Office Ergonomics at Abbott Vascular: Moving Up the Curve



Implementing and managing a successful office ergonomics program does not happen overnight. Often, companies that become successful follow a phased-in approach that starts by reacting to injuries, and moves toward proactively eliminating ergonomic risk, progressing on what we call the Ergonomics Maturity Curve™ (see next page).

Mike Ha, CPE, CIE, MSIE, and Global Ergonomics Manager for Abbott Vascular (AV), knows the phases of this curve quite well. He was hired in 2008 to implement the company's ergonomics process. At the time, AV did not have a comprehensive ergonomics program; ergonomic injuries or complaints were addressed on a case-by-case basis.

Ha recognized that the lack of an ergonomics process increased employee risk for injury. "The underlying problem in the office environment at AV was that most of our 4,000 computer users were spending the majority of their time at their computers, and the risk of developing ergonomic injuries was increasing. I knew we needed to take a proactive approach to identify and address ergonomic issues."

Ha began by implementing both engineering (proper tools and equipment) and administrative (training, stretching, job rotation) controls in a reactive approach to address existing ergonomic risks in both the office and in the manufacturing environments. At the same time, he took a proactive approach to prevent the development of new ergonomic risks by incorporating ergonomic design criteria when selecting equipment and designing workstations and production lines.

For the office environment, finding the time to conduct face-to-face assessments, and scheduling time to follow up was time-consuming and difficult to schedule for all the users. "When we started doing the assessments, we found that most employees had the right equipment but didn't know how to adjust it, and some employees needed accessories,

like keyboard trays and footrests, to allow them to work comfortably. We also had a hard time getting the departments to purchase the recommended equipment and accessories. It was hard to implement any fix quickly."

While Ha made swift progress in the manufacturing environment, things moved much more slowly in the office environment due to the large number of employees. To get the process moving faster, he knew he needed a program to help him train employees, prioritize issues, and track equipment needs. "I knew we had to narrow down the users who needed face-to-face assessments. We didn't have the resources to look at everyone," he says.

Ha filled the gap with VelocityEHS Office Ergonomics, an office ergonomics web-based training, self-assessment, and management tool. Starting with a pilot program in July 2011, Ha rolled out the software to 60 employees. Because the majority of the users found the program valuable and effective, he implemented it at all U.S. sites by late 2012. It was then mandated that all employees complete the training by a specified date, which resulted in 100-percent participation.

The results surprised Ha. "We had very few high-risk reports. The data showed that less than one percent of our users were at high risk, 6 percent were at moderate risk, and 93 percent of our users were at low risk," says Ha. This told him two things: "First, we are doing pretty well in terms of our initial setup, and second, with the right training, the majority of people can fix their own problems."

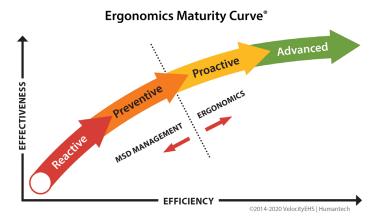
The data provided more than risk assessments. The management portion of VelocityEHS Office Ergonomics, provided him with the information he needed to establish a budget to purchase and stock equipment and accessories. "The reports indicated that a common contributor to our highrisk scores is improper keyboard and mouse height. Another



finding was the height of the users' laptops when they were used as an additional screen. We found that their laptops were placed too low. For those people, we had to provide pedestals to raise the height."

"With the use of VelocityEHS Office Ergonomics across U.S. sites, we expect our employees will gain the basic knowledge, and get the proper equipment, to set up their workstations properly. This will allow them to work comfortably and minimize their risk of injury. We will also be able to implement fixes more quickly," explains Ha. VelocityEHS Office Ergonomics training and self-assessment is a continuous process; each employee must complete the program every two years.

Due to the positive impact VelocityEHS Office Ergonomics has made at the U.S. sites, Ha is expanding the program internationally. By the end of 2013, Abbott Vascular's five international sites (Costa Rica, Puerto Rico, Ireland, the Netherlands, and Switzerland) will be on their way up the Ergonomics Maturity Curve too.



The Curve illustrates the evolutionary process companies go through to develop sustainable success in the reduction of musculoskeletal disorders (MSDs). The key is to keep the program moving toward the top right corner of the graph.

The four primary approaches companies use to reduce MSDs can be linked to the phases of the maturity curve.

In the **reactive** phase, when a person first experiences an MSD, he or she must be treated and the cause of the injury must be identified and changed. In other words, the action causing the injury must be stopped; the employee must find a different way to do the job but maintain efficiency in the process.

During the **preventive** phase, the focus is on measuring the individual person's physical abilities (strength, reach, range of motion) and matching their capabilities to the task. To obtain proper measurements and to determine job descriptions for each job, companies must complete a physical demands analysis (PDA). Next, a pre-work screening of a prospective employee is conducted to understand his or her capability; the employee is then matched to a functional job description based on that capability.

The **proactive** phase involves quantifying the risk factors that cause MSDs and then prioritizing them according to their rank within a given operation. Once the risk factors are identified, plans are put in place to "fix the job" by modifying the layout or design of existing workstations, tools, and equipment to fit the people doing the work.

In the **advanced** phase you "design out the risk" or "fix the future" by placing ergonomic design standards in the hands of engineers and procurement and facility planners during the design, build, and test phases of manufacturing, equipment selection, and facility or office planning. Organizations with the most comprehensive ergonomics programs have emphasized activities in this phase.

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