

BULLETIN

How we took action to improve ergonomics at our workplace

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By Vicky Grant, HSA member

I have been working at BC Cancer as a radiation therapist for almost 25 years. Most of that time has been at the Surrey Centre, formerly known as the Fraser Valley Cancer Center. Radiation therapists are involved in planning and delivering radiation therapy treatment to cancer patients, and assist in assessing and managing the treatment's side effects.

A couple of years ago, I decided to become an occupational health and safety (OH&S) steward at our centre. A steward at the site, Charlotte Nanalal, noticed me taking an interest in OH&S issues and encouraged me to become an OH&S rep.

My interest started when I learned that, following a workplace assessment, some staff were using the grievance process to facilitate the implementation of changes recommended by an ergonomist.

Advancements in technology have changed how radiation therapists now do their jobs. For example, we no longer need to place heavy blocks and wedges into the treatment machines, we use digital imaging instead of radiographic film, and we have paperless charts. These changes increase efficiency and ultimately provide better treatment for patients.

But with these advancements, there has been an increase in computer work and mouse use for the radiation therapist. Over time, the way we do our job has changed, but the design of our workplace has not. I noticed that a lot of my colleagues were experiencing similar symptoms of pain and discomfort while at work.

I wanted to do something to help prevent injuries before they happen, and I was hoping that I could help make some positive changes in this role. I wanted to work with management and staff to improve workplace ergonomics and use education to improve practices and create a more safety-conscious culture throughout our department.

I attended HSA's OH&S steward training and learned that there were WorkSafeBC regulations and guidelines pertaining to occupational health and safety. I read many OH&S articles discussing ergonomics and found that the WorkSafeBC (WorkSafeBC.com) and Canadian Centre of Occupational Health and Safety (www.ccohs.ca) websites have a lot of useful information. I learned that musculoskeletal injuries (MSIs) are expensive to both the workers and employers and that MSI risks can be reduced.

I also learned that occupational safety is the joint responsibility of the worker and the employer.

I felt that there was potential for improvements relating to ergonomics within our department that could reduce the risk of injury to staff. I felt that there were two main components of our jobs as radiation therapists that could make us vulnerable to injuries in the workplace: patient handling and computer work.

I initiated the creation of the Radiation Therapy Ergonomic Committee, which I agreed to chair. The

committee decided to do a discomfort survey to identify trends amongst radiation therapists in our department regarding their experiences with MSI symptoms, and to determine the state of ergonomics in the department.

I found an MSI survey on the WorkSafeBC and BCFED health and safety (healthandsafetybc.ca) websites and we adapted them to make our survey shorter and less time consuming to complete. We were happy to have a co-op student assist us with the survey design and analysis. Elements of the survey provided respondents with a new awareness of MSI by identifying its signs and symptoms.

We were hoping that the results of the survey would help us identify which ergonomic components should be focused on first. The results of the survey indicated that RTs were experiencing symptoms of MSI, and that their symptoms worsened while they were at work. Both patient handling and computer work were perceived by respondents to be contributing to MSI symptoms. The results of the survey were shared with the radiation therapists and our department's management.

We brought the committee's concerns regarding the state of ergonomics in the department directly to the Joint Occupational Health and Safety (JOHS) Committee for discussion, and we used the results of the survey to demonstrate that there was a need for improvement. We initially focused on ergonomic issues related to computer workstations.

The site's alternate OH&S steward, HSA's OH&S representative, and I drafted a 21-day letter - a health and safety recommendation to the employer that they have 21 days to respond to - recommending an ergonomic assessment of the department and educational refreshers for staff. The letter was presented to the JOHS Committee. After it was presented to the committee, things started rolling. An ergonomics specialist attended our next meeting.

In the last two years, our department has had height-adjustable workstations installed in most of the work areas. We have had a ceiling lift installed and have been educated on how to use it. The use of a HoverMatt is now our standard of practice for the lateral transfer of patients, and staff have had refreshers on its use.

It was acknowledged at one of our JOHS meetings that injuries in our department have reduced since the formation of our ergonomic committee. Yet the work to make positive changes at our site has been a collaborative effort between my colleagues, members of the JOHS Committee, and me.

My goal as an OH&S steward is to try to prevent further injuries at our workplace. And a safe workplace is also better for our patients.

I believe that education and awareness of OH&S issues in the department is key. If management doesn't know there are safety issues, it's hard to effect change.

Workers need to know workplace risks and be educated in the prevention of injuries.

I have read many OH&S articles discussing ergonomics, and continuous education and refreshers in best practices available are consistently highlighted. The discomfort survey was able to highlight some issues that needed to be addressed.

I have learned a lot since becoming the OH&S steward and I have a lot more to learn. Workload and staffing shortages have made it difficult to find enough time to work on our RT Ergonomic Committee initiatives and meet regularly. In terms of improving safety in the workplace, referring to the WorkSafeBC regulations and guidelines help. When trying to advocate for change, I have found that patience and perseverance is key.

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