



## **Service Priorities and Programmes**

### **Electronic Presentations**

**Convention ID:** 708

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#### **Improvement Program on the Design of Physician's Consultation Station in GOPC (Kowloon West Cluster) – a Participatory Ergonomic approach**

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#### **Keywords:**

Staff wellness

OSH

Ergonomics

DSE

#### **Introduction**

Physicians working in GOPC were defined as frequent DSE user as they spent most of the day in their own workstation and computer was used in every patient consultation. This unique job nature drew the attention of senior management of 19 GOPCs whom solicited help from field experts at cluster level for a collaborated improvement program.

#### **Objectives**

(i) Explore the current status in terms of musculoskeletal discomfort and workstation design; (ii) Formulate multi-level stepwise improvement strategies to all GOPCs in KWC with reference to positive experiences learnt from the pilot clinics

#### **Methodology**

Seven clinics were selected as pilot with reference to an environmental audit conducted in prior. Special team from KWC DSE working group (members consisted of Occupational Therapist, Physiotherapist and Nurse) worked with the DSE officer of respective clinics in providing site visit to all physicians' consultation rooms. Questionnaire was sent to physicians to explore their opinions on current status and the prevalence of musculoskeletal symptoms. Each workstation was measured and user's behavior was charted. Focus group meetings held to discuss the findings with both physicians and DSE subject officers. Tailor-fit improvement plan for each workstation were developed. These improvement plans were then concluded as priority actions to all the other GOPCs.

#### **Result**

31 physicians were successfully involved from pilot clinics. The top-3 body regions reported to have musculoskeletal discomfort affecting work ability were low back (58.8%), wrist/ hand (50%) and upper back (47.1%). 22.6% expressed that the workstation/ environment not matching well with their need. 77.5% of subjects

mentioned that their daily work demanded highly repetitive motions related to use of mouse, keyboarding (typing) and getting print-out. A total of 80 issues were then identified by DSE subject officers of individual GOPCs that fulfilling the criteria of workstation re-design (as related to keyboard drawer, printer trolley, footrest, consultation desk and chair). Participatory (bottom-up) approach was found to be an effective strategy in developing practicable improvements that bridge the gap between management and user's concerns. Design features on consultation desk, keyboard drawer and printer trolley were refined and recommended to all GOPCs, whilst the special need of highly-adjustable workstation design was acknowledged for selected clinics. DSE subject officers from all the 19 clinics were empowered with essential ergonomics concepts throughout the process while ongoing support were provided by Occupational Therapist specialized in ergonomics as well as field experts in OSH committee.