
3.8	Are the background colours/ default font sizes suitable for you? Do you know how to change them? Are you allowed to change them?	Standard colours	
3.9	Is the screen suitable for the work you are doing? Do you need to concentrate on the screen for long /short periods of time?	Normal office work this user.	
3.10	Is the screen large enough for the work you do – hi definition graphics or typing/spreadsheets?	21" screens ons.	

4. Mouse

4.1	Is the mouse the right size for your hands?	Yes.	
4.2	Can it be set up for left/right hand use?	Yes – set up	
4.3	Do you use a mat? Do you need one?	No mat. The	
4.4	Is your mouse wired or Bluetooth? Does the wire get in the way?	Wireless.	

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Anything else	Error! Reference source not found.	Error! Reference source not found.
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