TECHNICAL GUIDELINES ON SAFETY AND HEALTH FOR CONTACT CENTERS

PREFACE

A contact center is a central customer service operation where agents, often called customer care specialists or customer service representatives handle telephone calls on behalf of a client.

The rapid growth of the industry has made the Philippines the new contact center hub in Asia. However, the industry is also beleaguered by a high staff turnover rate. Concern over safety and health conditions at work is among the major reasons workers leave their jobs in contact centers. Available scientific information derived from local and international studies acknowledge that there are recognized health and safety issues associated with contact center work.

To respond to the safety and health issues in the industry, the Guidelines was developed for use by both workers and employers. The Guidelines present the fundamental health and safety principles and the preventive measures needed to deal with these issues.

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ON SAFETY AND HEALTH
FOR CONTACT CENTERS

Managing Health and Safety Hazards

Health and safety hazards differ from one contact center to another. This would depend among others in the tasks involved, the nature of the work organization, performance quotas and requirements, type of clients, individual and psychosocial factors.

The Guidelines addresses health and safety concerns associated with the typical tasks performed and common working conditions in contact centers in the Philippines:
1. Computer-related health disorders
2. Hearing and voice problems linked to telephone use
3. Prolonged night work
4. Stress at work

We recommend that an initial assessment of your health and safety conditions is made to check if your workers are at risk of developing work-related disorders. You may want to ask the key questions posted at the end of each section to check if action is needed to improve the workplace or work practices, or to respond to individual complaints. The key questions are divided into the important elements of the work system, namely, physical environment, workstation, job organization and individual and psychosocial factors.

Computer-Related Health Disorders

The workers in contact centers invariably utilize computers in their business activities and predispose them to risk factors that may affect the eyes and musculoskeletal system.

Work-Related Musculoskeletal Disorders (WMSDs)

Work-related musculoskeletal disorders are disorders of the muscles, nerves, tendons, ligaments, joints, cartilage or spinal discs partially caused, aggravated, accelerated or exacerbated by adverse working conditions. The development of WMSDs requires weeks, months or years of exposure to identified risk factors. Recovery is likewise prolonged, often extending long after exposure to the risk factor has ceased. Symptoms of WMSDs may include pain, fatigue, swelling, numbness, and tingling and may be experienced in any of the body parts. In computer users, the usually affected areas are the neck, shoulder, wrist/hand and lower back.

Single or, more commonly, multiple risk factors may be present in the workplace. Multiple risk factors often interact to produce a higher risk for developing WMSDs. You may want to ask key questions to see if workers are at risk of developing WMSDs. (Box 1)

Visual Fatigue

Computer use is demanding to the eyes since work is done at a close distance over long periods of time. Reduced blinking rate and widening of the eye surface area when working with the computer contribute to increased eye discomfort due to drying of the eyes. Symptoms of eye strain include smarting, itchiness, redness, tearing or dryness, or eye pain. (Box 2)

Box 1. KEY QUESTIONS TO ASSESS RISK OF WMSDs:

1. Physical Work Environment
   a. Is your workplace adequately lit?
   b. Is the computer monitor free of glare and reflections?
2. Workstation Design
   a. Are your feet flat on the floor?
   b. Does your chair provide proper back support?
   c. Can the height of your chair, table and keyboard be adjusted?
   d. Is the computer monitor placed directly in front of you and positioned at least an arm's length away from your body?
   e. Is the height of the monitor below eye level? Is the monitor tilted backwards?
   f. Does your workspace allow you to reach objects easily that are frequently used?
3. Work Posture
   a. Do you consciously change your posture frequently?
   b. Are your shoulders relaxed and level when working with the computer?
   a. When using your keyboard and mouse, are your wrists straight?
   b. Is the mouse at the same level as your keyboard?
 4. Job Design/ Organization
   a. Do you take work breaks after 1 hour of continuous computer work to avoid fatigue and muscle aches and pains?
   b. Can you change the pace of your work or performance quotas to levels that will prevent fatigue and muscle aches and pains?
   c. Are you able to insert other tasks to provide variability to your job?
5. Individual Factors
   a. If you have any visual deficiencies, have you had these corrected?
   b. Are you provided with adequate training on computer operation?
   c. Has your employer trained you to set up your workstation?

