

Ergonomics Program Health Checklist

October is National Ergonomics Month!

Use this checklist for determining the health of your ergonomics program, identify gaps, and build a prioritized action plan.

How to Use This Checklist

For each item, check if completed. Keep all related documents - policies, assessment reports/results, training certificates, safety committee meeting minutes, injury logs, ergonomic equipment implemented, and facility modifications - with your ergonomics program files.

Does Minnesota statute 182.677 apply to your facility?

	Licensed health care facility: hospital (NAICS 622110, 622210, 622310), outpatient surgical center (621493), or nursing home (623110).
	Warehouse distribution center: Minnesota site with 100 or more employees and NAICS 493110, 423110 to 423990, 424110 to 424990, 454110, or 492110.
	Meatpacking site: Minnesota site with 100 or more employees and NAICS 311611-311615, except 311613.

ErgoWorks tip: MNOSHA states that employee counts include all individuals who meet the statutory definition of employee, including part-time, temporary, and seasonal employees. If applicability is uncertain, verify your NAICS code and facility status with MNOSHA.

Written Ergonomics Program

	The current written ergonomics program establishes a plan to minimize the risk of employees developing or aggravating MSDs.
	The written program prioritizes eliminating ergonomic risk; where risk remains, it addresses feasible engineering and/or administrative controls.
	The ergonomics program is referenced in the the AWAIR program.
	Program responsibilities are assigned to specific roles, and the current version is accessible to those responsible for implementation.

ErgoWorks tip: Store your written ergonomics program in a location where it is easily accessible to many in the event of an OSHA audit.

Ergonomic Assessments

	A process is established to identify job tasks for ergonomic assessment, with priority given to tasks or work areas known to have a higher risk of musculoskeletal disorders (MSDs)
	Assessment priorities consider injury data: such as OSHA recordable logs, early reporting, workers' compensation claims and costs, first-aid or onsite-care logs, incident reports, near-miss reports.
	Appropriate ergonomic assessment methods/tools are selected for the work being evaluated, and results are documented.
	Assessment reports identify the task, risk factors/exposures, results or score, recommended controls, responsible owner, and follow-up status.
	The safety committee is directly involved in ergonomics worksite assessments.
	Hazards are eliminated where possible; remaining risk is reduced through feasible engineering controls, administrative controls, or a combination.
	Implemented solutions are reassessed or otherwise evaluated to determine whether ergonomic risk was reduced.

ErgoWorks tip: Standardized tools can help quantify and identify the body parts at risk. ErgoWorks uses task-appropriate methods such as REBA, RULA, NIOSH Lifting Equation, Strain Index, and Snook Tables.

Ergonomic Assess + Equip Special

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Schedule a call today from our website at www.ergoworksMN.com

Employee Training

	All covered employees receive training on the facility ergonomics program and its benefits.
	Training identifies each individual on the employer's safety committee.
	Training covers early signs and symptoms of musculoskeletal injuries and the procedures for reporting them.
	Training covers procedures for reporting injuries and other hazards.
	Training explains administrative and engineering controls related to ergonomic hazards that are in place or planned for the employee's position.
	Training explains the company's policies against programs, policies, or practices that discourage reporting of injuries, hazards, safety/health violations, ergonomic hazards, or MSD symptoms.
	New employees are trained before starting work. Current employees receive initial training and ongoing annual training.
	Training occurs during working hours, employees are compensated at their standard rate, and content is delivered in language and vocabulary employees understand.
	Training updates are communicated to employees as soon as practicable when information changes.

ErgoWorks Tip: Keep employee training records for all ergonomic content stored with your ergonomic program documents for easy reference in an OSHA audit.

Early Reporting & Employee Participation

	A written early-reporting procedure encourages employees to report MSD symptoms before they progress to serious injury or lost time.
	Employees know how, when, and to whom to report discomfort, symptoms, ergonomic hazards, and injuries.
	The organization has a defined response path after an early report, including evaluation of work-related risk factors and appropriate corrective action.
	No incentive, policy, practice, supervisory behavior, or communication discourages reporting.
	Employees have a defined process to submit possible solutions to reduce, control, or eliminate workplace MSD risks.
	Ergonomics-program feedback is solicited through and reviewed by the required safety committee.
	The safety committee participates in the annual ergonomics-program evaluation.

ErgoWorks tip: Onsite injury prevention services are a ideal next step for early reports of MSD symptoms, with the goal of keeping employees at work, healthy, and productive.

Facility & Work-Process Changes

	Procedures require ergonomics to be considered during physical plant modifications and major construction projects.
	Purchasing/design teams consider ergonomic risk before introducing new workstations, tools, equipment, layouts, or processes.
	The ergonomics program is evaluated whenever a change to the work process occurs.
	Significant changes and resulting ergonomic decisions are documented for follow-up.

Annual Program Evaluation

	A documented procedure requires an ergonomics-program evaluation at least annually.
	The annual evaluation reviews how the organization mitigates work-related risk factors after employees report MSD symptoms.
	The annual evaluation determines whether implemented ergonomic solutions were successful in reducing MSD risk factors.
	The evaluation determines if ergonomics program goals were met.
	The safety committee participates directly in the annual evaluation.
	Findings are converted into updated goals / priorities, owners, target dates, and is reflected in an updated ergonomics program for the next year.

ErgoWorks tip: We can facilitate the ergonomics program annual review with your safety team.

Recordkeeping

	For each training, a dated and signed certification by the training provider is maintained.
	Training certification includes the name and job title of each employee who received training and the date training occurred.
	Training certification states that the training was consistent with MN Statute 182.677 (if applicable) and includes a brief summary or outline of the training content.
	Records of all worker visits to onsite medical or first-aid personnel are maintained for the last five years, regardless of severity or injury type.
	Records of all musculoskeletal disorders suffered by employees are maintained for the last five years.

ErgoWorks tip: We have a variety of ergonomic training modules ready for employee training.

October Action Plan

Gap	Owner	Target Date for Completion	Ergonomic Program Updated

Need help turning checklist gaps into an improved ergonomics program?

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