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	Safety and Occupational Health USACE ERGONOMICS PROGRAM POLICY	
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DEPARTMENT OF THE ARMY
U.S. Army Corps of Engineers
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ER 385-1-96

CESO-I

Regulation
No. 385-1-96

1 June 2000

Safety and Occupational Health
USACE ERGONOMICS PROGRAM POLICY

1. Purpose. This regulation establishes responsibilities necessary to manage and execute an effective and compliant ergonomics program.
2. Applicability. This regulation applies to HQUSACE elements, major subordinate commands, districts, laboratories, and field operating activities hereafter referred to as “USACE commands”. Contractor ergonomic requirements are not included in this regulation or the supporting Engineering Pamphlet (EP) 385-1-96, but are addressed by the provisions of EM 385-1-1, Section 06.K.
3. Distribution Statement. Approved for public release, distribution is unlimited.
4. References.
 - a. 5 CFR Part 339, Medical Determinations Related to Employability.
 - b. Department of Defense Instruction (DODI), 6055.1, DOD Occupational Safety and Health Program.
 - c. DOD Policy Memorandum, Ergonomics Program Requirements, 4 February 1997.
 - d. Army Regulation (AR) 40-5, Preventive Medicine.
 - e. AR 385-10, The Army Safety Program.
 - f. AR 385-40, Accident Reporting and Records.
 - g. Army Regulation 690-800, Insurance and Annuities.
 - h. Department of the Army, Assistant Secretary, Installations, Logistics, and Environment, (OASA (IL&E)) Policy Memorandum – Army Ergonomics Program, 18 May 1998.
 - i. Department of the Army, Army Safety Office (DACS-SF) Policy Memorandum - Army Safety and the Army Ergonomics Program, 6 October 1998.
 - j. Department of the Army, Office of the Surgeon General (DASG-ZA), Army Ergonomics Policy Memorandum, 31 August 1998.

- k. Engineering Pamphlet (EP) 385-1-96, USACE Ergonomics Program Procedures.
- l. USACE Supplement 1 to AR 385-40, Accident Reporting and Records.
- m. EM 385-1-1, USACE Safety and Health Requirements Manual.

5. Discussion. This regulation implements the requirements of the DOD and DA ergonomics program guidance. Ergonomic problems take an unacceptable toll on the health of our personnel, on military readiness and impact our design/construct mission activities. Based on a DOD review of current data, work-related musculoskeletal disorders account for 50% of the DOD civilian employee workers' compensation claims and costs (\$276 million in FY 99), and a significant portion of military injury and illness. Even more significantly, the failure to address ergonomic design issues increase production costs and task accomplishment time. More than half of Army and USACE civilian workforce injuries and illnesses can be attributed to work-related musculoskeletal disorders (WMSDs) which dramatically reduce the readiness, productivity and available manpower of the USACE. Properly developed, implemented, and operated ergonomics programs will reduce WMSDs to USACE workforce, resulting in improvements in readiness and morale as well as reductions in lost time, injury/illness compensation claims. Incorporating ergonomic considerations into the USACE design processes should significantly reduce costly retrofits during construction.

6. Policy. USACE Districts, Centers and FOA shall implement all the requirements in this ER and supporting EP. Full implementation shall be accomplished no later than end FY 01.

7. Responsibilities. Key responsibilities are prescribed below.

a. The HQUSACE is not required to implement a formal ergonomics program to include a written plan as specified in this ER and supporting EP. Humphreys Engineer Center Support Activity (HECSA) is responsible for incorporating HQUSACE personnel and activities into their ergonomics program. The HECSA, Chief Safety and Occupational Health Office (SOHO) shall provide the primary interface for such support. HQUSACE responsibilities include:

(1) Chief, Safety and Occupational Health Office shall develop and issue ergonomic policy and program requirements in accordance with DoD and DA guidance and provide management oversight of USACE commands implementation and execution.

(2) HQUSACE Staff Principals, in coordination with the Safety and Occupational Health Office, shall provide leadership, program emphasis, resource support and policy and program oversight of MSC, District and FOA.

b. Division Commanders shall provide leadership and program emphasis, management oversight and perform periodic evaluations of district execution (in concert with annual safety and occupational health inspections). Division headquarters are not required to implement a formal ergonomics program to include a written plan as specified in this ER and supporting EP. Division headquarters shall select a co-located district or other district to provide ergonomics

program support to division personnel and missions. The Division, Chief, Safety and Occupational Health Office (SOHO) shall provide the primary interface for such support.

c. District, Center and FOA Commanders shall:

(1) Provide leadership, emphasis and ensure employee participation in the command ergonomics program.

