

DHHS POLICIES AND PROCEDURES

Section V:	Human Resources
Title:	Safety and Benefits
Chapter:	Ergonomics Policy
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Purpose

To formally and systematically control the incidence and severity of ergonomic disorders by establishing a program for the department that provides hazard identification, prevention and control, medical management, and training and education.

Policy

1. The Department of Health and Human Services (DHHS) shall implement an effective program to promote employee well-being that addresses ergonomic issues.
2. All employees shall receive information related to ergonomics and the department's ergonomics program at the time of orientation.
3. Each division/facility/school shall work to prevent or minimize identified ergonomic hazards and injuries or illnesses.
 - A. Purchases of equipment and furniture shall be reviewed per the DHHS Safety and Benefits Policy, "Review of Purchases and Service Contracts for Safety and Health Concerns," ensure that ergonomic factors are addressed.
 - B. Furniture and equipment purchased to specifically address an individual employee's ergonomic needs shall be transferred with the employee in the event of transfer within the department.
4. It shall be the responsibility of each employee to report discomfort, pain, illness, or injury that may be related to an ergonomic hazard.
 - A. When ergonomic pain and discomfort are reported, a qualified assessor shall evaluate the workplace and work activities to determine the cause and recommend ergonomic solutions.
 - B. When recommendations are made with respect to correcting specific ergonomic hazards, the affected employee and supervisor shall respond to the recommendations in a timely manner by developing and implementing a strategy to carry out the agreed upon actions.

It shall be the responsibility of supervisors and managers to take ergonomics into account in planning and supervising employees' work activities.

Definitions

See DHHS Safety and Benefits Policy, Establishment of the Safety and Health Program, Definitions Section:

1. **Breaks** - changes in activity that alter posture, muscle groups used, focal lengths (for reading or computer usages), or short periods of exercise or stretching.
2. **Discomfort** - unpleasant musculoskeletal sensations arising from the nature of an employee's work, which are of such strength as to noticeable but do not rise to the level to be considered pain (see definition of pain-below).
3. **Ergonomics** - a multi-disciplinary activity dealing with the interactions between people and their total working environment.
4. **Ergonomic Hazards** - workplace conditions that involve an improper fit between the employee and the work due to faulty workstation design, improper work methods, improper tools, excessive vibration, improper job design, and other biomechanical stresses to the employee.
5. **Ergonomic Risk Factors** - conditions that can result in musculoskeletal disorders (MSD), such as repetition, awkward static loading, vibration, forces/weight, environmental conditions, mechanical contact stress, and lack of employee controlled pace.
6. **Hot Spots** - reported instances of discomfort or pain that may have resulted from an ergonomic hazard.
7. **Illness** - a diseased condition arising gradually from the nature of the employee's work, excluding all ordinary diseases of life to which the general public is equally exposed outside of the employment.
8. **Injury** - an injury to any part of the body except the back that results from an accident arising out of and in the course of employment; a disabling injury to the back that results from a single traumatic incident arising out of and as a result of employment; or a hernia or rupture appearing suddenly after a single traumatic incident arising out of and in the course of employment.
9. **MSD** - an injury or disorder of the muscle, tendons, ligaments, joints, nerves, blood vessels, or related soft tissue including a sprain, strain, or inflammation, that usually arises from repeated biomechanical stress due to work-related ergonomic hazards. (Also referred to as Cumulative Trauma Disorders, Repetitive Strain Injuries, and/or Repetitive Trauma Disorders.)
10. **Pain** - unpleasant musculoskeletal sensations arising from the nature of an employee's work, which are of such strength to interfere with the performance of work and/or normal activities.

Implementation

1. The DHHS Safety Program Manager shall be responsible for the overall Ergonomics Program and shall assist its implementation by:
 - A. Developing general operating procedures for the implementation of this policy.
 - B. Providing technical advice and consultative support to divisions/facilities/schools.
 - C. Identifying and training qualified assessors available to each division/facility/school.
 - D. Overseeing the implementation of the program by periodic inspection and audits.

2. The division/facility/school director shall be responsible for the implementation of the Ergonomics Program at his/her division/facility/school, by:
 - A. Authorizing identified personnel to perform workplace assessments as needed.
 - B. Providing resources to address ergonomic pain and discomfort prevention and identified hot spots.
 - C. Enforcing the requirements of this policy and associated procedures.
 - D. Developing specific operating procedures, incorporating the general procedures if deemed necessary, for the division/facility/school.

3. Each supervisor shall:
 - A. Ensure, upon becoming aware of an employee reporting ergonomic workstation issues, that the proper notification is submitted by the supervisor.
 - B. Upon issuance of the ergonomic assessment, confer with the affected employee to develop a strategy for the implementation of the recommendations within that assessment.
 - C. Implement each developed strategy and ensure the employee's compliance.
 - D. Ensuring that each employee receives the time necessary to attend training.

4. Each employee shall:
 - A. Report ergonomic pain and discomfort to his/her supervisor in a timely manner.
 - B. Cooperate with the resulting ergonomic assessment.
 - C. Cooperate with the supervisor in developing a strategy to implement the assessment recommendations and comply with that strategy.
 - D. Attend required training.

References

North Carolina General Statutes:

1. Chapter 95, Occupational Safety and Health Act of North Carolina, 95-129(1) and 95-148(1)
2. Chapter 143, Article 63, State Employees' Workplace Requirements Program for Safety and Health, 143-582(2) through (6) and (9)

North Carolina Administrative Code, 25 NCAC 1N.0105(a)

Workplace Requirements Program Manual for Safety and Health

Section 2:

1. Policy: 2.2: 1.g., 2.a., 4.a., 5.a., 5.b., 5.c., 8.a., and 9.a.

Section 5:

1. Policies: 5.3 and 5.4

Applications Manual for the Revised NIOSH Lifting Equation, January, 1994 (DHHS (NIOSH) Publication No. 94-110)

OSHA's Ergonomic Guidelines for Nursing Homes

For questions or clarification on any of the information contained in this policy, please contact [Human Resources](#). For general questions about department-wide policies and procedures, contact the [DHHS Policy Coordinator](#).