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| **Workbench Checklist** |

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| **Company:** | Click or tap here to enter text. | **Workstation Name:** | Click or tap here to enter text. |
| **Prepared by:** | Click or tap here to enter text. | **Department:** | Click or tap here to enter text. |
| **Date:** | Click or tap to enter a date. | **Document Number:** | Click or tap here to enter text. |

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| **“NO” answer indicates need for additional investigation.** | |
| * Does the workbench allow for full range of movement within the workstation? | Select YES or NO. |
| * Is the height of the workbench adjustable? | Select YES or NO. |
| * Can the workbench surface be tilted or angled to provide a comfortable view of the job being done? | Select YES or NO. |
| * Is the workbench designed to reduce or eliminate: | Select YES or NO. |
| * Bending or twisting at the wrist? | Select YES or NO. |
| * Reaching above the shoulder? | Select YES or NO. |
| * Static muscle loading? | Select YES or NO. |
| * Full extension of the arms? | Select YES or NO. |
| * Raised elbows? | Select YES or NO. |
| * Are the workers able to vary posture? | Select YES or NO. |
| * Are the hands and arms free from sharp edges on work surfaces? | Select YES or NO. |
| * Is an armrest provided where needed? | Select YES or NO. |
| * Is a footrest provided where needed? | Select YES or NO. |
| * Is the floor surface free of obstacles and flat? | Select YES or NO. |
| * Are cushioned floor mats provided for employees required to stand for long periods? | Select YES or NO. |
| * If a chair/stool is provided, is its design and adjustability satisfactory and suited to the task? (Back support, vertical adjustability, etc.) | Select YES or NO. |
| * Are all task elements visible from comfortable positions (seated or standing)? |  |
| * Is there a preventive maintenance program for mechanical aids, tools, and other equipment? |  |
| * Is the worker able to work within the comfort and functional reach zones? |  |
| * Is it possible for the worker to alternate sitting and standing when performing the task? |  |
| * Is there adequate space at the workstation to perform the work effectively and comfortably? |  |
| * Can position of tools/equipment and controls be adjusted to suit the worker? |  |
| * If parts and materials containers/bins/tubs/carts are used, are they conveniently placed? |  |
| * Are mechanical aids and mechanical handling equipment available? |  |
| * Is the workbench accessible to material handling equipment? |  |
| * Is clearance space at the workbench adequate for maintenance tasks? |  |