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Box 2.  KEY QUESTIONS TO ASSESS RISK OF VISUAL FATIGUE:

1. Computer Monitor
    a. Does the monitor produce good image quality free from flickers?
    b. Can the character size be adjusted?
    c. Is the monitor free from glare and reflections?
2. Work Environment
    a. Is the air not too dry with relative humidity at least 40%?
    b. Is the air movement comfortable (<0.5 m/sec)?
3. Work Position and Practice
    a. Do you maintain a downward viewing gaze when working with the computer?
    b. Are you consciously blinking while in front of the computer?
4. Workstation Design
    a. Does your chair provide proper back support?
    b. Can the height of your chair, table and keyboard be adjusted?
    c. Is the computer monitor placed directly in front of you and positioned at least an arm's length
       away from your body?
    d. Is the height of the monitor below eye level and tilted backwards?
    e. Is your workspace adequate to allow you to easily reach objects that are frequently used?
5. Job Design/ Organization
    Do you take eye breaks by looking at a distance after 1 hour of continuous computer work?
6. Individual Factors
    If you have any visual deficiencies, have you had these corrected?
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Health Problems Linked to Telephone Use

Contact center employees spend a significant part of their working time talking to clients on the telephone and at the same time working with a computer. Headsets and commonly used instead of the conventional telephone handset. The demands of the job burden the auditory and vocal systems and consequently may produce hearing and voice disorders.

Repetitive Voice Injury

Contact center operators are at risk for voice problems because of the nature of their job and because of certain individual factors. The manifestation of this disorder is not just an inability to speak but also includes pain, tension, croakiness, irritating cough, inability to modulate, poor or no vocal power and breathing difficulties. (Box 3)

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Box 3. KEY QUESTIONS TO ASSESS RISK OF VOICE INJURY:

1. Work Environment
   a. Is the background sound kept to levels to prevent you from raising your voice?
   b. Is the ventilation system cleaned regularly to prevent the air from causing throat irritation?
   c. Are the temperature and humidity maintained at comfortable levels?
2. Job Design/ Organization
   a. Can you make adjustments to the script provided to lessen load to the vocal system?
   b. Can you complete the script without either breathing difficulties or having to strain your voice?
   c. Can you take breaks from talking if your voice is already cracking or fatigued?
3. Individual Factors
   Are you aware of the steps you can take to minimize potential risks to your vocal health, such as:
   • drinking water rather than tea and coffee?
   • not to speak too loud?
   • avoid smoking?
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Injury to The Ears

Most operators in contact centers use headsets to attend to calls. These headsets may be fitted for one or both ears. The main problems related to this work practice are exposure to noise and biological agents that can cause ear infection. Hearing loss, ringing in the ear, and ear pains linked also with headaches and nausea may be noted in workers exposed to high noise levels. Hearing problems may arise from sharing of headsets as this practice increases the risk of ear infections. (Box 4)

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Box 4. KEY QUESTIONS TO ASSESS RISK OF INJURY TO EARS:

1. Physical Work Environment
   a. Is the intensity of background noise at acceptable levels to allow you to speak without raising
      your voice?
   b. Is your headset free from sudden bursts of loud noise, such as line interference?

2. Job Design/ Organization
   a. Are you provided with your own headset?
   b. Do you have sufficient breaks to allow your hearing system to rest?

3. Individual Factors
   a. Are you provided with adequate training on the use and maintenance of your headset?
   b. Do you clean your headset regularly?
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Psychosocial Stressors at Work

Stressful work environment in contact centers has been associated with varying degrees of physical and psychological adverse health effects that include anxiety, depression, job dissatisfaction, irritability, gastrointestinal disorders, and WMSDs. The demands and pressure placed on contact center workers can also manifest as increased absences, reduced performance and increased turnover or attrition rate. To improve and maintain employee health and well-being, consideration must be given to the potential exposure of employees to risk factors for work-related stress. (Box 5)

Box 5. KEY QUESTIONS TO ASSESS RISK OF STRESS AT WORK: For the Worker

1. Work Demand
   a. Are you assigned with realistic work quotas?
   b. Are your skills being utilized adequately in your job?
   c. Are you subjected to fight violent and irate clients?
   d. Is there a system in place to help you deal with angry and irate clients?

