**Using this Template**

The following template can be used to help your organization develop a written Industrial Ergonomics Program. This template **cannot** be used as is – you must customize the template to meet the needs of your organization. We have made this template easier for you to customize by adding visual prompts that identify some areas where your input is needed. These are identified by yellow highlighted, red text in the template. You may also change any of the text in the template to meet your organization’s needs – for example, department names, job titles and listed responsibilities and procedures.

*Example:*

<COMPANY NAME>

Industrial Ergonomics Program

becomes

XYZ Company Industrial Ergonomics Program

To remove the colored highlighting from your text, left click and drag your mouse over the yellow text and click on the highlighter button from the font menu. To change the font color to black, select the text and click on the font color button.



To aid you in understanding the need to customize your program, several “Check Your Understanding” text boxes are also included throughout the template. After reading the information in the text box and adding the required information into the template, you may simply right click on the cross arrow box and select “cut.”

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| ***Check Your Understanding.*** Ergonomics is the study of people and their interaction with the elements of their job or task including equipment, tools, facilities, processes and environment. In practical terms, ergonomics is the science of human comfort. When aspects of the work or workplace exceed the body’s capabilities, the result is often a musculoskeletal disorder (MSD). To help avoid MSDs, work demands should not exceed the physical capabilities of the worker. |

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| ***Disclaimer.*** *This sample safety program template cannot be used as is. You must customize the template to meet the needs of your organization. EMC does not guarantee that this template is or can be relied on for compliance with any law or regulation, assurance against preventable losses, or freedom from legal liability. We make no representations or warranties of any kind whatsoever, either express or implied, in connection with the use of this template. EMC will not be liable for your use of the template as customized by you. All safety programs and policies, including this template and the information you supply to complete it, should be reviewed by your legal counsel and/or risk management staff.*  |

**<COMPANY NAME>**

**Industrial Ergonomics Program**

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| ***Check Your Understanding.*** Ergonomics is the study of people and their interaction with the elements of their job or task including equipment, tools, facilities, processes, and environment. In practical terms, ergonomics is the science of human comfort. When aspects of the work or workplace exceed the body’s capabilities, the result is often a musculoskeletal disorder (MSD). To help avoid MSDs, work demands should not exceed the physical capabilities of the worker. MSDs are also known by several other names including:

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| * CTDs (cumulative trauma disorders, the most common name)
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| * RSIs (repetitive stress or repetitive strain injuries)
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| * RMIs (repetitive motion injuries)
 |
| * Overuse syndrome
 |

Whatever the name used, these injuries belong to a family or group of wear and tear illnesses that can affect muscles, nerves, tendons, ligaments, joints, cartilage, blood vessels and spinal discs of the body. MSDs do not include acute injuries like slips, trips and falls, cuts, motor vehicle accidents or other similar accidents; although a close look at the reasons for acute injuries often reveals design problems that can be corrected.Does your organization need an ergonomics program? It is hard to imagine any organization that cannot benefit from a formal approach to ergonomics. All types of organizations, from manufacturers to schools to construction companies have employees who are exposed to injuries related to lifting, repetitive motions, vibration and other risk factors. If your organization has experienced previous cases of MSDs, an ergonomics program will be of benefit. However, even if you have never experienced an injury before, you can still benefit from such as program. Proactive ergonomics includes those steps you take before an injury ever occurs. Prevention is often the best medicine.Is ergonomics new to you? If so, you will greatly benefit from reviewing our Loss Prevention Information Manual section that details the steps needed to develop this program and implement it in your facilities. [Click here – Ergonomics Program LPIM](http://www.emcins.com/guest/default.asp?Category=aweb&Service=LPIM-PDFSpeedbump&Topic=0015)  |

**Purpose**

The purpose of the <Company Name> Industrial Ergonomics Program is to apply ergonomic principles to the workplace in an effort to reduce the number and severity of musculoskeletal disorders (MSDs), thus decreasing workers’ compensation claims and, where possible, increasing productivity, quality and efficiency. An ergonomically-designed work environment maximizes employee comfort while minimizing the risk of undue physical stress that often leads to injuries.

A proactive ergonomics approach focuses on making changes when risks have already been identified, as well as incorporating ergonomics into the design phase of a new facility or process, into purchasing new equipment or tools and into the contemplation of scheduling changes.

All employees are required to follow the minimum procedures outlined in this program. Any deviations from this program must be immediately brought to the attention of the Program Administrator.