(2) Establish an ergonomics subcommittee under the Safety and Occupational Health (SOH) advisory council (SOH advisory council shall be formed per AR 40-5 and AR 385-10) and integrate proper ergonomic controls into all phases of the command occupational safety and health program;

(3) Designate in writing a command Ergonomics Program Coordinator (EPC) and Alternate EPC and select members for the ergonomics subcommittee based on recommendations from the Chief, Safety and Occupational Health Office (SOHO) and the EPC. The designated EPC shall be a qualified safety, industrial hygiene or occupational health professional;

(4) Approve the command ergonomics plan based on the recommendations of the SOH advisory council; and

(5) Provide sufficient funds, staff and other resources, to include training, to carry out all responsibilities related to this program per AR 385-10 and AR 40-5.

d. District, Center and FOA Chiefs, SOHO shall:

(1) Advise the commander on issues related to ergonomics and recommend individuals to be designated as the EPC and alternate EPC.

(2) Ensure that appropriate reporting and recordkeeping procedures be followed and records are maintained for WMSDs in accordance with OSHA, DOD, AR 40-5, AR 385-40, USACE Supplement to AR 385-40 and any local procedures.

(3) Work with the servicing Human Resources Office (HRO), recognized unions, applicable regulatory authorities, and others as determined warranted, to effectively address ergonomics issues.

(4) Be responsible for all safety, industrial hygiene and medical aspects of the ergonomics program per AR 40-5.

(5) Advise the Commander on appropriate individuals for membership on the ergonomics subcommittee.

(6) Coordinate the command SOH Inspection required by AR 385-10 and AR 40-5 with the EPC and the ergonomics subcommittee, and consider WMSDs during the inspection.

(7) In coordination with the command medical advisor and HRO, ensure a written

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command protocol is developed for the early recognition, evaluation, treatment, and follow-up of WMSDs among military and civilian personnel (see EP 385-1-96).

(7) Obtain and forward the following to the EPC:

(a) Injury and illness reports, including Engineer Form (ENG) 3394, Accident Investigation Report;

(b) OSHA Log 200, Log of Federal Occupational Injuries and Illnesses, or equivalent;

(c) Federal Employee Compensation Act (FECA) claims, both monthly new case creates and quarterly chargeback;

(d) Industrial hygiene, safety surveys and hazard evaluations related to ergonomic considerations;

(e) Work force reports (including civilian and active-duty personnel and pay reports of lost duty time as a result of injury or illness); and

(f) Employee suggestions related to ergonomics.

e. District, Center and FOA Ergonomics Program Coordinators (EPC) shall:

(1) Be a qualified safety, industrial hygiene or occupational health professional who has completed at least a 40-hour basic ergonomics training course provided by the United States Army Center for Health Promotion and Preventive Medicine ((USACHPPM), or civilian equivalent, see EP 385-1-96);

(2) Advise the Chief, SOHO, on appropriate individuals for membership on the ergonomics subcommittee;

(3) Chair the ergonomics subcommittee, providing an interface between the ergonomics subcommittee and the SOH advisory council;

(4) Develop and implement the command ergonomics written plan, with the assistance of the ergonomics subcommittee and approval of the SOH advisory council;

(5) Oversee, manage, or actually perform the worksite analysis, and ensures its completion;

(6) Ensure that an internal evaluation and review of program objectives is conducted and report the results to the SOH advisory council, with the assistance of the ergonomics subcommittee, per EP 385-1-96; and

(7) Ensure accurate recordkeeping of ergonomics subcommittee reports.

d. The ergonomics subcommittee shall:

(1) Assist in developing and implementing the command's ergonomics plan.

(2) Oversee and participate in:

(a) Gathering and evaluating injury, lost work time, trend, productivity, and complaint data on worksites and work processes.

(b) Identifying existing and potential WMSDs.

(c) Conducting worksite evaluations.

(d) Setting priorities for abatement of identified WMSDs.

(e) Implementing corrective actions.