2. Nature of work supervision
   a. Is your job standardized?
   b. Are you given some margin for adjustments and modification?
   c. Are you given regular work feedback?
   d. Are your opinions considered when the company makes decisions that will directly affect you?

3. Work Schedule
   a. Are duration and frequency of breaks for rest and toilet breaks adequate?
   b. Do you have control over your shift schedule assignments and the number of hours of your work?

4. Job content
   a. Do you find your work pace consistent with the demand for good customer service?
   b. Are work goals and standards of work quality clear?

5. Technical work environment
   a. Are you provided with opportunities to upgrade your capabilities?
   b. Are you given training and education to gain skills and knowledge necessary for you to perform your job efficiently?

6. Business restructuring
   Do you have security of tenure in your job?

Box 5. KEY QUESTIONS TO ASSESS AN OCCUPATIONAL HEALTH AND SAFETY PROGRAM :
For the Employer

1. **Work Policy**
   Do you have a workplace policy on Safety and Health?
   Drug-Free workplace, HIV-AIDS prevention, TB-Free Workplace, Smoke-Free Workplace?
2. **Does your company have clear work policies regarding employee involvement in decision making, performance evaluation, incentives, and workplace improvement?**
3. **Social environment at work**
   a. Does management provide adequate support for good performance and encouragement for improvement?
   b. Are there systems in place to deal with working in isolation and interpersonal conflicts such as rivalry and bullying?
   c. Are assistance programs in place to help employees cope with stress?
4. **Do you have a safety and health committee?**
5. **Do you have a system of recording, reporting and notifying work-related injuries and illnesses?**
6. **What is the nature of your health and safety services?**
7. **Are your workers, supervisors given information and training on occupational safety and health and related concerns?**
8. **Does your company implement programs on the following:**
   a. Work Environment Measurement
   b. Fire Safety
   c. Electrical Safety
9. **Work Policy**
   Do you have a workplace policy on Safety and Health?
   Drug-Free workplace, HIV-AIDS prevention, TB-Free Workplace, Smoke-Free Workplace?
10. **Does your company have clear work policies regarding employee involvement in decision making, performance evaluation, incentives, and workplace improvement?**
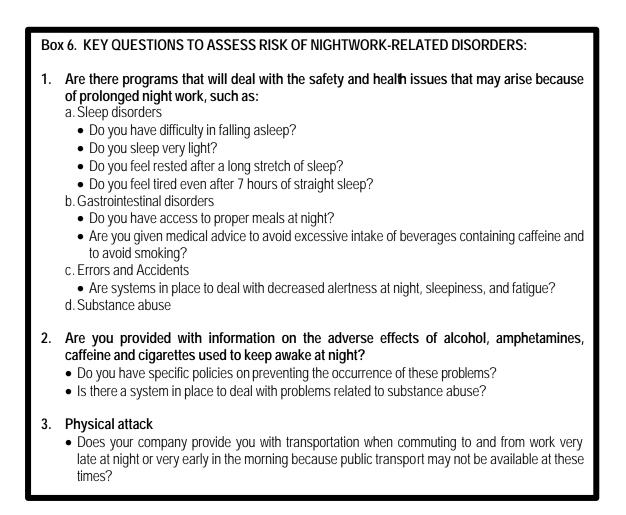11. **Social environment at work**
    d. Does management provide adequate support for good performance and encouragement for improvement?
    e. Are there systems in place to deal with working in isolation and interpersonal conflicts such as rivalry and bullying?
    f. Are assistance programs in place to help employees cope with stress?
12. **Do you have a safety and health committee?**
13. **Do you have a system of recording, reporting and notifying work-related injuries and illnesses?**
14. **What is the nature of your health and safety services?**
15. **Are your workers, supervisors given information and training on occupational safety and health and related concerns?**
16. **Does your company implement programs on the following:**
    d. Work Environment Measurement
    e. Fire Safety
    f. Electrical Safety