**Scope**

<Company Name> strives to provide all employees and on-site contractors with a safe and healthy workplace. This proactive Industrial Ergonomics Program is integrated into our company’s written safety and health program, and is a collaborative effort that includes all employees. The Program Administrator is responsible for the program’s implementation, management, and recordkeeping requirements.

**Program Responsibilities**

**Management.** The management of <Company Name> is committed to the ergonomics process. Management supports the efforts of the Program Administrator <and the Ergonomics Committee (if applicable)> by pledging financial and leadership support for the identification and control of ergonomic risk factors. Management will support an effective MSD reporting system and will respond promptly to reports. Management will regularly communicate with employees about the program.

**Program Administrator.** The Program Administrator will report directly to upper management and be responsible for this policy and program. All evaluations, controls and training will be coordinated under the direction of the Program Administrator in collaboration with management. The Program Administrator will monitor the results of the program to determine additional areas of focus as needed. The Program Administrator will also:

* Ensure that evaluators performing worksite evaluations and training are properly trained
* Ensure that control measures are implemented in a timely manner
* Ensure that a system is in place for employees to report MSD signs or symptoms and suspected work-related risk factors to managers and supervisors
* Ensure that accurate records are maintained and provide documentation upon request
* Schedule manager, supervisor and employee training and maintain records to include date, name of instructor, topic and materials used
* Follow up with any ergonomics strategy and/or solutions
* Monitor the program on a quarterly basis and provide an annual review

**Managers and supervisors.** Managers and supervisors of <Company Name> will:

* Remain accountable for the health and safety of all employees within their departments through the active support of the Industrial Ergonomics Program
* Attend ergonomics training to familiarize themselves with the elements of the program, recognition and control of work-related ergonomic risk factors, MSD signs and symptoms, early reporting requirements and procedures, and medical management/return to work processes
* Ensure that employees in their areas have received the appropriate training
* Ensure that ergonomics practices and principles are considered when conducting worksite evaluations
* Ensure that recommended controls are implemented and used appropriately through active follow-up
* Provide employees with and ensure the use of the appropriate tools, equipment, parts and materials in accordance with ergonomic requirements
* Ensure that employees understand the MSD signs and symptoms and early reporting system, and respond promptly to employee reports of possible MSDs
* Provide appropriate workers’ compensation documentation to employees as required by state regulations
* Seek guidance from the Program Administrator or Human Resources department to aid in return to work directives from the healthcare provider
* Maintain clear communication with managers and employees

**Employees.** Every employee of <Company Name> is responsible for conducting himself/herself in accordance with this policy and program. All employees will:

* Use the appropriate tools, equipment, parts, materials and procedures in the manner established by managers and supervisors
* Ensure that equipment is properly maintained in good condition and when not, report it immediately
* Provide feedback to managers and supervisors regarding the effectiveness of design changes, new tools or equipment, and other interventions
* Attend ergonomics training as required and apply the knowledge and skills acquired to actual jobs, tasks, processes and work activities
* Report MSD signs or symptoms and work-related MSD hazards to their manager, supervisor or the Program Administrator as early as possible to facilitate medical treatment and initiate proactive interventions

Employee involvement is an essential element to the success of the Industrial Ergonomics Program. Employees will be solicited for their input and assistance with identifying ergonomic risk factors, worksite evaluations, development and implementation of controls, and training. Employee participation in the program will occur only during company time.

**Identifying Jobs with Ergonomic Risks**

<Company Name> will use both passive and active surveillance to identify jobs with ergonomic risks.

* Passive surveillance involves conducting a records review, which looks at existing data such as OSHA 300 logs, workers’ compensation claims, trips to the medical facility, and absentee records. Records may also indicate a frequency of worker complaints due to undue strain, fatigue or pain, or show a history of high turnover in certain departments or positions.
* Active surveillance uses observations, interviews, surveys, questionnaires, checklists and formal worksite evaluation tools to identify specific high-risk activities.

