OSLO Laboratory Workstation Assessment Report

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| General Information |
| Date of Assessment |  | OSLO |  |
| Staff/Student name |  | OSLO Phone |  |
| Uni ID number | U |  |  |
| Phone |  | Supervisor |  |
| College/Division |  | Supervisor Phone |  |
| Reason for assessment:[ ]  New Starter [ ]  Reported new pain [ ]  Relocation [ ] Pre-existing pain/condition[ ]  Other……………………………………………………….. |  Details/Comment |
| If new pain/injury related to work activity ensure Incident Notification (level 1 incident) completed in Figtree. [ ]  Complete INC#\_\_\_\_\_\_\_ |
| Assessment details |
| Chair | Seat base height and/or footrest or foot ring adjusted so knees and hips at or slightly above 90 degrees. | [ ]  Yes [ ]  No |
|    | Seat base size suitable for user. (Width supports hips, depth adjusted to allow small gap between knees and chair) | [ ]  Yes [ ]  No |
| Back rest height adjusted so lumbar support rests in users lumbar curve | [ ]  Yes [ ]  No |
| Back rest angle adjusted to support a relaxed, upright posture | [ ]  Yes [ ]  No |
| Seat base tilt adjusted to neutral | [ ]  Yes [ ]  No |
| Recommended seat base height (Floor to top of seat base) | cm |
| Comments: |
| Laboratory Bench | Bench height adjustable to allow arms to be parallel to floor during tasks | [ ]  Yes [ ]  No |
|  | Bench size appropriate to task requirements | [ ]  Yes [ ]  No |
| Bench mobile with lockable wheels | [ ]  Yes [ ]  No ☐ N/A |
| Bench height and design allows appropriate leg clearance  | [ ]  Yes [ ]  No |
| Recommended seated worksurface height | cm  |
| Recommended standing worksurface height (Floor to top of bench surface) | cm |
| Comments: |
| Workspace | Is the workspace adequate for purpose? | [ ]  Yes [ ]  No |
|   | Is the workspace uncluttered and easily rearranged for the task in hand? | [ ]  Yes [ ]  No |
| Is the main task situated close to the body and centralised on the bench? | [ ]  Yes [ ]  No |
| Are the main tasks within a comfortable 30cm arc from the body? | [ ]  Yes [ ]  No |
| Does the User stand to access materials towards the rear of the bench?  | [ ]  Yes [ ]  No |
| Is the workspace set up to avoid "winging" while performing a task?  | [ ]  Yes [ ]  No |
| Are the user’s shoulders and elbows relaxed without overstretching? | [ ]  Yes [ ]  No |
| Comments: |
| Pipetting | Are single or multichannel pipettes or a combination in use? | [ ]  Single [ ]  Multi [ ]  Both |
| See the source image  | Are ergonomic pipettes in use (e.g. by design, lightweight, motorised)?  | [ ]  Yes [ ]  No  |
| Are tips generic or the same brand as the pipette (i.e. dedicated)?  | [ ]  Gen. [ ]  Dedicated |
| Are the fingers and hand relaxed while using the pipette? | [ ]  Yes [ ]  No |
| Comments: |
| Work Practices | Does the user follow a sit-stand-stretch cycle throughout the day? | [ ]  Yes [ ]  No |
|  See the source image | For standing work, do they wear appropriate footwear (enclosed, supportive, <1” heel) | [ ]  Yes [ ]  No |
| When using fume cupboard/bio hood are they aware of risks of postural strain and do they take regular posture breaks/changes during work tasks? | ☐ Yes ☐ No |
| Does the user incorporate microbreaks into extended periods of work? | [ ]  Yes [ ]  No |
| Comments:  |
| Lighting/sound | Room lighting appropriate for user needs | [ ]  Yes [ ]  No |
|  Image result for images office lighting ergonomics | Task lighting appropriate to user needs (where applicable) | [ ]  Yes [ ]  No [ ]  N/A |
| User able to adjust lighting to suit individual or task needs | [ ]  Yes [ ]  No |
| Auditory environment appropriate to tasks | [ ]  Yes [ ]  No |
| Breaks | User encouraged to take regular posture breaks throughout the day (2 minutes every 30 minutes as well as regular lunch/tea breaks) | [ ]  Yes [ ]  No |
|  Image result for images walking group | User familiar with software or other timer options to support taking regular postural breaks | [ ]  Yes [ ]  No |
| Recommended frequency of breaks | \_\_\_\_mins /\_\_\_\_mins |
| Laptop | User has laptop riser, external mouse/ keyboard for extended use | [ ]  Yes [ ]  No [ ]  N/A |
|  | User educated on correct laptop postures and use | [ ]  Yes [ ]  No [ ]  N/A |
| Comments: |

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| Recommendations | Further details (eg chair model, bench type, referrals) | Person responsible |
| [ ]  Replace current chair [ ]  Repair/replace workbench[ ]  Repair/Replace pipettes[ ]  Laptop riser[ ]  Footrest/install foot ring[ ]  Referral to Injury Management[ ]  Other……………………………………….. |  | SupervisorDue Date (max 4wks post Ax) |
| [ ]  Implement more frequent rest and posture breaks[ ]  Implement regular visual breaks | Staff/StudentDue Date (max 4wks post Ax) |
| Other Item: |  |  |  |
| Other Item: |  |  |  |

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| Responsibilities |
| Report completed by: [ ]  OSLO [ ]  S&W Name:Phone:Date of report: Report sent to [ ]  Staff/Student[ ]  Supervisor[ ]  S&WOther………………………. | Supervisor responsibilities: 1. Meet with staff member and provide instruction on implementing the recommendations contained in this report;
2. Ensure recommendations are implemented in a timely fashion;
3. Review with staff member within 6 months to ensure effectiveness.

Staff/Student responsibilities:1. Meet with supervisor and follow instructions to source equipment or implement other recommendations;
2. Continue to undertake usual safe work practices;
3. Notify supervisor as soon as practicable if any symptoms persist or develop.

 **Please keep a copy of this report for your records.****If all recommendations are implemented, any symptoms have resolved and no further action is required,** please scan a copy of this form and email to your local HR team to be saved on your personnel file in ERMS. **If all recommendations are implemented but any symptoms have persisted or further assistance is required**, please scan a copy of this form and email to InjuryManagement@anu.edu.au requesting further assistance. |