Prolonged Nightwork

The odd work schedule is a peculiarity in contact centers in the Philippines. This is characterized by predominant nightwork to coincide with the regular business hours of the clients in Northern America or Europe. Nightwork, thus, becomes an important occupational safety and health issue since prolonged nocturnal work forces the worker to invert the "activity-rest" cycle and has been documented to have negative impact on the health and well-being of the workers. Health effects include sleep disorders, eating disturbances and gastrointestinal disorders, mental problems and probably cardiovascular disturbances.

Effects on work performances and efficiency leading to errors and accidents have been documented. Another hazard of shift work is the increased use of caffeine, alcohol or drugs such as methamphetamines or sleeping pills by workers trying to overcome the effects of fatigue or trying to get to sleep. Also, early or late shifts create transportation problems and concerns for safety. (Box 6)

Box 6. KEY QUESTIONS TO ASSESS RISK OF NIGHTWORK-RELATED DISORDERS:

1. **Are there programs that will deal with the safety and health issues that may arise because of prolonged night work, such as:**
   a. Sleep disorders
      - Do you have difficulty in falling asleep?
      - Do you sleep very light?
      - Do you feel rested after a long stretch of sleep?
      - Do you feel tired even after 7 hours of straight sleep?
   b. Gastrointestinal disorders
      - Do you have access to proper meals at night?
      - Are you given medical advice to avoid excessive intake of beverages containing caffeine and to avoid smoking?
   c. Errors and Accidents
      - Are systems in place to deal with decreased alertness at night, sleepiness, and fatigue?
   d. Substance abuse

2. **Are you provided with information on the adverse effects of alcohol, amphetamines, caffeine and cigarettes used to keep awake at night?**
   - Do you have specific policies on preventing the occurrence of these problems?
   - Is there a system in place to deal with problems related to substance abuse?

3. **Physical attack**
   - Does your company provide you with transportation when commuting to and from work very late at night or very early in the morning because public transport may not be available at these times?

RECOMMENDATIONS TO PROMOTE
HEALTH AND SAFETY IN THE WORKPLACE

The complaints reported by contact center employees may be caused by the hazardous factors identified such as inadequate workplace dimension and layout, improper work posture, unfavorable physical environment, long working hours, prolonged nightwork and other potential hazards. The following may be undertaken by the company to address these problems:

<u>Health and Safety Tips for Computer Use</u>
The risk factors for work-related musculoskeletal disorders and eye fatigue can be controlled by keeping the following principles in mind:
- Adjust and customize workstation to fit the worker
- Frequent changes in work posture
- Adequate breaks from computer work

A. Adjusting and customizing the workstation
- Position top of monitor below eye level to favor a downward gaze
- Maintain a comfortable viewing distance of about an arms length
- Tilt the monitor backward by about 10 to 20°
- Adjust color, brightness, contrast for eye comfort
- Place monitor perpendicular to window or light source to reduce glare
- Close blinds or dim lights if there is too much glare or reflection
- Always keep the monitor clean

B. Selecting chairs that are appropriate for computer work
- Adjustable height
- If provided, adjustable arm rest height and splay
- Appropriate lumbar support
- Edges that are rounded
- Five-leg base for stability
- Fabric that breathes
- Seat pan that fits and swivels

C. Adjusting the keyboard for comfortable posture of the hands and wrists
- Place the keyboard at approximately seated elbow height
- Keyboard height should allow the shoulders to be relaxed
- Wrist position should be straight and not bent or rotated
- Place mouse next to keyboard to avoid frequent reaching

D. Good work practices to prevent aches and pains
- Frequently change body positions while consciously maintaining neutral body posture
    - Alternate between standing and sitting
    - Symmetry in posture (no twisting, rotation or bending) is desired so that compressive forces to and muscle forces of the spine will be equal. This, in turn, may help prevent neck and back pain.