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| ***Check Your Understanding.*** Identifying and solving workplace ergonomic problems requires knowledge of risk factors and MSDs. If a company is new to the ergonomics process, there is a good chance that all employees will need training. The goal of the training should be to enable all managers, supervisors and workers to identify ergonomic risk factors that may lead to the development of MSDs, recognize and report signs and symptoms of MSDs, and develop strategies to control or prevent them. Training ensures that everyone involved in the ergonomic effort is well informed of the hazards so they can participate in identifying and controlling exposures. If outside experts are consulted to provide employee training, ensure that they are familiar with company operations, policies and work practices before they begin. Employees will learn more effectively if the expert addresses specific examples and concerns already familiar to the employees. |

**Employee Training**

Training is intended to enhance the ability of managers, supervisors and employees to recognize work-related ergonomic risk factors and to understand and apply appropriate control strategies. Training in the recognition and control of ergonomic risk factors will be given as follows:

* To all new employees during orientation
* To all employees assuming a new job assignment
* When new jobs, tasks, tools, equipment, machinery, workstations or processes are introduced
* When high exposure levels to ergonomic risk factors have been identified

The training for all managers, supervisors and employees will include the following elements:

* An explanation of <Company Name’s> Industrial Ergonomics Program and their role in the program
* A description of MSD signs and symptoms and consequences of injuries caused by work and non work-related risk factors
* An emphasis on the importance of early reporting of MSD signs and symptoms and injuries to management
* The methods used by <Company Name> to minimize work and non work-related risk factors (i.e., engineering controls, administrative controls and any appropriate personal protective equipment)

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| ***Check Your Understanding.*** Ergonomics training can be completed in many ways, but a combination of several different types of media (e.g., PowerPoint, videotapes, pamphlets and lecture) is usually the most effective approach. Whichever approach is taken, it is important that the material is understandable to the audience. Training materials should consider the participants’ educational levels, reading abilities and language proficiencies. This may mean providing materials and instruction in languages other than English.Training attendees should be reminded that the intent of the training is not to have workers, supervisors or managers diagnose or treat MSDs. Rather, the purpose is to provide them with the information necessary to identify and eliminate ergonomic risk factors; and, therefore, reduce the chance of developing MSDs. Training sessions should be designed for interaction between trainers and trainees. Workers know their jobs better than anyone else and often have excellent ideas on ways to improve them. If management is committed to reducing MSDs, workers need to be involved in the process. At a minimum, give workers the opportunity to discuss ergonomic problems in their jobs and offer suggestions for improvement.EMC provides several resources to aid in employee training. Visit our [Ergonomics website](http://www.emcins.com/losscontrol/topics/Back_Safety_and_Ergonomics.aspx) to take advantage of these tools. |

Training will be provided in one, or a combination, of the following formats:

* Oral presentations
* Videos
* Distribution of educational literature
* Hands-on equipment and work practice demonstrations

Trainers will be experienced in delivering training programs that address all work and non work-related risk factors, and will be familiar with <Company Name> operations. Training will be provided from one, or a combination, of the sources listed below:

* Internally developed resources
* Our workers’ compensation carrier
* An outside consultant

All training will be documented to include the trainer name, topics covered and date of training. All employees will be required to sign a training sign-in roster. (See **Appendix C** for training record sheet.)

**Workstation Ergonomic Evaluations**

Workstation evaluations are a critical component of our Industrial Ergonomics Program. Workstation evaluations may be triggered by any of the following:

* An employee reports an MSD sign or symptom (See **Appendix H** for a written evaluation request form.) Verbal communication is also acceptable through the employee’s supervisor
* Jobs, processes or work activities where work-related ergonomic risk factors have been identified which may cause or aggravate MSDs
* Any change of jobs, tasks, equipment, tools, processes, scheduling or changes in work shift hours
* When a safety walk-through or scheduled inspection or survey uncovers potential MSD hazards

**Risk Factors.** Work-related risk factors to be considered in the evaluation process include, but are not limited to:

* Physical risk factors including force, postures (awkward and static), static loading and sustained exertion, fatigue, repetition, contact stress, extreme temperatures and vibration
* Administrative issues including job rotation/enlargement, inadequate staffing, excessive overtime, inadequate or lack of rest breaks, stress from deadlines, lack of training, work pace, work methods and psychosocial issues
* Environmental risk factors including noise, lighting, glare, air quality, temperature, humidity and personal protective equipment and clothing
* Combination of risk factors such as, but not limited to, highly repetitive, forceful work with no job rotation or precision work done in a dimly lit room

**Setting Priorities.** Our goal is to complete workstation evaluations as quickly as possible <specify timeframe, if applicable>. When time constraints exist, workstation evaluations will be scheduled based upon the following priorities:

