



ERGONOMICS POLICY

An ergonomics program is a systematic process that communicates information so that adequate and feasible solutions to ergonomic risks can be implemented to improve the workplace. It is the policy of the City of Oakley to provide all employees with a safe and healthy workplace. We are committed to reducing and/or eliminating the risk factors associated with musculoskeletal disorders (MSDs). This program enables the City of Oakley to meet the requirements of the California Ergonomics Standard (CCR 8, Section 5110), which targets repetitive motion injuries (RMIs) and is integrated into the City's written Injury and Illness Prevention Program. A copy of this policy can be found on the City of Oakley's Human Resources password protected page.

PURPOSE

The purpose of this policy is to support and promote cooperation in the analysis, modification and improvement of stressful tasks and environments, thus increasing employee productivity, work quality and efficiency, while decreasing worker's compensation claims. We believe that we must apply ergonomic principles to the workplace and change or modify tools, machinery, work stations and work practices whenever practical and feasible. The two most essential parts of a successful Ergonomics Program are management commitment and employee awareness.

DEFINITIONS

Musculoskeletal Disorders:

Musculoskeletal disorders (MSDs) are disorders of the muscles, nerves, tendons, ligaments, joints, cartilage and spinal discs. MSDs do not include disorders caused by slips, trips, falls, motor vehicle accidents, or other similar accidents. Symptoms of MSD can indicate that one or more ergonomic stressors may be present. There may be an individual difference in susceptibility and symptoms among employees performing similar tasks. Any symptoms are to be taken seriously and can include:

- Numbness
- Tightness
- Swelling
- Stiffness
- Pain
- Tingling
- Redness
- Loss of Coordination

Ergonomic Stressors:

Ergonomic Stressors are defined as conditions that pose a biomechanical stress to the human body associated with an increased risk for development of musculoskeletal disorders (MSDs). These stressors include but are not limited to repetition, forceful motion, extreme postures, static postures, quick motions, contact pressure, vibration, and extreme temperatures.

- **Repetition:** the number of motions or movements that are performed per cycle or per shift
- **Forceful motion:** the muscles used to produce force in order to perform necessary activities such as lifting, grasping, pinching, pushing, etc.
- **Extreme Postures:** when muscles are required to work at a level near or at their maximum capacity.
- **Static Postures:** a special type of awkward posture which occurs when a body part is not moving, but is still doing work. Examples include sitting in a chair, prolonged bending, kneeling, squatting or twisting.
- **Contact Pressure:** prolonged contact of the body with a hard surface or edge. An example of this pressure is resting the wrists or forearms on an edge of a desk while typing.
- **Vibration:** Exposure to local vibration occurs when a specific part of the body comes in contact with a vibrating object, such as a power hand tool. Exposure to whole-body vibration can occur while standing or sitting in vibrating environments or objects, such as when operating heavy-duty vehicles or large machinery.
- **Extreme Temperatures:** working in an environment that is too hot or cold. Cold temperature reduces feeling, blood flow and strength, while hot temperature increases fatigue.

ROLES AND RESPONSIBILITIES

For our ergonomics policy to be effective, all employees must understand their roles and responsibilities:

The City Manger's Office is responsible for the overall leadership and administration of the Ergonomics Program. The Assistant to the City Manager has been delegated by the City Manager to serve as the Ergonomics Program Coordinator.

Ergonomics Program Coordinator responsibilities include:

- Attend ergo training to familiarize themselves with the elements of the program, including identification, assessment, and control of the following:
 - Work-related ergonomics risk factors;
 - MSD signs and symptoms;
 - Requirements and procedures for early reporting;
 - Medical management;
- Ensure that a system is in place for workers to report MSD signs or symptoms and suspected work-related risk factors to managers;
- Facilitate ergonomics assessments and evaluations upon request;
- Ensure that supervisors and workers have received the appropriate training;
- Ensure that suggested control measures, following an evaluation are implemented in a timely manner and used correctly;
- Ensure that accurate records are kept, and provide materials upon request as well as for joint health and safety committee meetings;
- Review and update this program as needed.

Manager responsibilities include:

- Maintain responsibility for the health and safety of all workers within their departments by actively supporting the ergo program.

Supervisor responsibilities include:

- Be aware of ergonomic issues and the City's Ergo Program; these include correct body positioning and basic furniture and equipment adjustment;
- Observe employees at work to ensure workers are given and use proper tools, equipment, parts and materials as required;
- Respond quickly to worker report;
- Evaluate workstation configuration (if required);
- Offer recommendations and/or adjustments when necessary;
- Refer difficult situations to the Human Resources Department, through the Department Manager, for further assessment

All employee responsibilities include:

- Be aware of ergonomic issues; these include correct body positioning and basic furniture and equipment adjustment;

- Use the appropriate tools, equipment, parts, materials, and procedures in the manner established by managers and supervisors and report when they are not in good condition;
- Take responsibility for personal health and safety;
- Ask for help when needed;
- Report discomfort to supervisors;
- Report the need for repairs of equipment to supervisors or other appropriate persons;
- Report MSD signs or symptoms and work-related MSD hazards to your manager/supervisor as early as possible to facilitate proactive interventions and/or prompt medical treatment.

