An Ergonomics Intervention in a Transformer Manufacturing Industry to Improve the Productivity

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ABSTRACT: This Paper is about the evaluation of the workstation to improve the productivity by reducing the back pain, shoulder injury, fatigue etc. Musculoskeletal disorders (MSDs) continue to be a tremendous burden in industry with back injury and shoulder disorders being among the most common and costly disorders because of not having proper workstation. In industrialized countries, upper limb work-related musculoskeletal disorders (UL-WMSDs) are the most common form of occupational diseases. They are generating a growing population of workers with reduced working capacity. The link between these Pathologies and different aspects of work organization has been convincingly proven. Productivity is an important indicator of economic growth and social health. High performance and productivity require the right sitting posture. So for considering this factor operator needs proper seating arrangement such that their problems regarding the MSDs can be reduced and productivity will be increased. It is revealed that the suggested workstation improves working posture and results in reduced postural stress on operators’ bodies and, consequently, reduce prevalence of MSDs symptoms.

Keywords: Ergonomics Evaluation, Musculoskeletal Disorders, Workstation Design, UL-WMSDs, RULA.

I. INTRODUCTION

Work-related musculoskeletal disorders (WMSDs) are one of the greatest occupational health concerns today. Of the many types of WMSDs, low back disorders (LBDs) are the most prevalent and by themselves constitute a major health and socioeconomic problems [1]. Decades of research has identified certain physical workplace factors that increase the risk for MSDs. Perhaps nowhere is the problem of stooped and squatting posture of greater magnitude than in developing countries such as India [1]. An adaptation of such postures is frequently observed in small scale industries in India. The evaluation of the workstation to improve the productivity by reducing the back pain, shoulder injury, fatigue etc. Productivity is an important indicator of economic growth and social health. High performance and productivity require the right sitting posture. In industrialized countries, upper limb work-related musculoskeletal disorders (UL-WMSDs) are the most common form of occupational diseases[3]. So for considering this factor operator needs proper seating arrangement such that their problems regarding the MSDs can be reduced & productivity will be increased. Most of the manually energized operations in these industries are evident of such postures. An industry is identified in central India where 91% of operators are suffering from WMSDs. Here is the study of Transformer Manufacturing Industry is being taken where operators working on the German made Coil Winding Machine. The Transformer winding operation is performed on the winding machine on provided stool arrangement which is hard & flat in surface without any backrest. Figure 1 shows the details of posture adapted [5].

The task of winding transformer is repetitive and continuous thought 9 hours of working in a whole day. In this condition back is bent excessively and postures of different parts of a body dramatically deviate from its neutral. Most of the experienced operators leave their jobs because of poor working conditions and musculoskeletal problems.

Figure 1. A typical working posture adapted in order to perform Transformer winding operation.

The ergonomic guideline and principles are meant to provide an orientation towards the physiological and psychological need of the operator. The design is essentially a compromise between the operator’s

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biological needs, as determined by the ergonomics guidelines and physical requirements of the equipment [4]. Basically when one sits on a hard surface without any backrest, the Ischia tuber sites act as fulcra around which the pelvic girdle rotates under the weight of upper body. Regardless of what one sits on, an armchair, stool, an office chair, a car seat or a wheelchair the body is always mechanically affected. How seating is designed always has an impact. Proper fit becomes much more important when it relates to product that a person will be physically interacting with for hours at a time. There is one thing that every health professional agrees on: good posture is critical to longevity and good health. Alexander Techniques Practitioners, Qi Gong and Yoga masters, Neurologists, Fitness expert and Ergonomist all understand that keeping the body in alignment is of utmost importance [6].

The present study had the following objectives.
To investigate the prevalence of musculoskeletal problems in operators’ population
To improve the working condition by suggesting new workstation
To assess the working condition improvement
Assessment of the new workstation to improve the productivity

II. MATERIAL AND METHOD

2.1 QUESTIONNAIRE AND INTERVIEW TECHNIQUE:
Questions pertaining to different problems related to a particular task such as: normal daily activity; discomfort in the different body parts; working hours; resting periods; and total working duration. NIOSH discomfort survey was used for mapping the different areas of pain with its intensity in the body along with the factors like duration and frequency. Worker’s Assessment with the help of QEC. The Quick exposure checklist (QEC) quickly assesses the exposure to risks for work related musculoskeletal disorder (WMSDs). QEC is Practitioners needs and research on major risk factors [7].

QEC gives an evolution of workplace and equipment design, which facilitates redesign. QEC helps to prevent many kinds of WMSDs from developing and educates users about WMSDs risk in their workplaces. So considering the QEC one survey has been conducted. In that survey seven questions are asked to the operators and the operators has to tick on the options which are provided to their checklist.