* Any job, process, operation or workstation which has contributed to a worker’s current MSD
* A job, process, operation or workstation that has historically contributed to MSDs
* Specific jobs, processes, operations or workstations that have the potential to cause MSDs

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| ***Check Your Understanding.*** Several methods are available for workstation evaluations. Of these methods, the checklist procedure provides the most formal and orderly procedure for screening jobs. There are many versions of ergonomic risk factor checklists available in ergonomics manuals, websites and trade publications. (See **Appendices B through I** for several sample checklists.) For best results, the checklist should be used by employees who are most familiar with the job or process. Although checklists are a good way to determine if risk factors are present in jobs, they should not be the only tool used to decide if improvements are warranted. Instead, they should be used in combination with employee interviews or symptom surveys. This combination will give a better sense of the “complete picture.” For example, some employees may experience pain even when no obvious risk factors are present. If only a checklist is used, the employee is likely to continue experiencing pain because observers may determine no improvements are necessary. However, if the employee is interviewed or completes a symptom survey, improvements can be made even when risk factors are not readily apparent. In the end, the same goal is accomplished – creating a safe and comfortable workplace for the employee. |

**Workstation Evaluation Methods.** Various methods will be used to evaluate problem jobs including:

* Walk-through and observational assessments including video
* Employee interviews
* Surveys and questionnaires
* Checklists
* Detailed worksite evaluations, including formal job hazard analysis (JHA/JSA)

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| ***Check Your Understanding.*** Most organizations do a good job of identifying ergonomic risk factors during observational assessments, interviews and other methods. However, they often do not select the most appropriate technique to control the risk factor they have noted. The hierarchy of hazard control is a process that assists organizations in selecting the appropriate control. For more information on the hierarchy of hazard control, review the following [Tech Sheet](http://www.emcins.com/guest/default.asp?Category=lcweb&Service=Tech-PDFSpeedbump&Topic=6194).  |

**Controlling Ergonomic Hazards**

<Company Name> will take steps to identify ergonomic risk factors and reduce hazards by using a three-tier hierarchy of control (in order of preference):

1. **Engineering controls.** The most desirable and reliable means to reduce workplace exposure to potentially harmful effects. This is achieved by focusing on the physical modifications of jobs, workstations, tools, equipment or processes.
2. **Administrative controls.** This means controlling or preventing workplace exposure to potentially harmful effects by implementing administrative changes such as job rotation, job enlargement, rest/recovery breaks, work pace adjustment, redesign of methods and worker education.
3. **Personal protective equipment (PPE).** Although not recognized as an effective means of controlling ergonomic hazards and does not take the place of engineering or administrative controls; however, there are forms of PPE which can make employees more comfortable, e.g., kneepads, anti-vibration gloves, etc.

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| ***Check Your Understanding.*** Medical management and return to work programs are critical components of every ergonomics program. Did you know that EMC can assist you in developing these programs? For more information, review the resources below.[Return to Work Program](http://www.emcins.com/Docs/OFILib/MK/AA065000201_20090828.PDF) [Select Provider Program](http://www.emcins.com/Docs/OFILib/MK/AA065000200_20090828.PDF) [Prework Screening Programs](http://www.emcins.com/Docs/OFILib/MK/AA065000120_20110420.PDF)  |

**Medical Management and Early Return to work**

<Company Name> provides medical care to all employees injured at work. <Company Name> maintains a good working relationship with our healthcare provider, <Name of Designated or Preferred Physician>. All work-related injuries and illnesses will be referred to <Name of Designated or Preferred Physician> unless the injured employee has notified <Company Name> that other provisions have been made. State laws regarding employee/employer choice of physician will always be followed.

In the event of a work-related injury or illness, the healthcare provider will:

* Provide diagnosis and treatment for <Company Name> employees;
* Determine if reported MSD signs or symptoms are work-related;
* Comply with <Company Name> early return to work program by recommending restricted, modified or transitional work duties when appropriate;
* Refer <Company Name> injured employees to other clinical resources for therapy or rehabilitation;
* Provide <Company Name> with timely work status reports
* Develop a positive working relationship with < Name of Insurance Carrier>

<Company Name> has an aggressive return to work program and will offer return to work opportunities to all injured employees in accordance with work restrictions identified by a recognized healthcare provider.