WORK STRATEGY CONTROLS

When an ergonomic hazard has been identified, the Human Resources Department will work with the identifying department on minimizing, or eliminating when possible, the hazard. There are three general approaches to controlling ergonomic hazards:

- **Engineering Controls** encompass the redesigning of the workplace and the elimination of the risk factors or hazards. Examples of engineering controls include, but are not limited to, restructuring tasks, providing adequate work space for task motions and installing adjustable equipment.
- **Administrative Controls** are workplace policies, procedures, and practices that minimize the exposure of workers to risk conditions (i.e., remove the worker). Examples of administrative controls include, but are not limited to, providing adequate rest breaks, establishing task rotation and monitoring work practices to reinforce safe work procedures.
- **Work Practice Controls** are changes in the way the employee performs the physical work activities of the job that reduce or control exposure to RMI hazards. Alternating work tasks, taking required breaks, purchase of proper eyeglasses, following ergonomic recommendations, regular stretching and maintenance of overall health are examples of work practice controls.

- **Personal Protective Equipment (PPE)** requires an employee to use equipment to prevent exposure to the ergonomic risk factor/hazard. Examples of PPE include gloves that protect the hands from cuts and clothes that protect against the cold.

REPORTING PROCEDURES AND WORKSITE EVALUATIONS

Ergonomic stressors should be dealt with on a departmental basis whenever possible. If necessary, an employee or their supervisor may request an ergonomic evaluation of a work area or work process by submitting to Human Resources, via their supervisor or department director, a written request. Human Resources will then oversee an ergonomic evaluation. Once completed, Human Resources will be provided with written documentation of the evaluation and will work with the employee and his/her supervisor to reduce/ eliminate stressors, based on the evaluation.

- Worksite evaluations and recommended ergonomic solutions will be documented. The evaluation records will be kept in Human Resources.
- The employee's direct supervisor will be responsible for implementing any recommended corrective actions. The employee will be informed by his/her supervisor of the potential exposures and recommended solutions. The employee will be asked for input regarding ideas about improving ergonomics in his/her work area.
- The employee will be responsible for using equipment correctly and performing tasks as outlined in the corrective action plan.
- Human Resources will contact the supervisor and/or employee within 30, 60, and 90 days to conduct a follow-up worksite evaluation to measure the effectiveness and/or implementation status of the recommendation(s).

MEDICAL MANAGEMENT

Pursuant to the law, the City of Oakley provides medical care to all employees injured at work. All work-related injuries and illnesses will be referred through our regular workers compensation procedure unless the injured employee has notified the City of Oakley in writing that other provisions have been made prior to an injury or illness (Pre-designation of Personal Physician).

TITLE 8 - CALIFORNIA ERGONOMICS STANDARD

Subchapter 7. General Industry Safety Orders

Group 15. Occupational Noise

Article 106. Ergonomics

5110. Repetitive Motion Injuries.

(a) Scope and application. This section shall apply to a job, process, operation where a repetitive motion injury (RMI) has occurred to more than one employee under the following conditions:

1. Work related causation. The repetitive motion injuries (RMIs) were predominantly caused (i.e. 50% or more) by a repetitive job, process, or operation;
2. Relationship between RMIs at the workplace. The employees incurring the RMIs were performing a job process, or operation of identical work activity. Identical work activity means that the employees were performing the same repetitive motion task, such as but not limited to word processing, assembly or, loading;
3. Medical requirements. The RMIs were musculoskeletal injuries that a licensed physician objectively identified and diagnosed; and
4. Time requirements. The RMIs were reported by the employees to the employer in
5. the last 12 months but not before July 3, 1997.

(b) Program designed to minimize RMIs. Every employer subject to this section shall establish and implement a program designed to minimize RMIs. The program shall include a worksite evaluation, control of exposures which have caused RMIs and training of employees.

1. Worksite evaluation. Each job, process, or operation of identical work activity covered by this section or a representative number of such jobs, processes, or operations of identical work activities shall be evaluated for exposures which have caused RMIs.
2. Control of exposures which have caused RMIs. Any exposures that have caused RMIs shall, in a timely manner, be corrected or if not capable of being corrected have the exposures minimized to the extent feasible. The employer shall consider engineering controls, such as work station redesign, adjustable fixtures or tool redesign, and administrative controls, such as job rotation, work pacing or work breaks.

3. Training. Employees shall be provided training that includes an explanation of:
 - (A) The employer's program;
 - (B) The exposures which have been associated with RMIs;
 - (C) The symptoms and consequences of injuries caused by repetitive motion;
 - (D) The importance of reporting symptoms and injuries to the employer; and
 - (E) Methods used by the employer to minimize RMIs.

(c) Satisfaction of an employer's obligation. Measures implemented by an employer under subsection (b)(1), (b)(2), or (b)(3) shall satisfy the employer's obligations under that respective subsection, unless it is shown that a measure known to but not taken by the employer is substantially certain to cause a greater reduction in such injuries and that this alternative measure would not impose additional unreasonable costs.

Note: Authority cited: Sections 142.3 and 6357. Labor Code. Reference: Sections 142.3 and 6357. Pulaski v. Occupational Safety & Health Stds. Bd. (1999) 75 Cal.App.4th 1315 [90 Cal. Rptr. 2d 54].