COMCARE WEBINAR

Body stressing, musculoskeletal disorder and good work design

26 October 2023

national safe work month

For everyone's safety,

work safely

Australian Government

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Acknowledgement of Country

Acknowledgement of artist

Healing Hands – Cover artwork by Dion Devow of Darkies Designs

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QUESTION

Where are you joining from?

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Housekeeping

The session is being recorded

Camera off

Microphone muted

Teams Chat
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- Then ‘settings’
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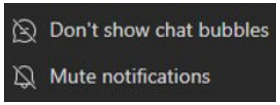

MS Teams Polls

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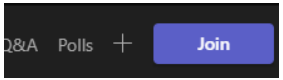
- Use the banner on the top of your screen to access 'Polls'



- Having difficulties? Reply in the chat

Survey

- QR Code
- Link
- Email

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National Safe Work Month

For everyone's safety, work safely

- An annual initiative held every October
- Aims to raise awareness and enable discussion about safety at work
- Driven by Safe Work Australia
- Comcare Safe Work Month events

10 Oct 2023
Psychosocial Health and Safety Forum
Visit our website to access

17 Oct 2023
Transport Network Forum
Visit our website to access

26 Oct 2023
Body stressing, musculoskeletal disorders and good work design
On now

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DIY Event Guide

- Do-It-Yourself guide for anyone can use this guide
- **5 key steps** and considerations to help you plan and deliver a National Safe Work Month activity in your workplace
- Access it on our website: [National Safe Work Month 2023 | Comcare]

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POLL QUESTION

What are the greatest hazards/risk related to musculoskeletal disorders in your organisation?

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Panel Members & Agenda

- What does the research tell us?
- Injury management data and practical data prevention
- Good work design and body stressing
- Panel discussion

Jodi Oakman
Professor and Head of the Centre of Ergonomics and Human Factors, La Trobe University

Melanie Ianssen
Head of Rehabilitation, Australia Post

Lynn Gunning
Director of Strategic Programs, Comcare

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POLL QUESTION

What risk assessment management tool is your organisation using to address body stressing risks?

Jodi Oakman

Professor and Head of Ergonomics and Human Factors - La Trobe University

LA TROBE UNIVERSITY

What does the research tell us about MSDs and WHS prevention requirements?

Professor Jodi Oakman
October 2023

ACKNOWLEDGEMENT OF COUNTRY

LA TROBE UNIVERSITY ACKNOWLEDGES THAT THIS EVENT AND OUR PARTICIPANTS ARE LOCATED ON THE LANDS OF MANY TRADITIONAL CUSTODIANS IN AUSTRALIA.

WE RECOGNISE THEIR ONGOING CONNECTION TO THE LAND AND VALUE THEIR UNIQUE CONTRIBUTION TO THE UNIVERSITY AND WIDER AUSTRALIAN SOCIETY.

WE PAY OUR RESPECTS TO INDIGENOUS ELDERS, PAST, PRESENT AND EMERGING AND EXTEND THIS RESPECT TO ANY INDIGENOUS PARTICIPANTS JOINING US TODAY.

TODAY

- **The Australian workforce landscape and implications for WHS practice**
- **How big is the MSD problem?**
- **Why does the MSD problem persist?**
- **Current tools for MSD prevention**
- **APHRIM toolkit**
- **Require actions**

EXTENT OF THE PROBLEM

- 27 percent of the population have chronic MSDs, with higher percentages among older people and women[1]
- Workplace hazard exposures are a major cause of this problem, estimated as accounting for 17 to 37 percent of all low back pain
- Back pain third leading cause of total burden of disease, next to coronary heart disease and dementia
- Resulting in early exit from work, low productivity, societal burden

1 https://www.aihw.gov.au/reports/chronic-musculoskeletal-conditions/musculoskeletal-conditions/contents/summary

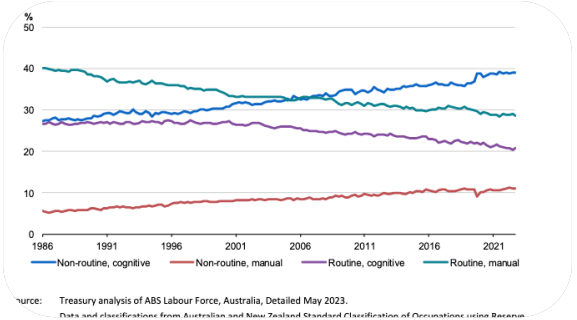
RELEVANT TO WHS

- **AGEING WORKFORCE**
- **CHANGE IN DISTRIBUTION OF JOBS**
- **MODES OF EMPLOYMENT : GIG ECONOMY**
- **TECHNOLOGY: e.g. A.I, ROBOTICS**
- **AUTOMATION**

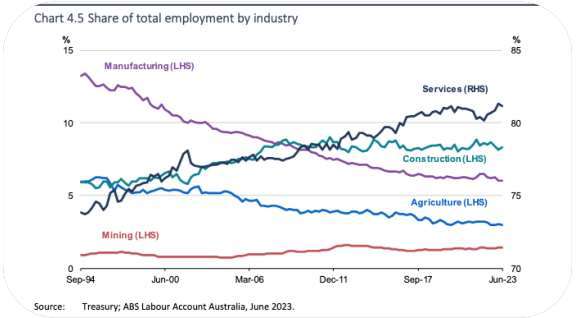
Working Future

The Australian Government's
White Paper on Jobs and Opportunities

September **2023**



Source: Treasury analysis of ABS Labour Force, Australia, Detailed May 2023.



Source: Treasury; ABS Labour Account Australia, June 2023.

https://treasury.gov.au/sites/default/files/2023-10/p2023-447996-working-future.pdf

WHERE WILL WORKERS BE WORKING

AGED CARE SECTOR WILL BE A BIG EMPLOYER

NEEDS TO ADDRESS THE RETENTION PROBLEM

MANY FACTORS HIGHLY RELEVANT TO WHS AROUND JOB DESIGN: SECURITY, QUALITY OF WORK, JOB DEMANDS

Chart 5.1 Projected employment growth by industry, November 2021 to November 2026

Source: National Skills Commission, 2021 Employment Projections.

