

Individual Workplace Ergonomics Assessment

Name of Client: Mrs X
Job title: HR Manager
Department: Human Resources
Employer: Nordic Rehab Ltd

Referred by: Mrs Y (Manager)

Address:
Nordic Rehab Ltd
Solihull
B91

Assessment Date: 01/10/2019
Date of report: 04/10/2019

Technical Consultant/Physiotherapist: Lasse Flosand (BSc (Hons), MSc Erg.)

RELEVANT HISTORY

As you know Mrs X has been experiencing ongoing right sided shoulder and neck problems for the last 7-8 years following a road traffic collision.

It is understood that her problems got worse after the second collision, which occurred in February 2019. The shoulder and neck pains impact on her comfort levels both at and outside of work.

Mrs X explains that she has been seen by a private Physiotherapist to help her overcome her neck and shoulder issue, and that she goes for regular treatment sessions with them. She reports to be experiencing a gradual improvement with such treatment.

From a works perspective she finds that her symptoms do not change significantly depending on activity. Repetitive use of her right hand when using the mouse can, however, at times aggravate her discomforts. Mrs X is, however, wondering whether her current work equipment is suitable and whether her sitting posture could be enhanced to help her improve on her neck and shoulder problem.

Mrs X is 5ft 8" in height, occasionally uses glasses and can touch type.

WORK SITUATION

Mrs X has worked for Nordic Rehab Ltd, Solihull, for the last 6 months. She works full time, Monday to Friday from 09:00 in the morning to 17:00 in the afternoon (contractual hours).

She can take 30 minutes of lunch break every day. Mrs X reports, however, that she often works through her lunch, and has a sandwich at her desk. It is understood that she can take breaks when and if required, and that she get up to move about during her working day i.e. particularly when walking between meetings.

Mrs X's job duties as a HR manager is plenty fold. She manages a team of 4 employees, and will oversee their work and support her team in their duties. In addition, she is involved with matters such as staff disciplinary, probation, new staff numbers, payroll, organisational design and HR data analysis. It is understood that she spends 70-80% of her day at her work desk, and the remaining time in in-house meetings.

To carry out her job she spends 80-90% of her working day seated in an office chair – whether at her desk or in a meeting room. She spends proximally 70% of her day using keyboard and mouse, whilst looking at her computer screen.

Mrs X reports to be coping well with her caseload. She enjoys her job and finds her manager and colleagues supportive.

ASSESSMENT OF WORK AREA(S)/DISCUSSION

Standard Provision:

Seat

Mrs X is sitting in a standard Nordic Rehab Ltd task chair. The chair has several ergonomic features, such as height adjustable armrests, tension adjustable backrest and seat slide. The chair was found to be stable and in full working order.

The chair dimensions were found to fit reasonably well with her body stature.

At the time of the assessment she was using a meshed lumbar cushion, which gives her lower back a lift. This is useful to help her sit in a taller and healthy S-shaped spinal posture. Such tall spinal postures can over time help her improve from her neck and shoulder problems.

However, Mrs X was found sitting too high on her chair (See photo 1), with her feet on a foot rest. Typically, sitting too high at the work desk will encourage forward flexed spinal postures i.e. when using the mouse and keyboard. Over time flexed spinal postures will result in overstretch to the tissues between her neck and upper back, which is likely to aggravate her symptoms.

At the time of the assessment her seat was lowered so that she can sit with her feet (high heels) on the ground whilst ensuring that her elbows are in line with the desk. This will reduce the need for reaching downwards to use her keyboard and mouse, and will enhance her spinal posture.

Mrs X's chair was found suitable for her postural requirements and working needs.

Please note that, in the absence of high heels, she will benefit from using a 100 mm high foot rest to ensure that her feet are flat on the ground.

Work Desk

Mrs X's work desk is a standard, rectangular Nordic Rehab Ltd desk. The desk is 720 mm in height, sufficiently large for all her work requirements and beyond that of the minimum requirements of the DSE regulations (1992). It has non-reflective surface, reducing glare from windows and ceiling lighting.

Mrs X's work desk was found suitable for her postural and working requirements.

Computer Screen (s)

Mrs X's two computer screens are 19" in width. Both screens were positioned too low and too far away from her. This position will encourage a forward flexed neck posture, which will increase stretch to tissues in the base of her neck. Over time such postures can aggravate pre-existing neck and shoulder pains.