- Reduce repetitions by encouraging "break jobs" or job away from the computer
  - Arms and hands should be relaxed when not keying. Hands may be placed on the lap instead of holding the fingers poised over the keys.

- Minimize stress on body by making use of the workstation supports provided such as the lumbar support, foot rest, wrist/arm rest, etc.
  - Promoting the habit of using back support of the chair may induce a reclining position rather than a forward leaning position. A reclining position will transfer some of the load of the spine to the chair.

- Reduce eyestrain by:
  - Detection and correction of error of refraction
  - Exercising eye muscles and blinking
  - Looking into the distance

- Practice stress-reduction techniques

It must be emphasized, though, that even the most comfortable posture should not be assumed for prolonged periods. The static load on the muscles and joints may lead to pains and discomforts. Variability in the task may offer opportunity for changes in posture and use of different muscle groups and joints. An alternating sitting and standing posture may be afforded by a workstation with surfaces that can be fully adjusted with ease.

Preventing injuries to the ears

There are several measures for reducing noise in the workplace. Noisy areas and equipment can be isolated to prevent exposure of contact center employees to the high level sounds being generated. This practice would also prevent employees from increasing sound volume of their headsets to drown the background noises.

Contact centers should find ways to reduce background and interference noise. Acoustic shock protection integrated in headsets is an effective way of reducing exposure to unexpected high noise levels from headsets. Infection control in the use of headsets must be an important program for contact centers. Sharing of headsets should be avoided. Appropriate cleaning and maintenance of the headsets must be implemented to prevent the spread of infection.

Addressing OSH Issues Associated with Nightwork

The length of time a worker stays in a shift schedule also has an impact on their well-being. By definition, slow rotating shift systems implement shift changes weekly or at longer intervals. On the other hand, rapidly rotating shift systems implement a change in shift schedule after a maximum of three consecutive days have been spent on a particular shift schedule. It is generally accepted that complete adaptation to night work is possible the longer the workers stay in that shift schedule. However, researches show that night workers never really get used to this schedule. In effect, the longer one stays in the night shift, the more

stressful it becomes to the worker. Over several days, fatigue can accumulate to unsafe levels. It may then be rational to look at rapid change in the shift schedules as an intervention to prevent the onset of cumulative fatigue and worsening of existing health conditions.

Medical surveillance

The incidence of health complaints among employees should always be a source of concern for the employers. Symptom survey and annual medical examinations are good sources of data for the surveillance system. Medical examinations should be made available to all workers, including the newly hired. Results of the pre-placement examination will serve as baseline data. Periodic examinations will allow early detection of disorders from hazards in the workplace. Presence or absence of work-connected diseases is an indicator of effective preventive measures.

- The medical surveillance program an important element of an OSH program. This mechanism will provide useful information to help prioritize problems, to optimize use of resources in the implementation of intervention measures, and to evaluate success of interventions.
- Trends of injury and illness rates should be determined taking into consideration the work rates, time of year, body areas affected, job description, and age and gender of workforce.

Worker Education and Training

To maximize the effectiveness of any adjustable features of the computers, tables and chairs, the agents must be familiar with proper adjustment methods. Further, the operators must be informed of the consequences of improper posture, prolonged computer work and other stresses in the workplace. The workers must be allowed to participate actively in the prevention of health disorders and the improvement of working conditions. The following training programs are suggested for managers and supervisors depending on a training needs analysis:

- Orientation of the SH Committee members
- General safety awareness/orientation
- Fire safety
- Materials handling and storage
- Ergonomics
- Electrical safety
- Health and environmental trainings
- SOLVE (Stress, Violence, HIV, Drugs and Tobacco)

SPECIFIC RECOMMENDATIONS
TO ADDRESS SAFETY HAZARDS

1. **Improve self regulation for safety**
   - Conduct safety inspection by members of the occupational safety and health committee
   - Formulate standard operating procedures (SOPs) to be compiled to a manual and distributed to all employees.
   - Monthly safety reports could be posted in bulletin boards.
   - Extensively promote safety and health
   - Set up bulletin board and regularly update information.
   - Solicit management and workers' support for OSH programs and activities
   - Post safety and health posters/reminders in appropriate locations
   - Standardize safety signage

2. **Improve general workplace conditions**
   - Maintain all floors to be free of slip, trip and fall hazards.
   - Make floors clean and orderly.
   - Implement/promote good housekeeping program.
   - Mark routes and exits clearly.
   - Improve materials handling and storage
   - Post no smoking signs where necessary.