Note: Bars refer to projected change in employment (thousands). Percentages refer to the percentage growth for

Safety Science 146 (2022) 105563

Contents lists available at ScienceDirect

Safety Science

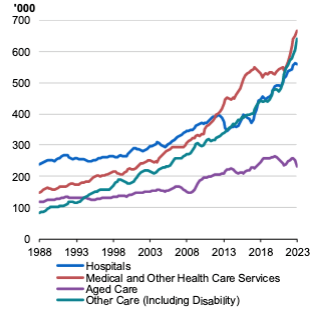
journal homepage: www.elsevier.com/locate/safety

A STAMP analysis of the staff safety management system in residential Aged Care

Jodi Oakman [a,*], Natasha Kinsman [a], Natassia Goode [b]

[a] Centre for Ergonomics and Human Factors, La Trobe University, Bundoora 3086, Victoria, Australia
[b] WorkSafe Victoria, Australia

Chart 5.4 Growth in the care and support sector workforce



Source: Treasury; ABS Labour Force, Detailed, Australia, May 2023.

Note: Employment groupings based on the ANZSIC subdivisions for the Health Care and Social Assistance division. Annual moving average applied to quarterly data.

OVERCOMING BARRIERS TO EMPLOYMENT & BROADENING OPPORTUNITIES

6.4.2 JOB DESIGN CAN ALLOW MORE PEOPLE TO PARTICIPATE

6.4.3 ROLE FOR EMPLOYERS TO ADDRESS PARTICIPATION BARRIERS

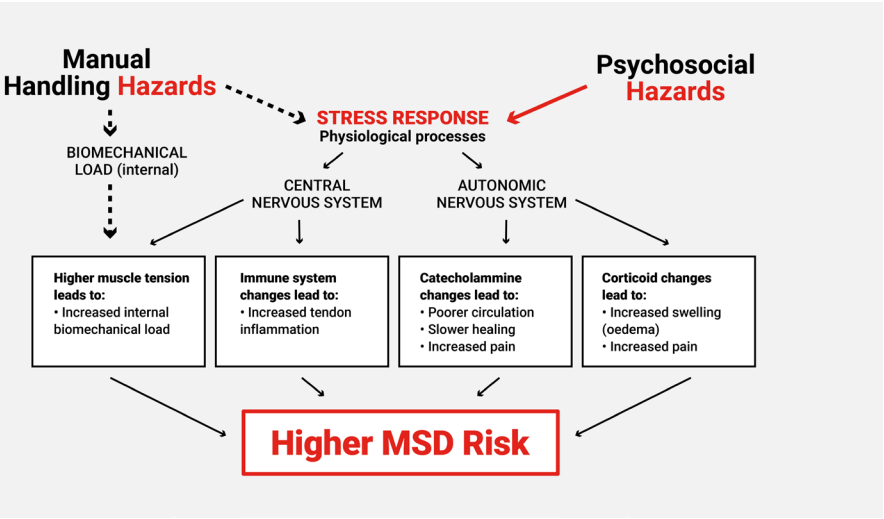
6.6.3 HELPING MATURE AGE WORKERS REMAIN IN THE WORKPLACE LONGER

6.6.4 SUPPORTING PEOPLE WITH DISABILITY OR HEALTH CONDITIONS TO WORK TO THEIR CAPACITY

Good work design principles

https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/good-work-design

CAUSES OF MSDS

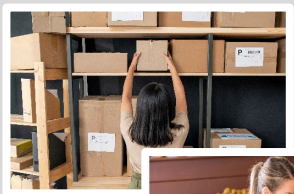


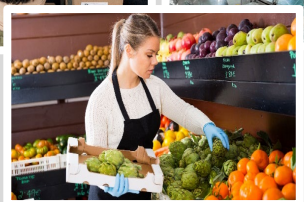
COMMON PSYCHOSOCIAL HAZARDS

WWW.WORKSAFE.VIC.GOV.AU/PSYCHOSOCIAL-HAZARDS-CONTRIBUTING-WORK-RELATED-STRESS

Types of Workplace Hazards

Manual handling hazards
(task specific)





Psychosocial hazards

Organisational

- Working hours
- High workloads
- Poor job design
- Low levels of control
- Pace of work
- Conflicting work demands

Social context

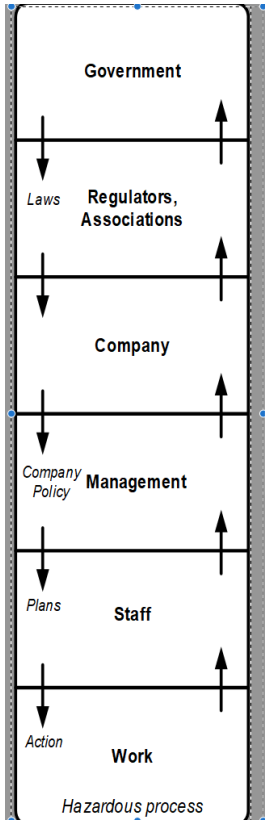
- Communication with management
- Being valued
- Health/safety culture
- Relationship with colleagues
- Relationship with supervisors

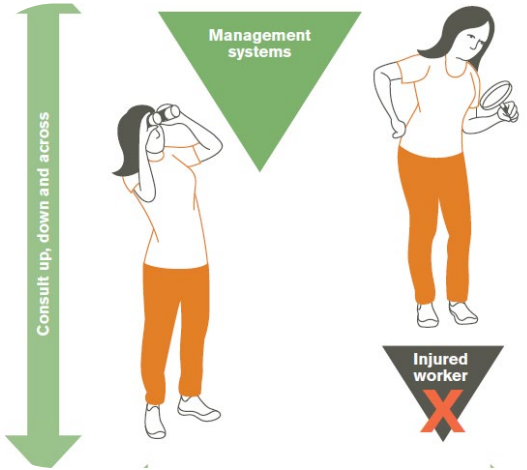
Common psychosocial hazards

www.worksafe.vic.gov.au/psychosocial-hazards-contributing-work-related-stress

SYSTEMS THINKING AND SWHS

- A system is a set of interacting pieces that combine for a common purpose. A system is not only the sum of its parts but the product of their interaction.
- Systems thinking poses two fundamental questions about each interacting part of a complex problem: what does it influence, what influences it?
- Systems thinking seeks multiple perspectives of the same thing, to help identify processes, procedures, perceptions, practices, policies and incentives that cause increases or decreases in the drivers or reinforcers of change.