During the assessment her computer screens were moved closer to her (at an arms-length) and raised to eye level (see photo 2). This screen position will help encourage taller and more upright spinal postures and will over time reduce tension to her neck and posture.

She was encouraged to vary her screen position during the day to aid more movement and a dynamic working posture. This will also help reduce discomforts associated with static spinal postures.

She reported no issues with the screen image quality, and the screen text was found comfortable to read. The screens were free of screen flicker or glare.

The screens were found suitable for her working needs.

Input Devices.

Mrs X's keyboard is an unknown brand of mini keyboard. The narrow dimensions of this mini keyboard does fit well with her petite stature, and has light key resistance and shallow travel distance. The latter factors are ideal to help reduce tension to muscles in her wrists and elbows, and are very useful as she can touch type. The keyboard was found suitable for her working and postural requirements.

Her mouse is a vertical infrared mouse, which was found to be in full working order. Many people find vertical mice beneficial for upper limb conditions. However, it is unlikely to be of great benefit to aid Mrs X's particular problem, which gets worse with prolonged use of her right hand. As her vertical mice can only be used in the right hand, she will not have the opportunity to use the mouse in her left hand. A standard mouse can be used in both the left and right hand, which will enable her to use her right hand less. This could help her see a reduction to her neck and right shoulder discomforts.

Environment

Mrs X reported no issues in relation to her working environment. Therefore the only considerations relate to standard health and safety aspects of temperature and lighting.

Software

Mrs X reported no issues with the software she uses as part of her job.

Advice

As part of the assessment Mrs X was advised in avoiding prolonged static postures both at work and at home. Taking frequent short breaks away from her workstation, to move about will help reduce her discomforts. Regularly moving her neck and shoulders will also help reduce discomforts associated with static work postures.

She was instructed and advised in an optimal spinal posture and the importance of maintaining such posture more of the time both at home and at work.

She was advised in being active outside of work. Keeping active and doing exercise helps reduce neck and back problems.

Mrs X was advised in some exercises for her neck that she can carry out on a regular basis. Over time these exercises should help her see recovery to her neck and right shoulder problems.

As highlighted in the report, some adjustments were carried out to her work station during the assessment which helped improve her neck and shoulder posture. By following the advice set out in this report she should – over time- see improvements to her neck and shoulder discomfort.

<p>Photo removed</p>	<p>Photo 1 (Before adjustments)</p> <ul style="list-style-type: none"> • Mrs X was sitting too high on her chair. • Her screens are positioned too far away and too low • The above factors are likely to aggravate her neck and shoulder discomfort. • She does not require a foot rest when using her high heels. • Her chair was found to be suitable when using a mesh back support.
<p>Photo removed</p>	<p>Photo 2 (After adjustments)</p> <ul style="list-style-type: none"> • Her seat was lowered and her foot rest removed to allow her feet to rest on the ground • Her screens were raised and moved closer to her. • Mrs X was given some postural education. • There was a significant improvement to her neck/shoulder posture after the assessment.

The assessment has highlighted the following issues:

- Mrs X has experienced neck and shoulder problems for several years.
- She finds that prolonged use of her right hand can aggravate her symptoms.

- Mrs X works quite long hours and does not take many breaks during her working day.
- She was sitting too high on her chair, which will encourage forward flexed neck postures.
- Her screens were positioned too low and too far away, which will further encourage said neck posture. Such postures can aggravate pre-existing neck and shoulder discomforts due to soft tissue overstretch.
- Mrs X is using a right handed mouse which may have negative impact on her symptoms.

RECOMMENDATIONS

- Mrs X will benefit from taking regular breaks during her working day to move about.
- She will benefit from varying her mouse from her right to her left hand.
- She will benefit from applying the postural advice, work station guidelines and basic exercises set out in this report.
- There are otherwise no further recommendations at this time.

Thanks and Best Regards



*Lasse Flosand (MCSP)
Physiotherapist in Occupational Health
Nordic Rehab Ltd*

Mrs X agreed with the content of this report and the distribution of this to her employer.

If you require any further information about this report please contact Work-Kinetics Ltd through contact@nordicrehab.co.uk or call Lasse Flosand on 07739027695