

March 2020



Home Working Policy

Commitment

Temporary continuous or occasional working from home may be approved by SALTO Gymnastics Club (SALTO) in response to the COVID 19 Government guidance on social distancing and the Government Directive to close certain businesses, including Sports and Leisure facilities. or occasional working from home may be approved in consideration of improvements to Work Life Balance.

If Home Working is occasional and not required by SALTO, no expenses will be paid other than occasional telephone calls and no equipment will be provided other than desk top PCs, laptops, printers, stationery and other items which may be loaned from CVS.

If Home Working is temporary but continuous, as required by COVID 19 temporary closure, all reasonable expenses shall be agreed and reimbursed by SALTO.

Approval for Home Working shall be granted provides a risk assessment of the proposed working environment has been completed. A non-exhaustive check list has been drawn up to evaluate the suitability of the intended Home Working space.

Objectives

- Comply with the requirements of all legislation, advice from UK Government and guidance from RD H&S Consultants regarding best practice concerning Home Working, including but not limited to completion of HSE Workstation Risk Assessment (Appendix 2)
- To enable key staff to provide suitable support for SALTO administration during the period of temporary closure of the SALTO Centre.
- To supply the necessary recourses to the key staff to work safely and effectively from home including electronic and communication devices, stationery and access to other SALTO property or records as my be appropriate.
- To restrict access to SALTO Centre to only essential visits in compliance with prevailing Government guidelines concerning "Social Distancing"
- Implement clear lines of responsibly so that issues can be dealt with at the earliest opportunity to minimise impact.
- Make our Policy available to interested parties and review/ update as needed.
- Continually monitor the latest guidelines and adapt procedures and activities.

Home Working Management Strategy

The organisation aims to develop and implement a six-step management strategy:

1. Policy

Set a policy with commitment from the highest Board level and cascade throughout the Organisation.

2. Health and Wellbeing Directions

Provide a Policy and Action Plans which identify how Home Working will be achieved.

3. Performance Measurement

Monitor progress by allocating responsibilities that are Specific, Measurable, Achievable, Realistic and Timely (SMART).

4. Organisation

Maintaining regular and effective telephone, video and electronic communications among Home Working staff.

5. Audit and Review

Review the effectiveness of the strategy through regular audits.

6. Action Planning

Identify opportunities for improvement and incorporate these actions into the Action Plans

The Board of Trustees will review this policy statement at least monthly.

Signed:

Chair

(On behalf of the Board of Trustees)

March 2020

APPENDIX 1

Home Working Risk Assessment Checklist

To be completed by employee

Name:

Address to which Risk Assessment applies:

		Tick
1.	Suitable space to work with a desk or table at a comfortable height and a suitable chair	
2.	Secure storage for confidential information at home and in transit	
3.	Hazardous substances must not be used	
4.	Adequate means of escape in an emergency, no loose carpets or slippery surfaces. Work area should not be accessed by a ladder	
5.	The work area must be of comfortable temperature, well-lit with sufficient ventilation	
6.	Display screens should be positioned without glare and reflection and at a comfortable height	
7.	To the best of your knowledge, the electrical wiring must be safe with sufficient sockets so that multiple adapters are not required. Extension leads must not cause a tripping hazard.	
8.	SALTO computer and mobile devices must be used for GDPR compliance.	
9.	Electrical equipment must be switched off when not in use	
10.	If heavy equipment is to be moved, the employee must seek advice from the health and safety officer on how to do this safely	
11.	Confidential waste, printer cartridges, batteries, packaging etc must be disposed of properly or returned to SALTO, when permitted to do so for disposal	

Signature of employee:

Date:

Signature of Manager:

Date:

APPENDIX 2

Workstation Risk Assessment

Issue 8

User's Name		Job Role	
Location	Home Working	Date of Assessment	March 2020
Risk Factors	Yes	No	Actions Required

Part 1: Workstation Risk Assessment

Workstation & Hardware:

Is the workstation big enough and clear?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the operator's chair stable, adjustable & comfortable?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there sufficient leg room?	<input type="checkbox"/>	<input type="checkbox"/>	
Can you rest your feet flat on the floor or footrests, if required?	<input type="checkbox"/>	<input type="checkbox"/>	
Can you rest your forearms on the work surface in front of the keyboard?	<input type="checkbox"/>	<input type="checkbox"/>	
Can the keyboard be moved and tilted?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the workstation adjusted to suit the operator?	<input type="checkbox"/>	<input type="checkbox"/>	

Visual Factors:

Is the image on the screen clear and free from flicker?	<input type="checkbox"/>	<input type="checkbox"/>	
Are the symbols on the keyboard legible?	<input type="checkbox"/>	<input type="checkbox"/>	
Can you adjust the image?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the screen tilt and swivel?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the screen free from reflections and / or glare from windows and light?	<input type="checkbox"/>	<input type="checkbox"/>	
Is a screen cleaning kit available?	<input type="checkbox"/>	<input type="checkbox"/>	
Is a document holder available, if required?	<input type="checkbox"/>	<input type="checkbox"/>	

Work Environment:

Is the temperature and humidity at the workstation comfortable for the operator?	<input type="checkbox"/>	<input type="checkbox"/>	
Is it quiet enough to work or hold a conversation?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the standard of housekeeping satisfactory?	<input type="checkbox"/>	<input type="checkbox"/>	
Can you get into & out of the workstation easily?	<input type="checkbox"/>	<input type="checkbox"/>	

Part 2: Display Screen Equipment User Assessment

Essential Information

Do you normally use the DSE for continuous spells of an hour or more at a time?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you use the DSE in this way more or less daily?	<input type="checkbox"/>	<input type="checkbox"/>	
Is fast transfer of information between yourself and the DSE an important requirement of the job?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you need high levels of attention and concentration?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you depend on the use of the DSE equipment to do the job?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have little choice whether or not to use the DSE?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you need significant training and / or skills?	<input type="checkbox"/>	<input type="checkbox"/>	

Additional Information:

Do you break up prolonged use on the DSE with other tasks or take regular breaks?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the job complex and / or highly repetitive?	<input type="checkbox"/>	<input type="checkbox"/>	
Do you find the software easy to use?	<input type="checkbox"/>	<input type="checkbox"/>	
Have any adverse effects been attributed to the workstation?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you aware of their right to a free eye test?	<input type="checkbox"/>	<input type="checkbox"/>	

Health & Safety Co-ordinator Verification

It will generally be appropriate to classify the person concerned as a 'display screen user or operator', if the 'YES' is answered to the first question above			
Is the operator classified as a Display Screen User ?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the operator find the software easy to use?	<input type="checkbox"/>	<input type="checkbox"/>	
Have any adverse effects been attributed to the workstation?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the operator aware of their right to a free eye test?	<input type="checkbox"/>	<input type="checkbox"/>	

Verified by		Sign	
Date of Verification		Date Returned	March 2020