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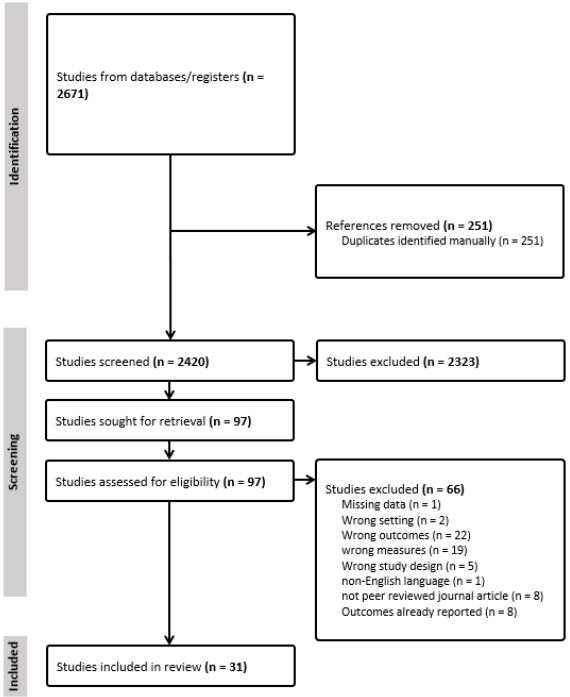
COMPLEXITY VS COMPLEX

EVIDENCE TO SUPPORT IMPORTANT ROLE OF PSYCHOSOCIAL HAZARDS

Study	Outcomes
Bernal, 2015 Work-related psychosocial risk factors and musculoskeletal disorders in hospital nurses and nursing aides: A systematic review & meta-analysis (24 articles)	Effort-reward imbalance was associated with prevalent MSD at any anatomical site (OR 6.13; 95% CI 5.32–7.07) and low social support with incident back pain (OR 1.82; 95% CI 1.43–2.32)
Bugaska et al, 2013 Psychological factors at work and musculoskeletal disorders: A one-year prospective study	Psychological job demands significantly predict pain in the shoulders; decision latitude predicts pain in the upper back; job insecurity significantly predicts pain in the knees; and social support predicts pain in the neck and ankles/feet
Long et al, 2012 Work-related upper quadrant musculoskeletal disorders in midwives, nurses and physicians: A systematic review of risk factors and functional consequences (18 articles)	Job demands, demanding work schedules and physical exposures are associated with work-related upper quadrant musculoskeletal disorders.

EFFECTS OF PSYCHOSOCIAL AND PHYSICAL HAZARDS



Number of measures analysed per hazard category*	
HAZARD CATEGORY	**NUMBER OF MEASURES**
Biomechanical	
Physical Task Demands – Whole Body	43
Physical Task Demands – Hands/Fingers	9
Physical Task Demands – Mixed	3
Vibration[1]	3
Total measures of biomechanical hazards	**58**
Psychosocial	
Quality of Supervision & Leadership	5
Job Development Opportunities	22
Workload Quantity & Pace	18
Role Conflicts & Emotional Demands	4
Meaningful & Clearly Specified Work	0
Physical Environment	0
Support from Supervisors & Co-workers	
Psychosocial hazards – Mixed	8
Job insecurity[1]	3
Total measures of psychosocial hazards	**78**

*Hazard categories previously derived by factor analysis of a large dataset of APHIRM survey responses (see Oakman et al. 2023)

^Vibration and Job insecurity are reported separately as they were not included in the APHIRM survey data set that generated the factors used to categorise data.

Relative effects of work-related psychosocial versus biomechanical hazards on risk of musculoskeletal disorders: a systematic review and meta-analysis: Oakman et al, in preparation

EFFECTS OF PSYCHOSOCIAL AND PHYSICAL HAZARDS

- Both biomechanical and psychosocial hazards are associated with increased lower back, neck/shoulder, and general musculoskeletal symptoms
- Biomechanical hazards are more strongly associated with lower back and general symptoms
- Psychosocial and biomechanical hazards are equally associated with neck/shoulder symptoms

Summary of meta-analytic review

		Pain symptoms		
	No. studies	k	OR	95% CI
Lower back symptoms				
Biomechanical	12	30	**1.51****	**1.14-1.99**
Psychosocial	12	27	**1.15***	**1.01-1.32**
Neck/Shoulder symptoms				
Biomechanical	14	44	**1.19*****	**1.10-1.28**
Psychosocial	14	48	**1.19****	**1.05-1.35**
Upper limb symptoms				
Biomechanical	7	28	1.22	0.99-1.51
Psychosocial	7	26	1.03	0.94-1.13
General symptoms				
Biomechanical	7	10	**1.58***	**1.14-2.18**
Psychosocial	7	32	**1.19***	**1.06-1.34**

