## Is Your Ergonomics Program Good Enough?

BY JEAN FEINGOLD

anual material handling (MMH) continues to be the number one reason for workers compensation claims and lost time injuries," noted Jim Galante, chairman of MHI's Ergonomic Assist Systems and Equipment (EASE) Industry Group and director of business development for MHI member Southworth Products Corp. "The majority of these claims are lower and upper back related, which are the most expensive types of claims. Good ergonomics programs can significantly reduce those incidents, but, like safety and quality programs, they are journeys, not destinations, and must be regularly reviewed and routinely strengthened."

How can you tell whether your current ergonomics program is adequately protecting your workers? Begin by determining when you last reevaluated it. If it's been more than a year, chances are good it could use improvement. Are your program metrics or key performances indicators moving in the right direction? Here are some things to consider.

Has your facility introduced any new equipment since the last ergonomics program update? Were employees trained to use the equipment in an ergonomically correct way? Have your supervisors or safety team members observed these workers to see whether they use it properly? Even if the new



equipment is designed to make lifting easier, if employees avoid or misuse it, they could experience stress leading to injuries. Regular observation of how employees do their jobs is necessary to ensure they are working safely and optimizing their performance.

## Look for changes in operations

Has the work process changed? Look at the order in which things are constructed, assembled, connected or inspected at final assembly. Are there



interim steps, tests or verifications needed now that were not previously required? Have these work process changes altered the MMH requirements?

Has the nature of the materials you are handling changed? Are they heavier? If so, can they still be handled without an assistive device? Have objects changed in size or shape? Manually handling taller objects can force workers to raise their hands above their shoulders, potentially causing upper back or shoulder issues. Are orders now sometimes picked in less than case quantities when they were formerly picked only in full cases? All these types of changes may require different handling methods to avoid injury. Do you have the right equipment to handle the new materials and do employees know the right way to use it? Does such equipment optimize both human and system performance and productivity while maintaining or even enhancing product quality?

If your existing equipment is not appropriate for new materials or processes ergonomic issues and production inefficiencies could result. It is best to contact an equipment supplier (available at mhi.org\EASE) or an ergonomics consultant to identify the right equipment to install so new tasks can be done in the safest and most efficient manner. "These experts may also help you develop







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training programs for employees at all levels (including leadership, engineering, ergo teams and hourly workers) that will build internal expertise to enhance and sustain your ergonomics program and ensure proper use of new equipment or tools," noted Jeff Hoyle, MS, CPE, director of ergonomic services at The Ergonomics Center at North Carolina State University.

Have there been changes in government or company regulations related to how you handle materials? Have your customers demanded changes affecting how your workers must interact with new designs? Make sure workers are not being put at risk of injury while complying with new regulations or customer changes through handling materials in ways that are not ergonomically sound.

What is your worker injury history? How many injuries have there been in the past year and what are their root causes? Looking back over a longer time period may reveal trends. Are there common elements? Seeing several back injuries, high turnover, chronic complaints, unusually high sick day incidents or numerous transfer requests from workers performing the same task suggests that task likely needs an ergonomic redesign.





## Research supports ergonomic interventions

"A comprehensive review of 250 case studies of ergonomic programs and ergonomic control interventions by the Washington State Department of Labor and Industries (see chart) reported an average reduction in work-related musculoskeletal disorder (WMSD) incidence rate of 65 percent by implementing ergonomics programs and/or equipment interventions," said Hoyle. "On average, results showed lost workdays were reduced by 75 percent, workers' compensation costs were reduced by 68 percent, productivity increased by 25 percent and turnover and absenteeism were reduced by 48 percent and 58 percent, respectively. The average payback period reported was 0.7 years.

"The Centers for Disease Control has found WMSDs cost employers between \$45 and \$54 billion per year in workers compensation, lost wages and lost productivity," Hoyle continued. "Implementation of sound ergonomic programs can help employers mitigate such costs through early reporting and intervention, employee awareness and empowerment and prevention through design strategies, resulting in lower premiums and increased productivity. Making jobs less physically demanding and involving employees in ergonomics improvement efforts helps reduce turnover and increases employee retention, resulting in substantial savings to a company's bottom line."

"It is impossible to achieve perfect ergonomics in MMH because some amount of effort by human workers is involved," Galante said. "However, it is possible to make these jobs less stressful on workers' bodies by having them employ proper techniques and by providing them with appropriate tools to reduce the stress. Expense, time and other considerations may make it impractical for MMH tasks to be done 100 percent ergonomically. But doing something to fix part of the problem moves your company closer to the goal of a safer, more efficient workplace."

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