

SECTION 1: MINIMIZING ERGONOMIC-RELATED INJURIES

I. Minimizing Ergonomic-Related Injuries Through Management Leadership, Employee Participation, Job Hazard Analysis, Training and Program Evaluation:

- A.** Management leadership, as demonstrated by an effective MSD reporting system and prompt responses to reports, clear program responsibilities, and regular communication with employees about the program:

The University has an effective MSD reporting system through employee incident reports and follow-up procedures. Communication of the Ergonomics Program is provided through training sessions, new hire training, participation in employee health and wellness fairs, articles in the University's internal news publications, and other resources such as the EH&S web page and pamphlets.

- B.** Employee participation, as demonstrated by the early reporting of MSDs and active involvement by employees and their representatives in the implementation, evaluation, and future development of the ergonomics program.

When employees experience an MSD sign or symptom, it is reported to their supervisor. Staff is involved with the selection and implementation of ergonomically designed equipment including furniture, carts, tools and lifting equipment.

- C.** Job hazard analysis and control, as demonstrated by a process that identifies, analyzes, and to the extent possible, reduces or controls ergonomic hazards using feasible engineering, work practice, and administrative controls to levels below those prescribed in the hazard identification tools.

Workplace assessments are performed to identify potential ergonomic hazards. When hazards are noted, engineering controls are implemented by correctly locating or adjusting the components of the workplace and by recommending the use of ergonomically designed equipment as appropriate. Work practice controls are implemented by alternating repetitive tasks and administrative controls are implemented by job rotation.

- D.** Training of managers, supervisors, and employees (at no cost to these employees) in the ergonomics program and their role in it; the recognition of MSD signs and symptoms; the importance of early reporting; the identification of ergonomic hazards in the workplace, and the methods to control them:

Training is provided to staff members at no cost through such programs as New

Hire Orientation, MyPath on-line training, on-request ergonomics training provided by EH&S, workstation assessments conducted by the EH&S Occupational Safety Unit at no cost to the employee or his/her department (however, any recommended equipment must be purchased by the employee's department), pamphlets, and the EH&S web page. These training tools educate staff about the signs and symptoms of MSDs and the importance of early reporting.

- E. Program evaluation, as demonstrated by regular reviews of the elements of the program and of the effectiveness of the program as a whole, using such measures as reductions in the number and severity of MSDs, increases in the number of jobs in which ergonomic hazards have been controlled, or reductions in the number of jobs posing ergonomic hazards to employees; and the correction of identified deficiencies in the program;

Occupational Safety tracks MSD incidents through review of employee incident reports to determine how, when and where MSDs are occurring. These are reviewed on an ongoing basis, and problem areas are addressed using engineering, administrative and work practice controls. The U of R does not have policies or procedures that discourage employees from participating in the program or reporting the signs or symptoms of MSDs or the presence of ergonomic hazards in the workplace.

II. Responsibilities:

All U of R staff and faculty members are responsible for contributing to a safe and healthy work place. Employees are encouraged to review information and to participate in education and training opportunities that can enable them to contribute to a healthy work environment. Since non-work activities can cause or contribute to discomfort and/or injuries, employees are urged to apply ergonomic principles outside the workplace as well.

A. Managers:

Managers play a leading role in the implementation of strategies to control MSDs in the workplace.

This includes:

- Learning about MSD causes and control options;
- Providing resources to implement ergonomic solutions and remediation;
- Performing or requesting periodic risk assessments to identify ergonomic hazards;

- Purchasing furniture that has maximum adjustment flexibility and complies with standards established by the American National Standards Institute (ANSI) and UR furniture guidelines;
- Developing procedures to respond to employee concerns about MSD problems;
- Restructuring job tasks to reduce risk factors which contribute to MSDs;
- Encouraging supervisors to implement steps to control MSDs in the workplace;
- Providing training to supervisors and employees.

B. Supervisors:

Supervisors must provide employees with appropriate ergonomics training, reinforcement, assistance, and evaluations (where appropriate). There are several ways this can be accomplished:

- Promoting a safe and healthy work environment;
- Maintaining an awareness of ergonomic risk factors;
- Having the work environment appropriately evaluated for proper ergonomic practices and conditions;
- Providing proper workstations and assistive devices;
- Promptly reporting all employee injuries and/or employee complaints regarding repetitive motion or overuse injury symptoms;
- When necessary, seeking assistance from Occupational Safety regarding ergonomic issues;
- Providing adequate recovery time by allowing employees engaged in highly repetitive tasks the opportunity for frequent, short, breaks and alternative work activities;
- Integrating ergonomics into total department safety management.

C. Employees:

Employees must promptly report ergonomic problems to their supervisors. Prompt implementation of workplace changes can significantly reduce the potential for severe injuries or illnesses. Employees are required to:

- Report work-related MSD signs and symptoms to their supervisor;
- Follow safe work practices;
- Make effective use of recovery periods;
- Follow ergonomic recommendations;
- Adjust and use their workstation and equipment as outlined in the ergonomic guidelines (see appendices).

D. Occupational Safety Unit (OSU):

- Coordinates the ergonomics program to reduce ergonomic-related injuries at UR;
- Provides guidance on modifying the workplace to minimize the potential for injuries and illnesses;
- Provides ergonomics training for employees, supervisors, and managers;
- Analyzes and reports trends in injury or incidence, and severity;
- Reviews employee incident reports on an ongoing basis to track MSDs;
- Evaluates individual and departmental workstations;
- Provides assistance and advice on the selection of ergonomically appropriate furniture and equipment.

E. Human Resources Department:

The Human Resources Department manages the Workers' Compensation Insurance and Return to Work Programs. The Return to Work (RTW) Program is designed to help University employees reach full recovery following illness or injury by providing timely and appropriate treatment while the employee continues in worthwhile and meaningful work. The goal of the RTW Program is to return the employee within 60 days or as soon as his or her condition permits. Refer to University Policy # 271 for Workers Compensation Benefit and Return to Work Program guidelines.

F. University Health Service and Occupational Medicine

Reserved

G. UR Purchasing Department:

The UR Purchasing Department and Occupational Safety can provide assistance and advice on the procurement of ergonomically appropriate furniture and equipment. Purchasing can be reached at 275-2002.