

HARBOR-UCLA MEDICAL CENTER

SUBJECT: ERGONOMICS PROGRAM

POLICY NO. 462

PURPOSE:

To implement and maintain an Ergonomics Program to improve employee comfort and well-being by identifying and correcting ergonomic risk factors on the job.

POLICY:

Harbor-UCLA promotes continuous improvement for the efficiency, comfort, and well-being of all employees through a team effort of management and employee involvement. All employees should always use proper body mechanics while performing their duties. When feasible, efforts will be made to minimize repetitive motion injuries (RMIs). Such efforts will include worksite evaluations, control of exposures that have caused RMIs, and employee education and/or training.

PROCEDURE:

At Harbor-UCLA Medical Center, trained staff will evaluate jobs that have been identified as contributing to RMIs so as to prevent occurrence of work-related musculoskeletal disorders by controlling or eliminating risk factors that cause such disorders.

I. WORKSITE ANALYSIS

Worksite analysis will be performed in areas in which multiple employees are known to have sustained RMIs while performing identical job processes or work activities. OSHA 300 logs and worker's compensation injury reports may serve as resources for identification of problematic areas.

The worksite analysis can be performed by the Environmental Safety Office/DHS Human Resources or appropriately trained hospital staff. Workplace risk factors to be considered may include forceful exertions, extreme postures, repetitive exertions, and or durations of exertions and postures.

II. ENVIRONMENTAL CONTROLS

Any exposures or conditions that are known to be the predominant cause (i.e., 50% or more) of a medically diagnosed RMI should be corrected. If the exposure or condition can not be corrected, it must be minimized to the extent possible. Consideration should be given to engineering or administrative controls.

EFFECTIVE DATE: 03/99

SUPERSEDES:

REVISED: 02/02, 11/10, 04/14, 07/17

REVIEWED: 02/02, 09/04, 06/06, 11/10, 04/14, 07/17

REVIEWED COMMITTEE: Environment of Care Committee

APPROVED BY:

Kim McKenzie, RN, MSN, CPHQ
Chief Executive Officer

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Chief Nursing Officer

Signature(s) on File.

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A. Engineering Controls

Ergonomic hazards may be reduced through engineering controls, such as the following:

1. Reduce bending motions through the use of lift tables and work dispensers.
2. Reduce reaches by eliminating unnecessary barriers.
3. Reduce lifting and lowering forces by raising the work area.
4. Reduce push/pull forces by using slides and chutes.
5. Reduce grip forces by increasing the friction of grasping surfaces.
6. Eliminate twisting motions by delivering materials and tools in front of the operator.
7. Eliminate carrying forces by using hand trucks.
8. Eliminate extreme hand and arm postures by using more appropriate hand tool geometries.

B. Administrative Controls

Ergonomic hazards also may be reduced through administrative controls, such as the following:

1. Rotate through different tasks or operations over the course of the work day.
2. Enlarge job content to provide less exposure to ergonomically hazardous tasks.
3. Enforce work practices that reduce exposure to RMIs.
4. Provide regular work breaks to recover from the strain of repetitive motions.

Other low-cost considerations to take in an office environment include:

5. Adjust the contrast/brightness controls of computer monitors to improve viewing.
6. Place the telephone to the non-dominant hand side of the work space.
7. Position the computer monitor in front to eliminate neck and back strain.
8. Keep the blinds closed on windows to reduce glare on the computer screen.
9. Use document holders to alleviate neck bending to read documents while typing.
10. Place the computer CPU on the floor or in a CPU caddie to increase available desk space.
11. Learn to use available chair adjustments and take the time to adjust the chair.
12. Use a foot rest if needed to position the seat to a comfortable height.

III. STAFF TRAINING**A. Employees**

Employees who are potentially exposed to ergonomic hazards should be trained on the hazards associated with their jobs, including the types, causes, symptoms, treatment and the prevention of RMIs.

B. Supervisors/Managers

Supervisors/managers for employees who are at risk of RMIs should request assistance from Human Resources and/or the Environmental Safety Office to identify potential risk factors. Staff who are at risk for RMIs should be educated on the following:

1. An understanding of the hospital's Ergonomics Program.
2. How to recognize workplace risk factors and the ways to reduce exposure to those risk factors.

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3. The signs and symptoms of work-related musculoskeletal disorders, the importance of early reporting, and medical management procedures.
4. Reporting procedures when risk factors are identified and/or RMIs are encountered (i.e., informing the supervisor and completing appropriate forms).
5. Practicing and demonstrating proper use of implemented control measures and safe work methods that apply to the job.

IV. ENFORCEMENT

Constant awareness of and respect for ergonomics hazards and compliance with all safety rules are considered conditions of employment. Supervisors/managers reserve the right to take disciplinary action, up to and including termination, for failure to follow appropriate safety practices, including the guidelines outlined in this program.

V. AUTHORITY

Title 8, Chapter 4, Section 5110, Ergonomics
California Labor Code Section 142.3 and 6357

VI. REFERENCE

Hospital Policies and Procedures Manual, Policies 433, 463, 464

VII. ATTACHMENT(S)

- OSHA 300, *Log of Work-Related Injuries and Illnesses*
- Office Worker Ergonomic Survey (RMIs Form)