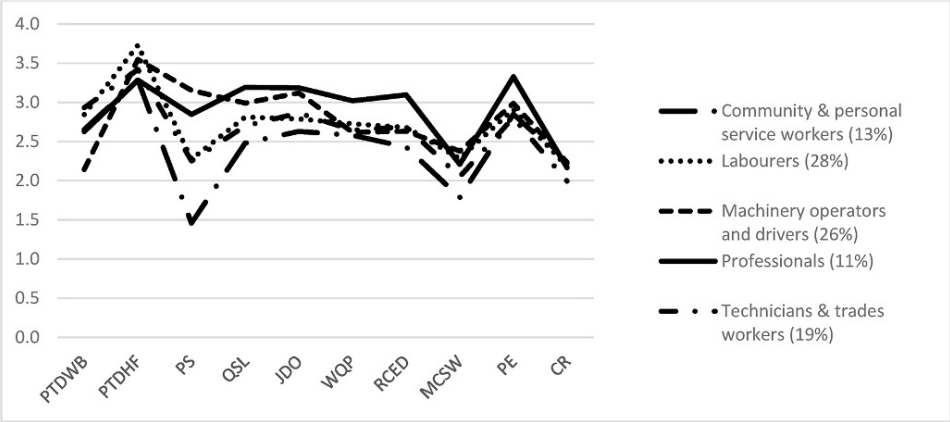
k = number of effect sizes; OR = pooled odds ratio;

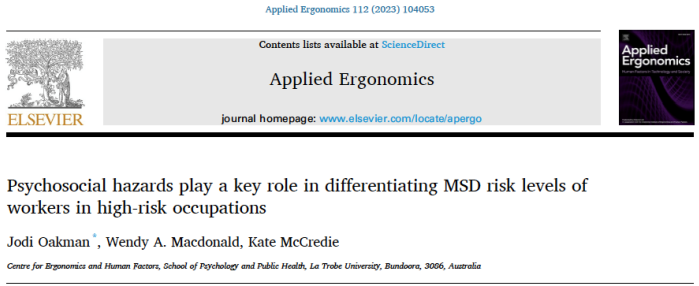
Note. *p < .05, **p < .01 ***p < .001

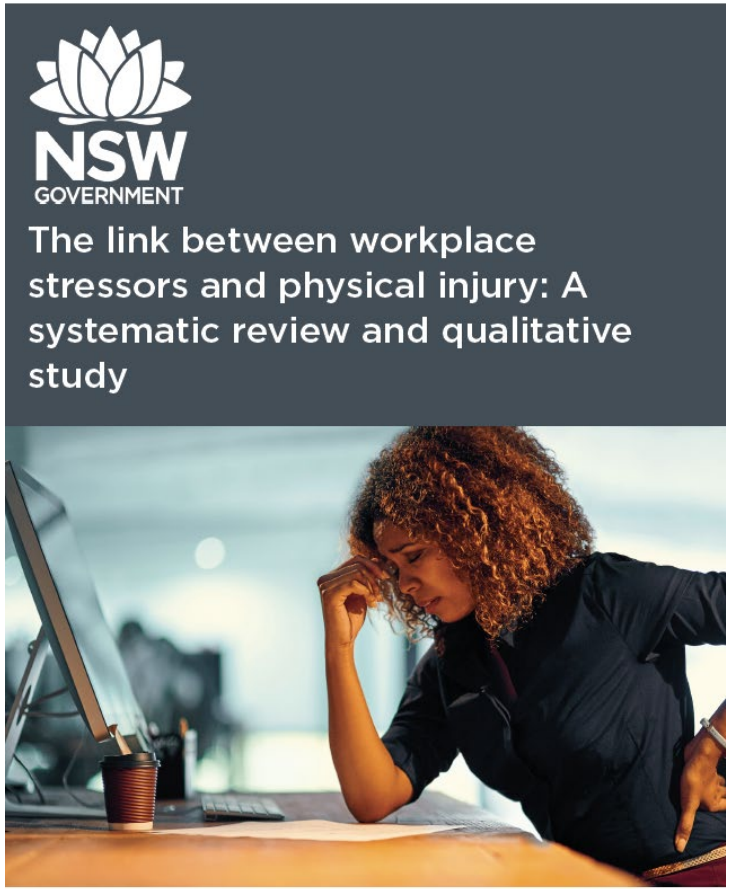
Relative effects of work-related psychosocial versus biomechanical hazards on risk of musculoskeletal disorders: a systematic review and meta-analysis: Oakman et al, in preparation

MEASUREMENT IN WORKPLACES

- 2,329 Australian workers from 33 workplaces in industry sectors with high MSD risk analysed
- Most variability in hazard levels was in the psychosocial hazards
- Likely to achieve greatest benefit in MSD prevention from addressing psychosocial hazards compared to the physical hazards







USAGE OF TOOLS

29 WHS MANAGERS/PROFESSIONALS

Number validated tools aware of	Number of participants
1	5
2-4	7
5-8	5
9-11	4
12-13	6
14-33	0
Number validated tools currently using	
1	3
2	4
4	1
5	1

Negative tool aspects	Positive tool aspects
Complexity	Clear & measurable outcomes
Practical limitations	Evidence base & scientific look
No perceived gain	Simple, easy to use format
Excessive cost	Targeted nature
	Participative

