

VIRTUAL ERGONOMIC EVALUATION

For ergonomic assessment requests, below are the steps that the employee will need to complete in order to have an ergonomic evaluation performed

1. Complete the mandatory online training – Repetitive Motion Injury Prevention


- a. <https://corlearning.rc-hr.com/mandatedtraining>

Note: If the employee may have taken the class 3 years ago, it is recommended that the mandatory Repetitive Motion Injury Prevention class be completed prior to the assessment. The training has been revised; recommendation would be for those employees to take it again, yes this would be a refresher.

Online Ergonomic Training Resources

- ✓ Providing Office Ergonomic Assessments
<https://youtu.be/ProvidingOfficeErgonomicAssessments>
- ✓ Making Your Work and Home Computer Workstation More Comfortable
<https://youtu.be/OfficeErgonomicsWorkHomeWorkstations>

2. Complete the online pre- assessment form – online


- a.  [Ergonomic PreAssessment form.pdf](#)
- b. Submits the completed form to their department manager or supervisor

3. Department Manager/ Supervisor **MUST** submit the request and completed form to the County Safety Division Ergonomic Coordinator via email

- a. Form needs to be filled out by the employee the assessment will be conducted on
- i. You'll be asked to select an evaluation '**Level**' when completing the request form. The level is up to each employee and varies by detail. The evaluation process is much the same regardless of whether an employee is at their office or remotely at home.
- a. Disregard the durations of time listed for Level 1 or 2 for a virtual/remote evaluation.

4. Email **photos or a video** to [assigned Safety Coordinators email](#) address **OR**



5. Schedule a **live MS Teams, Zoom or other video call** (you will be contacted via email after completing the evaluation request)


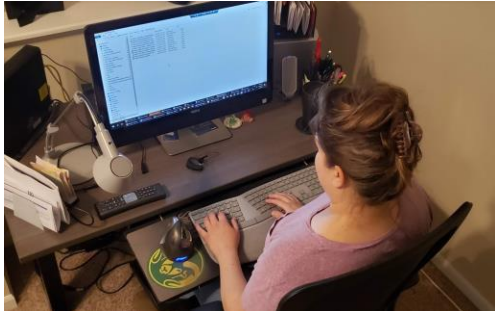
- a. **Tips for photos and/or video:**
- i. **Take or have someone take the photos or video as you perform regular, real-time work tasks (while you are actually typing, using the mouse, etc.). Work and sit and/or stand normally. Avoid using a posture that you would not normally use. Pictures/video of actual work being performed are needed.**
- ii. Photos/video should illustrate posture and body position (**see example pictures** below).
- iii. *If certain pictures, angles/sides cannot be obtained, that is fine.* Some may be impossible to obtain.
- iv. Obtain **at least 4** photos' (**additional photos are ideal**).
- b. **Tips for taking photos/video by yourself:**
- i. *Set your phone/camera on another chair, table, boxes, etc. and take a video of yourself working. Upload the video to your computer & email [assigned Safety Coordinators email](#). You can also obtain screenshots of yourself working from the video you took by using the snipping tool.* 

A video duration of less than 25 MB can usually be emailed without a problem. Check your camera settings to ensure your video resolution size, etc. have been reduced.

c. Tips for live MS Teams, Zoom or another video call

- i. Schedule a time and day for a video call. Coordinate the application (MS Teams, Zoom or another video call)
- ii. Receive a video call from **assigned Safety Coordinator**. Ensure your speaker phone is active.
- iii. Place your phone on another chair, table, boxes, etc. and point your camera at yourself/your workstation (selfie mode) so that **assigned Safety Coordinator** can see you while you are working. The **assigned Safety Coordinator** will help guide you to the right position. Setting up live video can also look like the profile pictures (right and left side) below.

Sample Pictures	
Picture 1 (left side)	Picture 2 (right side)
 <p>Picture - Humanscale</p>	 <p>Picture - Humanscale</p>

Picture 3 (top – keyboard and mouse)	Picture 4 (top - full body)
	

Pictures should show the chair, keyboard, mouse, desktop, monitors, etc.

Additional pictures to provide:

- Entire chair (chair by itself – no one sitting) and leg clearance (under desk)



6. Provide additional detail, measurements, etc.
- The below detail is **ONLY** needed for a Level 2 (Comprehensive) evaluation, not a Level 1.
 - Complete the form below if requesting a Level 2 evaluation.

QUESTIONNAIRE – IF UNSURE INDICATE UNSURE	ANSWER
Chair model, model number, manufacturer, vendor (i.e. Steelcase, Leap chair).	
Do the seat and back tilt?	
Does the employee use the seat and back tilt? [i.e. does the employee “move in the chair” use dynamic postures (recline, upright, decline)]?	
Does the seat depth adjust? (allow for 2-4" of space between edge of chair and back of knees)?	
Do armrests adjust (adjust in 4 directions - height, width, pivot, forward/back)?	
Does the chair have an adjustable lumbar support (adjust in height, pressure)?	
Does the chair have a tension/resistance adjustment (tension to adjust back support/recline ‘force’)?	
Is the chair equipped with a 5-caster base (5 wheels)?	
Measure keyboard/mouse height (SITTING). Floor to top of keyboard. “G” and “H” keys	
Measure keyboard/mouse height (STANDING). Floor to top of keyboard. “G” and “H” keys	
Measure work surface (writing surface) height (SITTING)(If different from above - usually because of the use of a keyboard tray). Floor to top of keyboard. “G” and “H” keys	
Measure work surface (writing surface) height (STANDING)(If different from above - usually because of the use of a keyboard tray). Floor to top of keyboard. “G” and “H” keys	
Is the desk height adjustable?	
If so, indicate the range (i.e. 22” lowest height, 48” highest height)	
Type of adjustment (if adjustable)? (electronic, pneumatic, fixed/non-adjustable)	
Adequate leg clearance under desk/work surface? (Desk is not >2 inches thick, no pencil drawer obstructions, etc.)	
Monitor, paperwork, are free from glare, flicker, etc.?	
Measure the monitor(s) distance from eye.	
Get into normal computer work posture. Have someone measure distance from the front of the screen to the eyes.	
Telephone headset available?	
Telephone headset Used?	

7. Information confirmation
 - a. After the above information is provided, the designated/assigned [Safety Coordinator](#) will review all submitted information. As additional information is needed an email or phone call will take place/be schedule in order to obtain missing information or confirm information received.
8. Report and Recommendations Submission
 - b. An assigned [Safety Coordinator](#) will submit a report to the [Manager and or Supervisor](#). [The Manager and or Supervisor should review the report with the employee](#), make purchases and implement suggestions (as necessary and feasible).
9. Follow-up Phone Consultation
 - c. A follow up email and/or phone conversation may take place to discuss the [report recommendations](#), additional questions can be asked and answered.

If you have any questions or concerns, please contact assigned Safety Coordinator/Ergonomic Coordinator team for assistance.