

## MSD Prevention: Responding To Employee Concerns

yorku.ca/ergo Revised 2013-Dec-13

Date:

## Worker:

Supervisor:

	Difficult Activities	Corrective Actions / Next Steps to Consider
Step#1 (If discomfort has been reported) Provide advice on health care options (e.g. sports injury clinics).		
<b>Step#2</b> What activities does the employee find difficult?		
Step#3 Could the activities be made easier? (see Activity Improvement Tool)		
Follow up steps		
Step#4 Evaluate any changes made to make sure they are working (see Ergonomics Change Evaluation Tool)		
Step#5 Communicate lessons learned to other staff		



## Activity Improvement Tool

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Supervisor:

Worker:

Date:

Activity:

Difficulty: Some difficulty moderate difficulty almost impossible

Describe the difficulty and possible improvements using the checkboxes (check all that apply) and space below.

1) Possible	2) Possible contributing	3) Additional details about the	4) What improvements could be considered?
physical	factors or areas for	difficulty (e.g. what part of the	
demand(s)	improvement	activity causes the difficulty)	
duration/	ask for help <sup>1</sup>		
repetitiveness of			
the activity	body mechanics, work		
	method, procedure		
weight of item	compliance <sup>2</sup>		
handled			
	type of materials		
amount of	handled		
force required			
<u> </u>	maintenance of		
awkward grip	tools/equipment		
awkward/	availability of		
static posture	tools/equipment		
awkward	design/quality of		
movement	tools/equipment		
movement	tools/equipment		
vibration/	work area		
impact			
impuot	storage area		
other			
	actions of others		
	other		

<sup>1</sup>indicate barriers and how getting help could be made easier, <sup>2</sup>see Procedure Compliance Tool



Reasons for not using the proper procedure & equipment	How to ensure that the proper procedure & equipment is used	
Employee finds the proper procedure & equipment difficult to follow/use	<ul> <li>One on one coaching</li> <li>Identify equipment that is easier to use</li> <li>Simplify the procedure (use the Activity Improvement Tool)</li> </ul>	
Employee forgot the proper procedure or had a momentary lapse in concentration/judgment	<ul> <li>When mistakes happen         <ul> <li>Help the employee learn from them</li> <li>Avoid emotional outbursts, sarcasm</li> <li>Try to avoid punishment for honest mistakes</li> </ul> </li> <li>Regular reminders</li> <li>Signs/Postings</li> <li>Regular refresher training</li> <li>Keep procedure documents where they can be easily accessed by employees</li> <li>Simplify the procedure (use the Activity Improvement Tool)</li> </ul>	
Employee did not know the proper procedure	<ul><li>Review the new employee orientation process</li><li>Training</li></ul>	
Employee knows the proper procedure, does not find it difficult and chooses not to follow it entirely	<ul> <li>Provide positive feedback when the proper procedure is observed</li> </ul>	
<ul> <li>They don't understand the BENEFIT of the doing the activity CORRECTLY</li> </ul>	Explain/show why it is important to follow the proper procedure	
<ul> <li>They don't understand the CONSEQUENCES of doing the activity INCORRECTLY</li> <li>They have always done it incorrectly and have never experienced a negative consequence</li> </ul>	<ul> <li>If doing the activity the wrong way results in problems that are important but infrequent, give examples of the possible problems         <ul> <li>Employee may not have experienced the problem, yet!</li> </ul> </li> </ul>	
<ul> <li>Not everybody uses the proper procedure</li> </ul>	<ul> <li>Enforce the proper procedure consistently with everyone         <ul> <li>If there are exceptions, ensure that they are well             understood and justifiable</li> </ul> </li> </ul>	



This tool can be completed by a supervisor during a meeting with the employee who has used the change. Alternatively, it can be given to the employee for completion in advance of the meeting.

Date:

Employee:

Supervisor (or other area representative):

- 1. What change(s) have you tried?
- 2. Have the change(s) helped? Yes No Somewhat
- 3. (Optional) What do you like about the change(s), if anything?

4. What are the problems with the change(s), if any? What suggestions do you have to address these problems?

- 5. Do you need any more assistance with your workstation and/or your work at this time? Yes No NotSure
  - 5.1. If yes, what do you feel may help?