FINAL MATRIX

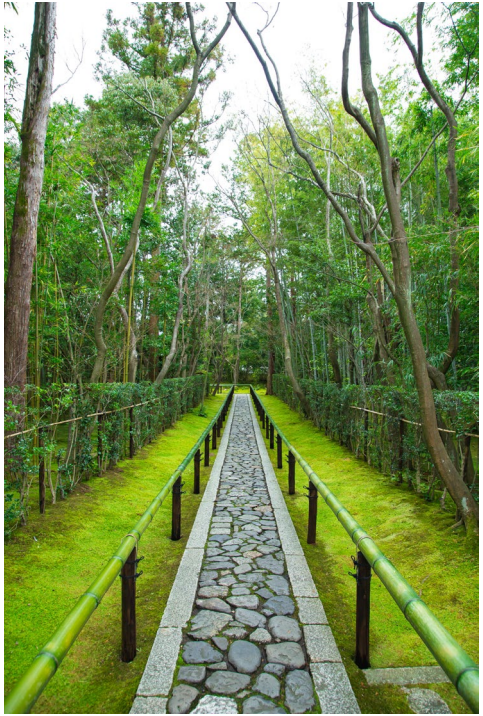
Tool	Brief description tool	Method	Target body area/work area	Workplace hazards assessed	Focus of assessment (organisation, job, task, individual level)
Physical hazard assessment tools: Whole body					
Borg RPE (Rated Perceived Exertion Scale)	Assesses exertion used in manual handling and physically active work.	Survey	Whole body	Effort	Task
DMQ (Dutch Musculoskeletal Questionnaire)	For the analysis of musculoskeletal workload, associated hazardous working conditions and symptom	Survey	Whole body	Force, Repetition, Environmental Factor	Task
KIM (Key Indicator Methods)	Assess risks involved in manual handling of loads	Observational	Whole body	Force, Posture, Duration, Working Conditions	Task
MAC tool (Manual handling assessment charts)	Assessment tool for lifting and lowering, carrying and team handling	Observational	Whole body	Posture, Repetition, Speed, Vibration, Environmental Factor	Task
MAnTRA (Manual Tasks Risk Assessment Tool)	Assesses exposure to musculoskeletal risk factors associated with manual tasks in the workplace	Observational/ Participative	Whole body	Posture, Force, Repetition, Speed, Duration, Vibration	Task
NIOSH LE (National Institute of Occupational Safety & Health Lifting Equation)	Assesses manual handling risks associated with lifting and lowering	Observational	Whole body	Posture, Duration, Repetition, Force, Vibration	Task
OWAS (Ovako Working Posture Analysing System)	Evaluation of postural load during work	Observational	Whole body	Posture, Duration, Repetition	Task
PEPEOPIM (Participative	Simplified manual task risk management program	Observational/	Whole body	Posture, Force,	Task

27 tools

- 20 Physical tools
- 4 Psychosocial tools
- 3 Comprehensive tools

				change consultation	
Physical and Psychosocial (comprehensive) hazard assessment tools					
APHIRM A Participative Hazard Identification Risk Management Toolkit	A comprehensive tool which assesses physical and psychosocial hazards at work	Survey Participative	Workplace environment and whole body	Physical Demands Psychosocial Demands (drawn from COPSOQ and WOAQ	Organisational Job
NASA TLX (NASA Task Load Index)	Workload assessment tool across a number of domains	Survey	Workplace environment	Mental Demands Physical Demands Effort Temporal demands Performance Frustration	Job
QEC (Quick Exposure Checklist)	Assesses a range of workplace physical and psychosocial hazards	Observational Participative	Whole body	Force, Duration, Posture, Repetition, Vibration, Work Pace, Speed	Job

CHANGE OUR THINKING!



What is APHIRM toolkit?.mp4 (vimeo.com)

Evidence to practice gaps – why do we need the APHIRM Toolkit?

Current risk management strategies do not typically reflect research evidence on the complexity of MSD aetiology

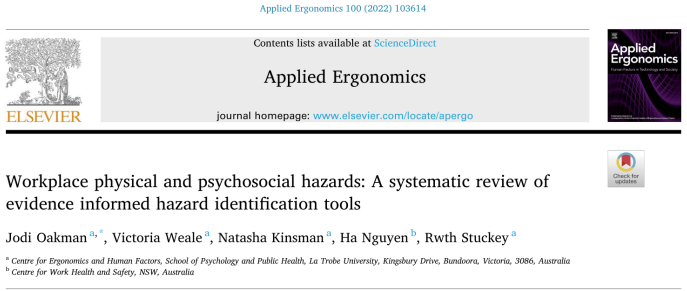
Barriers to more effective MSD risk management:

- Insufficient focus on psychosocial hazards
- Insufficient levels of worker participation in risk management
- Focus of attention on a single event or object as the problem, rather than several interacting agents or events – resulting in a focus on administrative controls e.g., training as a solution

WHAT IS THE APHIRM TOOLKIT?

- evidence based, developed in Australia, only one of its kind
- manages risk from physical and psychosocial workplace hazards
- participative approach involves workers and other key stakeholders including supervisors and key managers
- provides support through a full risk management cycle
- provides benchmark data to measure ongoing improvements

APHIRM TOOLKIT A Participative Hazard Identification and Risk Management toolkit


Applied Ergonomics 100 (2022) 103614

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Applied Ergonomics

journal homepage: www.elsevier.com/locate/apergo

Workplace physical and psychosocial hazards: A systematic review of evidence informed hazard identification tools

Jodi Oakman [a,*], Victoria Weale [a], Natasha Kinsman [a], Ha Nguyen [b], Rwth Stuckey [a]

[a] Centre for Ergonomics and Human Factors, School of Psychology and Public Health, La Trobe University, Kingsbury Drive, Bundoora, Victoria, 3086, Australia
[b] Centre for Work Health and Safety, NSW, Australia