Worker’s Assessment by QEC
What is the maximum weight handled in this task?
A: Light (5 kg or less)
B: Moderate (6 to 10 kg)
C: Heavy (11 to 20 kg)

How much time on average do you spend per day doing this task?
A: Less than 2 hours
B: 2 to 4 hours
C: More than 4 hours

When performing this task (single or double handed), what is the maximum force level exerted by one hand?
A: Low (e.g., Less than 1 kg)
B: Medium (e.g., 1 to 4 kg)
C: High (e.g., More than 4 kg)

Do you experience any vibration during work?
A: Low (or no)
B: Medium
C: High

Is the visual demand of this task-
A: Low?
B: High?
C: Medium

Do you have difficulty keeping up with this work?
A: Never
B: Sometimes
C: Often

How stressful do you find this work?
A: High
After this I need to check the answers which are given by the operators so that the operator’s problems can be understood. For example we can understand that where is the problem exactly, where is the intensity of the problem i.e. stress, strain, low back pain, shoulder injury, etc. We can understand all this by result and analysis

III. RESULT AND ANALYSIS

Discomfort Survey Method at Niosh
Musculoskeletal discomfort surveys collect information on the location of discomfort by reference to specific body regions or by use of partial- or whole-body diagrams that designate specific regions to be assessed.[8]

Less commonly, body maps are shaded by respondents to identify regions of discomfort.

A general purpose survey proposed by Cameron (1996) targeted over 100 regions, involving permutations of the left, right, front, and back sides of the body.[8]

The body maps used in many NIOSH studies are very close to standardized diagrams used to distinguish[8]

various upper- and lower-extremity body regions in the SNQ (neck, shoulders, elbow, wrists-hands, upper and lower back, hips/thighs, knees, ankles/feet)

<table>
<thead>
<tr>
<th>Discomfort Duration</th>
<th>Discomfort Frequency</th>
<th>Discomfort Intensity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 hour</td>
<td>Almost never (every 6 months)</td>
<td>No pain</td>
</tr>
<tr>
<td>1 to 24 hours</td>
<td>Rarely (every 2 to 3 months)</td>
<td>Mild</td>
</tr>
<tr>
<td>25 hours to 1 week</td>
<td>Sometimes (once a month)</td>
<td>Moderate</td>
</tr>
<tr>
<td>More than 1 to 2 weeks</td>
<td>Frequently (once a week)</td>
<td>Severe</td>
</tr>
<tr>
<td>More than 2 weeks to 1 month</td>
<td>Almost always (daily)</td>
<td>Worst pain ever in life</td>
</tr>
<tr>
<td>More than 1 to 2 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than 3 months</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Body Discomfort Map

Discomfort Rating Scales Commonly Used in NIOSH Studies [9]
Musculoskeletal discomfort surveys collect information on the location of discomfort by reference to specific body regions or by use of partial or whole body diagrams that designate specific regions to be assessed. Less commonly body maps are shaded by respondents to identify regions of discomfort. The number of regions targeted varies in relation to the interest of study. [7]

IV. POSTURAL ANALYSIS

Different techniques are applied for postural analysis of work related musculoskeletal risk factors. These methods are Rapid Upper Limb Assessment Method (RULA) method and Rapid Entire Body Assessment (REBA) method.

RULA

RULA is a quick survey method for use in ergonomic investigations of workplaces where MSD’s are reported. It is a screening tool that assesses biomechanical and postural loading on the body. It focuses on the neck, trunk and upper limbs, and is ideal for sedentary workers. It is a simple, quick and easy to complete. RULA scores indicate the level of intervention required to reduce MSD risks [10].

<table>
<thead>
<tr>
<th>Final Rula Score</th>
<th>Requirements for action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or 2</td>
<td>Indicate that posture is acceptable if it is not maintained or repeated for long period.</td>
</tr>
<tr>
<td>3 or 4</td>
<td>Indicates that further investigation is needed and changes may be required</td>
</tr>
<tr>
<td>5 or 6</td>
<td>Indicates investigation and changes are required soon.</td>
</tr>
<tr>
<td>7</td>
<td>Indicates investigation and changes are required immediately.</td>
</tr>
</tbody>
</table>

ANTHROPOMETRY MEASUREMENT
STANDARD SITTING PARAMETER

Chair back strength of 150 pounds.
Chair stability if weight is transferred completely to the front or back leg.
Leg strength of 75 pounds applied one inch from the bottom of the leg.
Seats strength of 225 pounds dropped from 6 inches above the seat.
Seat cycle strength of 100,000 repititions of 125 pounds dropped from 2 inches above the seat.
While sitting upright, your elbow should be at 90 degrees angle. If they are not, move your seat up or down. If you use armrest, they should be high enough to slightly lift arms at the shoulder to take stress of your neck and shoulder.

If you are sitting at a computer with your head facing forward, your eyes should be aimed at the centre of computer screen. If your screen is higher or lower than your gaze, raise or lower it accordingly.
Your feet should be flat on floor with 90 degrees angle at knees. You should be able to slide your fingers easily under your thigh and slide your fist behind your calf and front of your chair. If you cannot do these things, you can prop your feet up with a footrest or add a lumber support to the back of your chair.
Your ears should be aligned over your shoulder.

ERGONOMIC DIMENSIONS OF THE WORKSTATION

EFFECT OF SITTING POSTURE ON PRODUCTIVITY

Increase in medical expenditure
Increase in work compensation
Decrease in productivity
Shorter work life
Increase in stress level [10]

DESIGN & DEVELOPMENT OF THE WORKSTATION
IV. CONCLUSION

Analysis and implementation of ergonomic chair gives great difference in the readings taken for different factors. The body pain in the operator minimizes due to implementation of ergonomic chair. This leads to increase in productivity and efficiency of the worker. Rest pauses minimizes due to which lead time decreases. Capability and concentration of workers increases due to less fatigue observed.

REFERENCES

[9] “Ergonomic Design of Desk and Chair for Primary School Students in Taiwan.” by Rungtai Lin and Yen-Yu Kang