**Periodic Program Review**

At least annually, the Program Administrator will conduct a program review to assess the progress and success of the program. The review will consider the following:

* Evaluation of all training programs and records
* Evaluation of all new equipment put in place since the last review
* The need for retraining of managers, supervisors and employees
* The jobs, processes or operations which have produced a high incidence rate of work-related MSDs
* The length of time between a request for an ergonomic evaluation and the actual evaluation
* The length of time between the point at which the results of the evaluation are known and when implementation of controls begins
* The length of time between the beginning and completion of implementation of controls
* The program’s success based upon comparison to previous years using the following criteria:
* Number and type of lost workdays associated with OSHA recordable cases
* Cost of workers’ compensation cases
* Employee feedback through direct interviews, walk-through observations, written surveys and questionnaires, and reevaluations

(See **Appendix B** for an annual review report form.)

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| ***Check Your Understanding.*** There are no current governmental requirements for records’ retention of ergonomic assessments, training or program review. Your company must determine the length of record retention for this program.Medical records and Workers’ Compensation information will most likely be retained in the employee’s personnel file. This information must be retained for 30 years past the employee separation date. |

**Record Retention**

<Company Name> will maintain the ergonomics evaluation and training records for <five> years. All medical records will be maintained in the employee’s personnel file for 30 years past employee separation date.

**Revision History**

<Revision XX – November 2011>

**Appendix A – Glossary of Terms**

**Administrative controls:** procedures for safe and proper work that are used to reduce the duration, frequency or severity of exposure to a hazard. They include work methods training, job rotation and gradual introduction to work.

**Awkward posture:** deviation from the ideal working posture of elbows at the side of the torso, with the wrists neutral. Awkward postures typically include reaching behind, twisting, forward or backward bending, pinching and squatting.

**Engineering controls:** a method of controlling worker exposure to risk factors by redesigning equipment, tools and work stations.

**Ergonomics:** the scientific study of human work. The term comes from the Greek words "ergos" meaning work, and "nomos," meaning natural laws of. Ergonomics considers the physical and mental capabilities and limits of the worker as he or she interacts with tools, equipment, work methods, tasks and the working environment.

**Ergonomics team:** those responsible for identifying and correcting musculoskeletal hazards in the Industrial Ergonomics Program.

**Fatigue:** a condition that results when the body cannot provide enough energy for the muscles to perform a task.

**Forcefulness:** the amount of physical effort a person uses to do a task.

**Hand-arm vibration:** vibration (generally from a hand tool) that goes through the hand then travels through the rest of the body.

**Hazard prevention and control:** eliminating or minimizing the hazards identified in the worksite analysis. It is changing the jobs, workstations, tools or environment to fit the worker.

**Incidence rate:** the rate at which new injuries and illnesses occur for a given job, production line, work area, department or company.

**Mechanical contact stress:** the contact of the body with a hard surface or edge that results in the compression of tissue. This can also result when using a part of the body as a hammer or striking instrument.

**Medical management:** the effective use of available healthcare resources to prevent or manage work-related musculoskeletal disorders.

**Musculoskeletal disorders (MSDs):** illnesses and injuries that affect one or more parts of the musculoskeletal system.

**Musculoskeletal system:** the bones, muscles, tendons, ligaments, cartilage, nerves and blood vessels in the human body.

**Neutral posture:** comfortable working posture that reduces the risk of musculoskeletal disorders. The joints are naturally aligned with elbows at the side of the body and wrists straight.

**Personal protective equipment (PPE):** gloves, kneepads and other equipment that may help reduce hazards until other controls can be implemented, or to supplement existing controls.

**Records review:** reviewing company records to identify patterns of injuries (or potential injuries) to help find the jobs and workstations that may contain musculoskeletal hazards.

**Repetition:** performing the same motions repeatedly. The level of risk associated with a particular task depends on the frequency of repetition, speed of the movement or action, the number of muscle groups involved, and the required force.

**Risk factors:** an aspect of a job that increases the worker's chance of getting a work-related musculoskeletal disorder.

**Severity rate:** the cost in terms of lost workdays (or dollars) of new injuries and illnesses occurring in a given job, production line, work area, department or company.

**Static loading/sustained exertions:** physical effort or posture that is held and requires muscle contraction for more than a short time. As muscles remain contracted, the blood flow to the muscles is reduced.