https://www.aphirm.org.au/

www.aphirm.org.au

Home | APHIRM toolkit | Upcoming Events | Services | Resources and Publications

LA TROBE UNIVERSITY

CENTRE FOR ERGONOMICS AND HUMAN FACTORS

INTRODUCING APHIRM

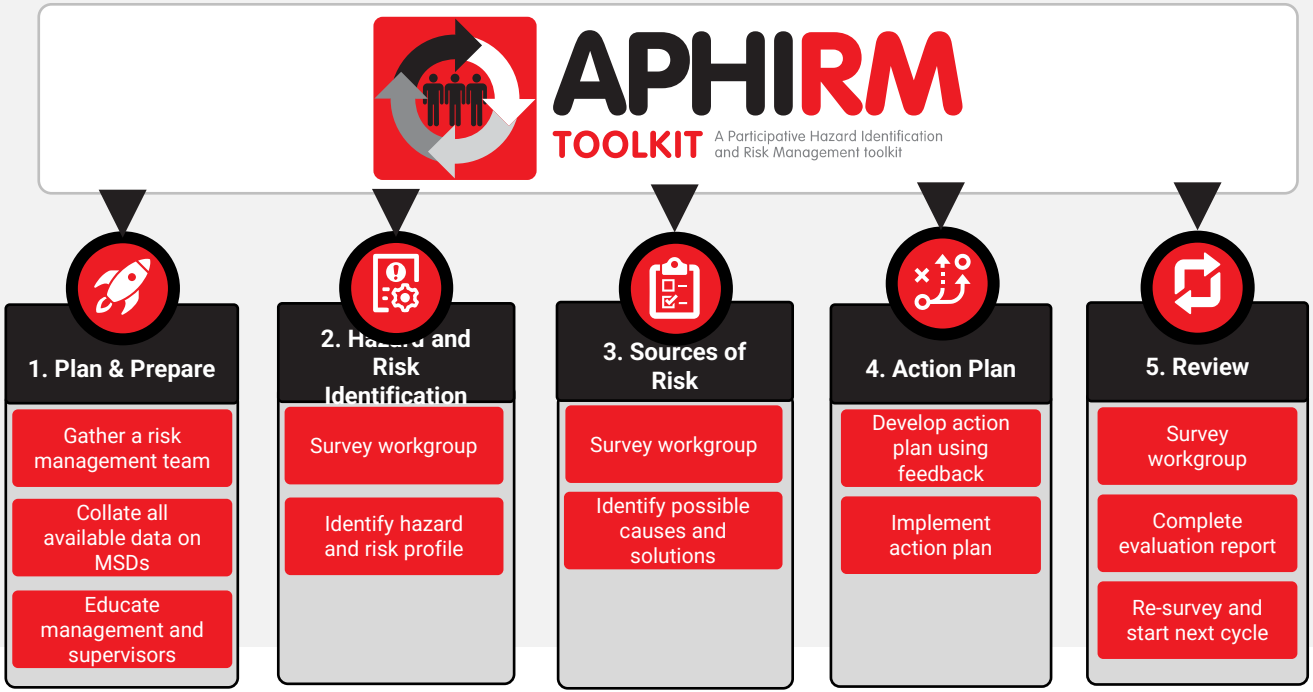
... A Participative Hazard Identification and Risk Management toolkit for improving the risk management of musculoskeletal disorders

The **APHIRM Toolkit** was developed by a team of La Trobe University researchers in the Centre for Ergonomics and Human Factors. The toolkit is a set of OHS risk management procedures that target both physical and psychosocial hazards.

It is freely available for use by Work, Health and Safety Professionals.

To access the toolkit, go to the APHIRM toolkit tab at the top of the page.

5 stages of APHIRM toolkit



WORKPLACE HAZARD CATEGORIES

TYPES OF WORKPLACE HAZARDS

a) **Manual handling hazards** ... task specific

b) **Psychosocial hazards** ... 2 sub-groups:

- **Organisational** – work organisation, job design
- **Social context**- support, communications, relationships with managers

c) **Bullying/Harassment and Occupational Violence**

OUTCOME MEASURES

- 12 ITEM STRESS SCALE (ADAPTED FROM COPSOQ)
- MUSCULOSKELETAL DISCOMFORT PAIN MEASURED ACROSS 5 BODY AREAS (SEVERITY AND FREQUENCY)

	HOW OFTEN					For each body area where there's been *some* discomfort or pain (i.e. *marked as '1' or higher*) circle a number below to show ***HOW BAD***		
	Never	*Occasionally*	*Sometimes*	*Often*	*Almost always*			
Neck, Shoulders 	0	1	2	3	4	Neck, Shoulders 	*Mild*	1
							Moderate	2
							Severe discomfort	3
Hands, Fingers 	0	1	2	3	4	Hands, Fingers 	*Mild*	1
							Moderate	2
							Severe discomfort	3
Arms 	0	1	2	3	4	Arms 	*Mild*	1
							Moderate	2
							Severe discomfort	3
Middle to Lower Back 	0	1	2	3	4	Middle to Lower Back 	*Mild*	1
							Moderate	2
							Severe discomfort	3
Hips, bottom, legs, feet 	0	1	2	3	4	Hips, bottom, legs, feet 	*Mild*	1
							Moderate	2
							Severe discomfort	3

REGISTRATION & IMPLEMENTATION

938
Total organisations registered

126 (13%)
Organisations with assessments*

236 (25%)
Organisations with test assessments

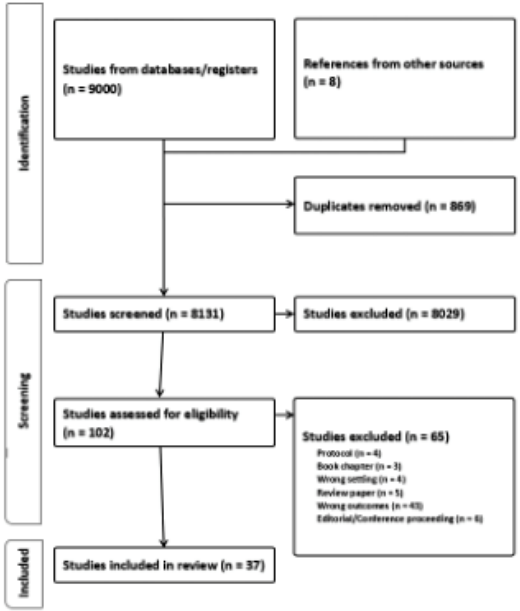
576 (61%)
Organisations with no assessment

Number of organisations with assessments by sector

* Excludes organisations that were just testing the software.