(f) Providing appropriate worker training.

(3) Developing methods to evaluate the effectiveness of the corrective actions and documenting the results.

(4) Work with safety, industrial hygiene and occupational health personnel in the identification of potential WMSDs and advise on ergonomic changes related to the workstation, tasks, and tools.

(5) Provide reports to the command SOH advisory council at least semi-annually.

(Note: EP 385-1-96, Appendix B, recommends membership of the ergonomics subcommittee.)

f. Trained ergonomics personnel. These are personnel who have met the minimum standards as specified in the glossary of EP 385-1-96. They shall:

(1) As designated, serve on the command ergonomics subcommittee and participate in the ergonomics subcommittee's semi-annual ergonomics program evaluation and review.

(2) Assist with the identification and control of WMSDs (alone or as members of the ergonomics subcommittee).

(3) Perform in-depth ergonomic assessments of identified problematic work areas, tasks, and tools to determine WMSD risk factors.

(4) Document all evaluations, recommendations, and actions related to ergonomics and the effectiveness of the actions.

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(5) Provide ergonomics training and education for military and civilian personnel. Persons tasked to provide training shall obtain refresher ergonomics training to maintain expertise.

(6) Work with safety, industrial hygiene and occupational health personnel in the identification of potential WMSDs and advise on ergonomic changes related to the workstation, tasks, and tools.

(7) Keep accurate records of identified WMSDs and high-risk work areas and solutions and provide them to the ergonomics subcommittee for review and tracking.

g. District, Center and FOA safety and industrial hygiene (IH) personnel shall:

(1) In coordination with the Chief, SOHO and the EPC, assist in the oversight of the safety and industrial hygiene aspects of the ergonomics program.

(2) By designation, serve as the command EPC or alternate EPC.

(3) By designation, serve on the command ergonomics subcommittee.

(4) Recognize, evaluate and recommend controls for ergonomic hazards associated with potential or identified WMSDs during safety and industrial hygiene worksite surveys and evaluations.

(5) Perform or assist in performing in-depth ergonomic assessments and assist supervisors develop activity and position (job) hazard analyses to document ergonomic hazards and recommended controls.

(6) Assist in solving problems related to identified WMSDs.

(7) Keep accurate records of identified WMSDs and high-risk work areas and solutions. Provide these records to the ergonomics subcommittee for review and tracking. The records will be stored in a local command system, the industrial hygiene module of the Defense Occupational & Environmental Health Readiness System (DOEHRS) or other acceptable automated records management systems.

(8) Provide or assist with ergonomics training and education for military and civilian personnel. Persons tasked to provide training shall obtain refresher ergonomics training to maintain expertise.

(9) Work with managers, supervisors and employees in the identification of potential WMSDs and advise on ergonomic changes related to the workstation, tasks, and tools.

(10) Review injury and illness records related to WMSDs, develop trend analyses, and report results through the Chief, SOHO to the ergonomics subcommittee.

h. Occupational health personnel (see EP 385-1-96 glossary for definition) shall:

- (1) If determined necessary by the EPC, serve on the command ergonomics subcommittee (for example, a contract physician or in-house or contract nurse, etc.).
- (2) Develop a written command protocol for the early recognition, evaluation, treatment, and follow-up of WMSDs among civilian and military personnel (see EP 385-1-96).
- (3) Develop and conduct baseline medical screening for new personnel whose positions have specific medical standards, physical requirements, or are covered by a medical evaluation program established under applicable regulations (5 CFR 339.301).
- (4) Assist trained ergonomics personnel in the identification of modified- or restricted-duty jobs.
- (5) Make specific recommendations to the servicing HRO on the assignment of injured workers to modified- or restricted-duty jobs. (See EP 385-1-96 for clarification on modified or restricted duty.)
- (6) Assist in ergonomics training and education.

i. Human Resources Offices servicing Districts, Centers and FOA shall:

- (1) Use command medical, SOH program, and ergonomics subcommittee recommendations and concerns in employment placement decision-making in accordance with 5 CFR Part 339.
- (2) Ensure newly appointed managers, supervisors, and employees receive appropriate ergonomics training and are made aware of the benefits and responsibilities provided by AR 690-800, chapter 810, subchapter 6.
- (3) Maintain, or support the command organization that maintains, FECA case file and automated data as a result of injury or illness related to a WMSD and provide requested information for review by the command SOHO and ergonomics subcommittee in accordance with applicable privacy information requirements contained in 5 CFR Part 339.
- (4) Designate an HRO representative to serve on the ergonomics subcommittee.