**Worksite (or workstation) analysis:** a safety and health review that addresses work-related musculoskeletal disorders. It is a structured way of identifying jobs and workstations that may contain musculoskeletal hazards, the risk factors that pose the hazards, and the causes of the risk factors.

**Appendix B – Annual Evaluation Report**

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| --- | --- |
| Date of evaluation: | Evaluated by (list all present): |
| Written program reviewed: Yes No |
| Do injury records indicate a need for additional employee training on the Industrial Ergonomics Program? Yes No |
| Have any jobs, processes, or operations produced a high incidence of work-related MSDs? Yes NoIf yes, list: |
| Is there any record of excessive time between:1. A request for an ergonomic evaluation and the actual evaluation?

 Yes No1. The point at which the results of the evaluation are known and when implementation of controls begin?

 Yes No 1. The beginning and completion of implementation of controls?

 Yes No If yes, what corrective action is needed? |
| The following content was added/modified/removed from the written program: |
| Comments: |

**Appendix C – Training Record/Certification for Ergonomics**

The following individuals received training.

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| **Print Name** | **Sign Name** |
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The undersigned conducted training in accordance with the <Company Name> Industrial Ergonomics Program.

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| Print Instructor’s Name |  |
| Instructor’s Signature |  |
| Instructor’s Title |  |
| Date of Training |  |

**Appendix D – Workstation Layout Survey**

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| **Workstation Evaluated:** | **Date of Evaluation:** |
| “NO” responses indicate areas which should be investigated | Yes | No | NA |
| Does the work space allow for full range of movement? |  |  |  |
| Are mechanical aids and equipment available? |  |  |  |
| Is the height of the work surface adjustable? |  |  |  |
| Can the work surface be tilted or angled? |  |  |  |
| Is the workstation designed to reduce or eliminate… a. Bending or twisting at the wrist?  b. Reaching above the shoulder?  c. Static muscle loading?  d. Full extension of the arms?  e. Raised elbows? |  |  |  |
| Are the workers able to vary posture? |  |  |  |
| Are the hands and arms clear from contact with sharp edges? |  |  |  |
| Is an armrest provided where needed? |  |  |  |
| Is a footrest provided where needed? |  |  |  |
| Is the floor surface free of obstacles and level? |  |  |  |
| Are cushioned floor mats provided for employees who stand for long periods? |  |  |  |
| Are chairs and/or stools easily adjustable and suited to the task? |  |  |  |
| Are all task elements visible from comfortable positions? |  |  |  |
| Is there a preventive maintenance program for mechanical aids, tools, etc? |  |  |  |

**Appendix E – Task Analysis Checklist**

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| --- | --- |
| **Workstation Evaluated:** | **Date of Evaluation:** |
| “NO” responses indicate areas which should be investigated | **Yes** | **No** | **NA** |
| Does the design of the primary task reduce or eliminate: a. Bending or twisting of the back or trunk? b. Crouching? c. Bending or twisting the wrist? d. Extending the arms? e. Raised elbows? f. Static muscle loading? g. Clothes wringing motions? h. Finger pinch grip? |  |  |  |
| Are mechanical devices used when necessary? |  |  |  |
| Can the task be done with either hand? |  |  |  |
| Can the task be done with two hands? |  |  |  |
| Are pushing or pulling forces kept minimal? |  |  |  |
| Are required forces judged acceptable by the workers? |  |  |  |
| Are the materials: a. Able to be held without slipping? b. Easy to grasp? c. Free from sharp edges and corners? |  |  |  |
| Do containers have good handholds? |  |  |  |
| Are jigs, fixtures and vises used where needed? |  |  |  |
| When needed, do gloves fit properly and made of an appropriate fabric? |  |  |  |
| Does the worker avoid contact with sharp edges when performing the task? |  |  |  |
| When needed, are push buttons designed properly? |  |  |  |
| Do the job tasks allow for ready use of required personal equipment? |  |  |  |
| Are high rates of repetitive motion avoided by: a. Job rotation? b. Self-pacing? c. Sufficient pauses? d. Adjusting the job skill level of the worker? |  |  |  |
| Is the employee trained in: a. Proper work practices? b. When and how to make adjustments? c. Recognizing signs and symptoms of potential problems? |  |  |  |