COST BENEFIT

Country of study location	
United States	9
Canada	8
Netherlands	6
Australia	3
United Kingdom	3
Portugal	2
Brazil	1
Central America and the Dominican Republic	1
Denmark	1
International	1
Malaysia	1
Turkey	1
Grand total	**37**



COST BENEFIT: CASE STUDY

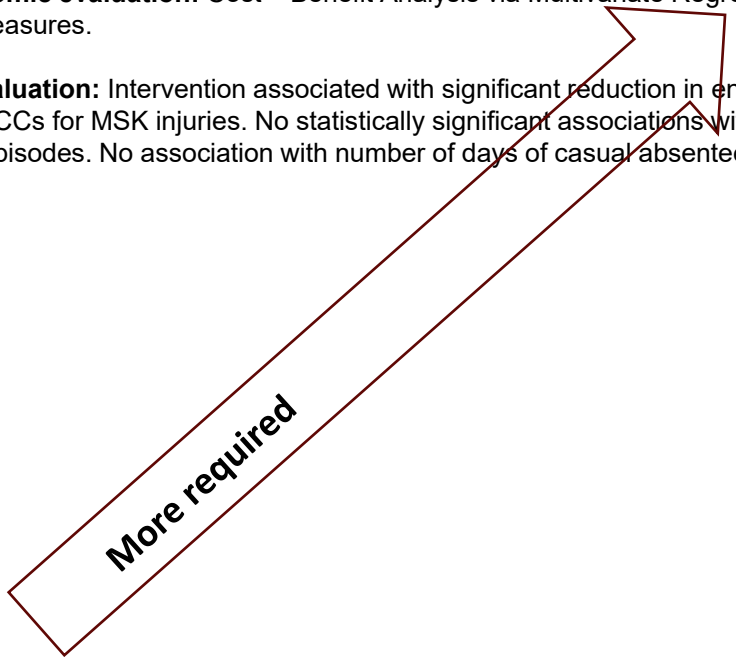
Study aim: To assess the costs and consequences of a participatory ergonomics process at a Canadian car parts manufacturer from the perspective of the firm.

Study population and setting: Employees of car parts manufacturing business

Type and purpose of economic evaluation: Cost – Benefit Analysis via Multivariate Regression study; To assess the impact of the process on several health measures.

Outcomes of economic evaluation: Intervention associated with significant reduction in end weekly indemnity claims, number of all denied WCCs and denied WCCs for MSK injuries. No statistically significant associations with all and MSK WCCs, all and MSK first aid claims and modified duties episodes. No association with number of days of casual absenteeism or weekly indemnity claims. The benefit to cost ratio is 10.6

ROI demonstrated: yes



Tompa et al., 2009 Canada

WHAT IS NEXT?

WHS PROFESSIONALS

- **WHAT IS YOUR ORGANIZATION DOING TO ADDRESS PSYCHOSOCIAL HAZARDS AND MSDS?**
- **DO YOU AND THE TEAMS YOU WORK IN HAVE KNOWLEDGE AND SKILLS IN HOW TO EFFECTIVELY MANAGE MSDS?**
- **WHAT CHANGES DO YOU NEED TO MAKE TO IMPROVE MSD PREVENTION IN YOUR ORGANIZATIONS?**

RESEARCH LANDSCAPE

- **EVALUATION OF INTERVENTIONS TARGETED AT REDUCING MSDS, WITH STRONG LONGITUDINAL DESIGNS**
- **MORE CASE STUDIES INCLUDING COST BENEFITS IN AUSTRALIAN ORGANISATIONS**

INTERESTED IN LEARNING MORE?

APHIRM TOOLKIT A Participative Hazard Identification and Risk Management toolkit

REGISTER YOUR INTEREST ON THE FOLLOWING WEBSITE

WWW.APHIRM.ORG.AU

THANK YOU

latrobe.edu.au

Melanie Ianssen

Head of Rehabilitation - Australia Post

Safety & Injury Management

Transport Project

Australia Post

Utilising injury management data to identify key hazards contributing to injuries in transport and proposed strategies to prevent and manage injuries for the life cycle of employment.

Purpose

- Reduce hazards associated with common injury types.
- Conduct an end-to-end analysis of ‘risks’ in transport.
- Promote the health benefits of work.
- Reduction in injury rates.
- Management of workers compensation costs.
- Explore new injury management strategies for the management of short- and long-term restrictions.
- Working together across all support functions

Key Challenges

- Predictability and consistency of injuries
- Recruitment challenges in an ageing workforce
- Pre-employment and ongoing medical assessments
- Lack of suitable duties
- Higher claim costs
- Mental health

Key Focus Areas

Recruitment & Induction of suitable, low risk workers.

Medical: Pre-employment screening, health & fitness, periodic assessment, mental health.

Plant & Equipment: Conduct a cost/benefit analysis of upgrades or improvements relating to curtains & entering/exiting cabs.

Injury Management & pathways for recovery.

Key Insights

Transport continues to be a high priority operational area for Wellbeing, Safety and Injury Management interventions to mitigate the increase in new claims and average cost per claim.

Recommended focus areas:

Wellbeing

- Recruiting the right people for the right role
- Offering wellbeing programs as part of induction; and ongoing to promote optimal fitness for work

Safety

- Pre employment and Fitness for Duty Screening
- Maximise safety equipment to reduce risk of injury (e.g., strong arm strap)

Injury Management

- Fostering local partnerships across the network to ensure suitable duties are accessible to help reduce time off work, and promote work conditioning to achieve pre-injury driving duties

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Lynn Gunning

Director Strategic Programs - Comcare

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Comcare's Prevention Strategy 2022-25

Comcare's first Prevention Strategy to prevent workplace harm adopts elements of the *Total Worker Health®* approach and its goal to improve the design of work, management practices, and the physical and psychosocial work environment.

A framework for action

Aim

To provide a coordinated pathway to support workplaces to prevent harm and enable a culture of **health and safety,** compliance and reporting.

Top priorities

- Bullying and harassment including workplace sexual harassment
- Work demands
- Body stressing

Actions

- Increasing awareness and providing information
- Building skills and capability
- Improving systems
- Driving compliance

Evaluating progress

- Monitor data and trends for:
  > Lead indicators > Lag indicators
- Track activity measures

QR CODE

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WHY GOOD WORK DESIGN?

- Work design is holistic
- Increased expectation that psychosocial risks will be managed effectively
- Need to enhance manager capability

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What is Good Work Design?

