

Ex. 15
ACCSH/1995-2

**Musculoskeletal
Disorders in
Construction**

ACCSH Workgroup Report

May 26, 1995

Workgroup Review Efforts

- **Iowa Symptom Survey**
 - **7,000 surveys sent to union construction workers**
 - **2,078 surveys completed and returned**
 - **72 percent complained of job-related back problems**
 - **42 - 49 percent complained of problems with knees, wrists/hands, shoulders, or neck**
 - **12 percent missed work because of back problems**
 - **2 - 4 percent missed work due to other musculoskeletal disorders**

Workgroup Review Efforts *(Continued)*

- **Musculoskeletal symptoms among electricians**
 - 308 apprentices and journeymen surveyed
 - 50 percent experienced back, hand, and wrist problems
 - 35 percent either missed work or went on light duty
- **Overexertion and bodily reaction events among Oregon workers**
 - Study ran from 1987 - 1991
 - In construction, over 34% of the claims were for overexertion: backs, shoulders, etc.

Workgroup Review Efforts (Continued)

- **A review by Scott Schneider and Pam Susi on potential hazards in new construction related to ergonomics**
- **ANSI Z-365 Draft Standard on Control of Work-Related Cumulative Trauma Disorders**
- **Study of muscular stress in construction machine operators**

**BLS 1993 Data Summary for
Ergonomic Injuries in Construction**

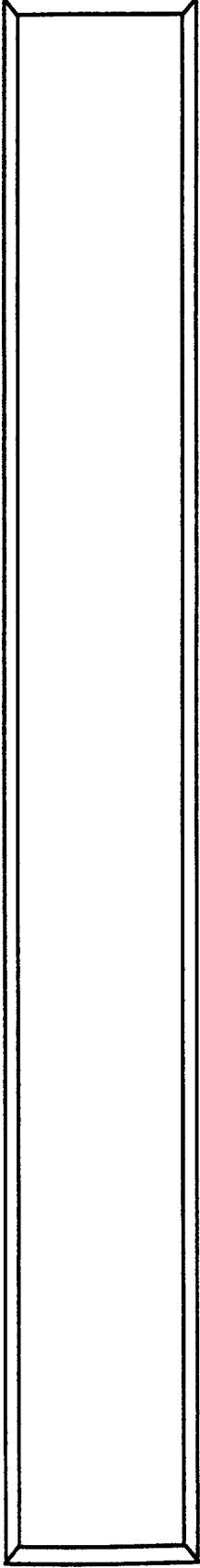
- **37.6 percent of all lost workday injuries in construction are due to sprains and/or strains.**
- **25.3 percent of lost workday injuries in construction affect the back.**
- **1.5 percent of lost workday injuries in construction are due to repetitive motion.**
- **Construction has the second highest incidence rate for sprain and strain lost workday injuries (after transportation): 184.4 cases per 10,000 full-time employees.**

**BLS 1993 Data Summary for
Ergonomic Injuries in Construction (Continued)**

- **Construction has the second highest incident rate for overexertion lost workday injuries (after transportation): 111.2 cases per 10,000 full-time employees**
- **Lost workdays per case in construction average 7 days, third highest after mining (16 days) and transportation (8 days)**



***Summary of Major Differences Between
OSHA's Draft Ergonomics Protection
Standard and Work Group's
Musculoskeletal Disorders in
Construction Draft Standard***



***This is not a construction ergonomics
standard.***

**This is a draft standard for
musculoskeletal disorders in the
construction industry.**



- **Changed title to “Protective Standard for Musculoskeletal Disorders in the Construction Industry”**

- **Revised *purpose section* to address the occurrence of work-related musculoskeletal disorders (WMD) in construction and added “to promote public and private involvement’ in advancing the purpose of the standard**
- **Revised the *signal risk factors* and made exposure to them all *2 hours in a single workshift***

(Continued)

- **Changed the scope section “unassisted frequent or forceful manual handling” to “unassisted or frequent manual handling”**
- **Deleted trigger of one/two or more workers with WMD**

(Continued)

- Revised *multi-employer worksite* section to require contractors and others to “*coordinate*” their efforts, not share responsibility for compliance
- Eliminated *grandparent* exceptions for employers with previous programs
- Changed *startup date* section to 18 months for all employers to do task analysis
- Deleted references to *farm, and agricultural work*

(Continued)

- Deleted *quick fix* section of standard. Standardizes 3 years to address all tasks
- Requires controls to “*the extent feasible*” rather than to the “*lowest feasible level*”
- Changed timetable for implementing controls to “*in a timely manner*” rather than “*immediately*”

(Continued)

- **No longer limits personal protection equipment to preclude devices worn on the wrist, back, etc.**
- **Replaced requirement to “ensure that employees can determine weight of materials” with requirement for “manufacturers to label weight where feasible and supply lifting handles”**

(Continued)

- Deleted section “G, Ergonomic Design and Controls for New or Changed Jobs
- Moved *employee information requirements to training section.*
- Allows employee representatives access to copies of this standard

(Continued)

- Deleted references to “ergonomic teams” in training section
- Changed startup date for training to “immediately” for information, “6 months” for people doing job analyses; and, “2 years” for those doing task analyses

(Continued)

- **Required that employers “make available” rather than “provide” various information to health care provider**
- **Changed musculoskeletal disorder management plan to musculoskeletal disorder recovery plan**
- **Changed requirement for employer to ensure plan is followed at all times to only “after employee returns to work”**

(Continued)

- Deleted recordkeeping requirements that transfers all records to NIOSH and former employees if employer goes out of business
- Changed retention requirements for checklists, task improvement, and training from “5 to 3 years”

(Continued)

- **Changed all references from “workplace” to “worksite”**
- **Changed references from “designated representative” to “authorized representative”**
- **Redrafted Appendices A, B, C, and D to reflect construction standard**

Workgroup Recommendations

- **That the full ACCSH forward the Draft Construction Musculoskeletal Disorders Standard on to Assistant Secretary Joseph A. Dear for review and comment**
- **That the full ACCSH does not vote, at this time, to accept or reject the workgroup's report until comments are received from the Assistant Secretary and potential revisions are made by the work group**

Workgroup Recommendations *(Continued)*

- **That the workgroup continue in its efforts to complete Appendixes A, B, C, D, Risk Factors, and the check list to conform to the Draft Construction Standard**
- **That once the workgroup has completed its full task, completing all of the sections that will make up the Construction Musculoskeletal Disorders Standard, the full ACCSH hold one or two public hearings to receive feedback from interested parties on what the workgroup has produced**

Workgroup Recommendations *(Continued)*

- **That the workgroup revise its report (the one you currently have in front of you) and forward it to the full ACCSH Committee for consideration**
- **That once all of the above is completed, the full ACCSH then vote on accepting or rejecting the workgroup's report**