**Appendix F– Hand Tool Checklist**

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| **Workstation Evaluated:** | **Date of Evaluation:** |
| “NO” responses indicate areas which should be investigated | **Yes** | **No** | **NA** |
| Are tools selected to limit or minimize: a. Excessive vibration? b. Excessive force? c. Bending or twisting the wrist? d. Finger pinch grip? e. Problems associated with trigger finger? |  |  |  |
| Are tools powered where necessary and feasible? |  |  |  |
| Are tools evenly balanced? |  |  |  |
| Are heavy tools suspended or counterbalanced in ways to facilitate use? |  |  |  |
| Does the tool allow adequate visibility of the work? |  |  |  |
| Does the tool grip/handle prevent slipping during use? |  |  |  |
| Are tools equipped with handles of textured, non-conductive material? |  |  |  |
| Are different handle sizes available to fit a wide range of hand sizes? |  |  |  |
| Is the tool handle designed to not dig into the palm of the hand? |  |  |  |
| Can the tool be used safely with gloves? |  |  |  |
| Can the tool be used by either hand? |  |  |  |
| Is there a preventive maintenance program to keep tools operating as designed? |  |  |  |
| Have employees been trained: a. In the proper use of tools? b. When and how to report problems with tools? c. In proper tool maintenance? |  |  |  |

**Appendix G – Material Handling Checklist**

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| --- | --- |
| **Workstation Evaluated:** | **Date of Evaluation:** |
| “NO” responses indicate areas which should be investigated | **Yes** | **No** | **NA** |
| Are the weights of loads to be lifted judged acceptable by the workforce? |  |  |  |
| Are materials moved over minimum distances? |  |  |  |
| Is the distance between the object load and the body minimized? |  |  |  |
| Are walking surfaces: a. Level? b. Wide enough? c. Clean and dry? |  |  |  |
| Are objects: a. Easy to grasp? b. Stable? c. Able to be held without slipping? |  |  |  |
| Are there handholds on these objects? |  |  |  |
| When required, do gloves fit properly? |  |  |  |
| Is the proper footwear worn? |  |  |  |
| Is there enough room to turn and maneuver? |  |  |  |
| Are mechanical aids used whenever possible? |  |  |  |
| Are working surfaces adjustable to the best handling heights? |  |  |  |
| Does material handling avoid: a. Movements below knuckle height and above shoulder height? b. Static muscle loading? c. Sudden movements during handling (jerking)? d. Twisting at the waist? |  |  |  |
| Is help available for heavy or awkward lifts? |  |  |  |
| Are high rates of repetition avoided by: a. Job rotation? b. Self-pacing? c. Sufficient pauses? |  |  |  |
| Are pushing or pulling forces reduced or eliminated? |  |  |  |
| Does the employee have an unobstructed view of handling the task? |  |  |  |
| Are workers trained in correct handling and lifting procedures? |  |  |  |

**Appendix H – Workstation Evaluation Request**

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| --- |
| **Employee Information** |
| Employee Name: | Job/Title: |
| Department: | Supervisor: |
| Describe areas of concern or discomfort: |
| Are you seeing a medical provider related to this discomfort? Yes No |
| Employee Signature: | Date Submitted: |
| **Program Administrator Response** |
| Workstation evaluated by: | Date Evaluation is Scheduled: |
| Evaluator’s Assessment: |
| Follow-Up Action Plan: |
| Evaluator’s Signature: | Date of Evaluation: |

**Appendix I – Developing Your Industrial Ergonomics Program**

The following is a suggested path for developing an Industrial Ergonomics Program at your organization. This written program is only one part of that path. To achieve success in the program, this must be a living document, meaning it must be continually updated and/or expanded as needed. The steps below need to be repeated often to keep the program effective.

|  |  |  |
| --- | --- | --- |
| **Step** | **Activity to be Completed** | **Date Completed** |
| 1 | Secure upper management commitment |  |
| 2 | Select program leadership* Identify Program Administrator
* Form ergonomics committee (optional)
* Solicit employee participation
 |  |
| 3 | Establish goals for your program  |  |
| 4 | Develop written program in line with your organization’s needs  |  |
| 5 | Provide ergonomics training to all employees |  |
| 6 | Identify and select high-risk jobs, processes, and operations * Use active and passive surveillance to monitor selected jobs
 |  |
| 7 | Perform workstation evaluations to identify risk factors |  |
| 8 | Develop and implement solutions to reduce ergonomic risks |  |
| 9 | Implement controls – keep in mind hierarchy of controls |  |
| 10 | Monitor effects of changes – safety, quality, productivity, etc. |  |