(Note: If a local HRO is not available, coordinate these functions with the regionalized CPAC.)

j. District, Center and FOA Principal Assistants Responsible for Contracting (PARC) shall:

- (1) Support the integration of ergonomic requirements in specifications and applicable contract vehicles to include those developed for the purchase of new equipment.
- (2) If requested, designate an advisory or support representative to serve on the

ergonomics subcommittee.

k. District, Center and FOA Chiefs, Logistics shall:

- (1) Designate a representative to serve on the ergonomics subcommittee.
- (2) Ensure the integration of ergonomic considerations into the purchase of new equipment.
- (3) Implement recommendations from trained ergonomics personnel to reduce WMSD risk factors when feasible.
- (4) Consult with trained ergonomics personnel to assist in the evaluation of equipment and furniture for ergonomic design.

l. District, Center and FOA Chiefs, Engineering shall: Incorporate human factors engineering considerations into plans and designs, where warranted, and use trained ergonomics personnel, ergonomic experts, and safety and industrial hygiene personnel to support this requirement.

m. District Chiefs, Construction-Operations shall:

- (1) Provide leadership, direction and oversight to the command ergonomics program.
- (2) Designate a senior level Operations manager to serve on the ergonomics subcommittee.
- (3) Integrate ergonomic considerations into facility modifications and construction and operations.
- (4) Ensure civil works operating project managers and supervisors place emphasis on, and execute the requirements contained in, the command ergonomics program.
- (5) Have civil works operating project managers delegate the responsibility for project implementation and oversight to a designated collateral duty safety officer.
- (6) Ensure managers and supervisors implement recommendations from trained ergonomics personnel to reduce WMSD risk factors.
- (7) Ensure all project personnel:
 - (a) Apply the USACE activity and position (job) hazard analysis process and procedures described in EP 385-1-96 and EM 385-1-1 to recognize, evaluate and control ergonomic hazards.
 - (b) Prevent and correct WMSDs through job and workstation design and proper maintenance.

(c) Apply ergonomics concepts both in general and in regard to the specific conditions of the facility.

n. Supervisors shall:

(1) Provide leadership, direction and oversight to the command ergonomics program.

(2) Ensure personnel are trained and:

(a) Follow safe work practices.

(b) Recognize, correct and report hazardous work practices.

(c) Recognize and report early symptoms of potential WMSDs.

(3) Routinely review work areas, tasks, and tools for potential WMSD risk factors using the activity and position (job) hazard analysis process contained in EP 385-1-96 and EM 385-1-1.

(4) Coordinate with trained ergonomics, safety, and health personnel to reduce risks and support the overall ergonomics program.

(5) Maintain effective schedules for facility, equipment, and tool maintenance, adjustments, and modifications.

(6) Hold personnel accountable for failure to follow safe work practices and recognizes initiatives in improving operating conditions and procedures through incentive awards.

(7) Ensure personnel are aware of benefits and responsibilities provided by AR 690-800, chapter 810, subchapter 6.

o. Employees shall:

(1) Follow recommendations contained in activity and position (job) hazard analyses and procedures developed to document work steps, ergonomic hazards and recommended controls.

(2) Modify work practices as recommended.

(3) Routinely review work areas, tasks, and tools for potential WMSD risk factor and notify supervisors of WMSD risk factors in the workplace.

(4) Recognize and report symptoms of WMSDs early.

(5) Participate, if determined necessary by safety, IH or occupational health professionals, in special medical surveillance, developed to evaluate health status related to exposure to ergonomic hazards and WMSDs, as described in EP 385-1-96.

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(6) Perform recommended conditioning activities.

(7) Actively participate in the suggestion process.

p. Union representatives shall: Designate a command employee member to serve on the ergonomics subcommittee. Unions representing affected employees of the command shall be offered the opportunity to designate a member to the ergonomics subcommittee.

8. Procedures. Technical administration, programmatic requirements and procedures of the command ergonomics program are prescribed in detail in EP 385-1-96.

FOR THE COMMANDER:



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Major General, USA
Chief of Staff