- The ‘content and organisation of one’s tasks, activities, relationships and responsibilities.’ (Professor Sharon K Parker, 2014)

How does it impact MSDs?

- Improved job satisfaction can reduce 17- 69% of work-related back disorders
- Improving a worker’s control of their work can reduce 37- 84% of work-related wrist disorders

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POLL QUESTION

What do you think are the main causes of body stressing in your workplace?

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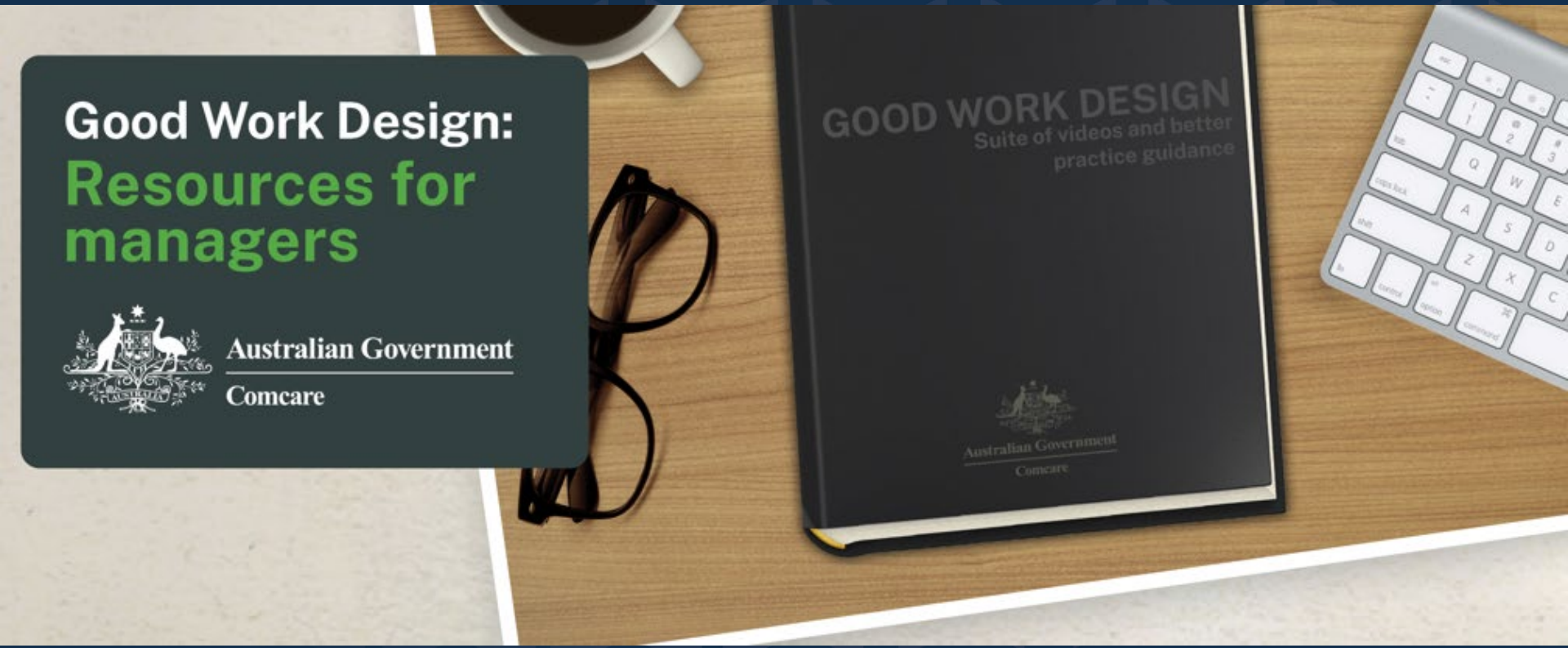
Comcare's Good Work Design resources



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The Good Work Design resource topics

1. Knowing your team
2. Providing flexible work
3. Effective communication
4. Supporting Return to Work
5. Supporting your team
6. Addressing work demands
7. Managing change at work
8. Building trust in your team
9. Enhancing performance
10. Managing absence

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Applying good work design

Knowing your team and Supporting return to work	• You know Rob has chronic osteoarthritis. • You've discussed taking regular breaks and making sure breaks are taken when needed. • He can get anxious and miss details when deadlines are tight.
Addressing work demands	• Providing a clear, written work plan and role clarity supports Rob to manage his time. • In peak periods, Rob can prioritise key work and share excess tasks across team.
Providing flexible work	• Rob prefers to start work early in the day and do more complex tasks then. • He works from home two days per week to manage school drop off. • He takes a longer lunch break three days a week to exercise.
Effective communication	• Regular and clear communication is important for Rob. • He goes quiet and withdraws when he gets overwhelmed by work

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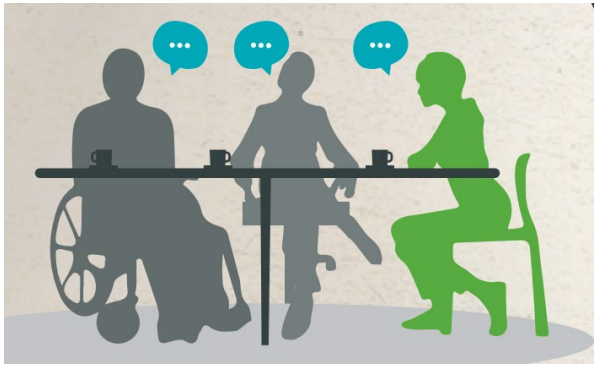
Integrate within systems, culture and management practice



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Good Work Design Information

Visit **comcare.gov.au** for more

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Key messages

1. Address the psychosocial factors that are contributing to body stressing injuries.
2. Use good work design to address physical and psychosocial risks.
3. Focus on frontline manager/supervisor capability.

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Panel discussion

Addressing your questions with a focus on ‘practice into action’

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POLL QUESTION

What resources, guidance or supports would help you to prevent and manage body stressing in your workplace?

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Thank you for attending

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