

Ergonomic Program Guidance

Ergonomics programs are the written documents which support the activities of the organization in reducing musculoskeletal disorders and improving system productivity while increasing the quality of worklife for each employee. There are specific elements of ergonomics programs that have been demonstrated by the National Institute of Occupational Safety & Health (NIOSH), the Occupational Safety & Health Administration (OSHA), the Health Safety Executive (HSE), the American National Standards Institute (ANSI), and many large and medium sized companies to be necessary to ensure the effective implementation of an ergonomics process. At each link below, you will find specific guidance for the contents of that section:

Management Commitment and Resources

Management commitment and leadership in this area, as with all safety & health initiatives, is critical to its success. Management commitment provides the motivating force and the resources for organizing and controlling activities within an organization. In an effective program, management regards workers safety and health as a fundamental value of the organization and applies its commitment to safety and health protection with as much vigor as to other organizational purposes. Therefore, management must recognize and communicate that ergonomics is a key component to an effective safety & health program and demonstrate that commitment through providing the needed authority, accountability, budget, time, resources, and information.

Employee Involvement or Participation

Employee involvement is one of the most crucial elements to a successful ergonomics process. The organizational culture must enable and encourage effective employee involvement in the planning and operation of the ergonomics process and in decisions that affect the ergonomics program. Employees must be made aware of their role, provided the necessary training and resources to accomplish it, and rewarded for their achievements. This is a good overlap for the behavior based observation program. Employees should be involved in each and every aspect of the ergonomics process.

Job Hazards Analysis and Control

A good ergonomics process will have at its core specific procedures and processes for performing proactive and reactive hazard analyses. After the analyses are performed, the next step is to ensure that appropriate action is taken. That action may be to say that no changes are needed, but that is still action. Finally, whatever decisions are made as well as whatever action is taken should be communicated to the facility workforce. The analysis procedure chosen should be able to identify if a gap exists between the system demands and the employee capacities across a wide range of metrics. The methodology chosen can be qualitative or quantitative, or a mixture of both. Typically, checklists are utilized to record the information. Different procedures, tools, and objectives are used for office environments as compared to non-office environments.

Analyze Planned & New Facilities, Processes, and Equipment

When facilities, equipment, and processes are new, it is the best opportunity for evaluating the impact to safety and health including the potential for human error and musculoskeletal disorders. It is also the best time to correct some of the risk factors. The reason is that it costs relatively little to make the changes since the lifecycle of the project is usually at its infancy and mostly it exists only on paper. Analyzing planned and new facilities is slightly different than analyzing existing facilities, processes or equipment. The most obvious difference is that you do not have the equipment, process, or facility available to evaluate directly. Instead, you are left with analyzing drawings, design documents, vendor packages, and other documentation.

Training

In training for ergonomics, the goal is to enable employees at all levels of the organization—managers, supervisors or team leaders, and employees—to: (1) Recognize the signs and symptoms of musculoskeletal disorders (MSDs) so that they can report them early (employees) and respond to them appropriately (managers, supervisors, and team leaders); (2) identify those job tasks that include ergonomic risk factors; and (3) have the knowledge and skills necessary to participate in the establishment's ergonomics program.

Program Evaluation

It is critical that you measure the value of your program by analyzing its effectiveness. OSHA and the Department of Defense, as well as PHSC, have developed matrices for completing this review.

Recordkeeping

The recordkeeping recommendations of this program are not meant to supersede the requirements of other legal standards and business processes. Rather, these recommendations should suggest certain minimums for recordkeeping, especially for those documents which are not covered by other standards and requirements.

Medical Program and Surveillance

In an effective ergonomics program, health care providers should be part of the ergonomics team, interacting and exchanging information routinely to prevent and properly treat CTDs. The major components of a medical management program for the prevention and treatment of CTDs are trained first-level health care providers, health surveillance, employee training and education, early reporting of symptoms, appropriate medical care, accurate recordkeeping, and quantitative evaluation of CTD trends throughout the facility.

Scope, Goals and Action Plan

Statements such as "This process applies to current, planned, and future operations, products, processes, and services, foreign and domestic, undertaken by {FILL IN}, including support activities for those facilities, i.e., administrative and maintenance functions. This process also applies to contract personnel performing work at our facilities." should be present in the plan. The goals and actions follow subsequent to the establishment of the scope.

Stakeholder Roles and Responsibilities

The program should contain explicit roles and responsibilities for the various stakeholders within the ergonomics program, including:

- Facility General Manager
- Facility Managers and Supervisors
- HSE Representatives
- Employees
- Engineering and Technology Project Management
- Medical Management