3. **Improve equipment maintenance and handling**
   - Ensure good condition and record inspection of all electrical power systems.
   - Close and secure high voltage and control panels.
   - Identify and make control panels accessible.
   - Check condition of wirings, insulation and fixtures and test for grounding.
   - Make electrical lock out provisions available and protect electrical equipment from fluids.

4. **Improve hazard control system**
   - Hazard, warning, directional and information signs and tags should be used where there are immediate dangers, potential hazards or even when there is a need for more general instruction.
   - Consistently use standardized signs and tags throughout the facility; affix tags to all defective equipment to protect against use; use legible and visible standard labels for all containers of materials and substances in use and storage.

5. Improve emergency system
- Emergency control instructions should be in place. Post emergency instructions in each work area. Fire extinguishers should be accessible and inspected monthly and other fire equipment should be clearly marked.
- Training on fire extinguisher use is a must.
- Locate first aid kit/equipment/station in strategic places. Post specific instructions for accident reporting and names of qualified first aid attendants.

PROMOTION OF HEALTH AND SAFETY
IN CONTACT CENTERS:
Major Components of the OSH Program

1. Employer's Obligations

The Philippine Occupational Safety and Health Standards (OSHS) embody the minimum requirements that an employer must comply with in order to safeguard the well-being of the workers. Under this law, enterprises should formulate policies that will indicate management commitment in providing a safe and healthful workplace and in allocating resources to achieve this objective. The policy will be the basis of the occupational safety and health programs aimed at preventing, reducing, and possibly eliminating health and safety hazards to policy should form part of the whole operations, consistent with one of the key goals of modern business — continuous improvement.

2. Employees' Involvement

Employees can provide information about hazards in their workplace, participate in the problem-solving process, and assist in evaluating effectiveness of workplace improvements. Their involvement will lead to greater acceptance of changes made in the workplace and enhance employees' motivation and satisfaction.

3. Worksite Analysis

Worksite analysis involves identification of existing hazards, and conditions and operations which might give rise to hazards. The following activities may be carried out:

a. Routine job hazard analysis and site inspections
b. Baseline worksite surveys for safety and health
c. Investigation of accidents and "near misses" incidents
d. Injury and illness trend analysis and evaluation

4. Hazard and Risk Prevention and Control

After hazards and potential risks have been identified during the worksite analysis, efforts should be directed towards control. The goal of hazard control and reduction is to reduce the extent of exposure to hazards so that the likelihood for them to cause illness or injury will be reasonably decreased.

a. Engineering measures
- The first step in the hierarchy of control measures
- Hazards may be engineered out of the workplace through:
    - Changing or redesigning workstations, tools, facilities, equipment, materials, or processes
    - Isolating hazards
    - Installing efficient ventilation

b. Administrative control measures
Managerial efforts to reduce hazard exposure such as:
- Job rotation
- Proper work procedures
- Hazard and risk communication
- Medical and environmental surveillance
- Emergency preparedness plan in the event of fire or other emergencies
- Safety and health training for employers, supervisors, employees, and safety and health practitioners

c. Use of appropriate personal protective equipment
- Complement to engineering and administrative measures
- Proper selection of PPE and appropriate training for PPE users should be provided

5. Monitoring and Evaluation of Policy and Program
Monitoring and evaluation of effectiveness of the policy and program should be done regularly. Revision may be done whenever necessary. The methods used for identifying problems can also be used for the monitoring and evaluation process.

6. Regulatory Compliance
The Occupational Safety and Health Standards calls for all employers to exert efforts to maintain and control the working environment for the purpose of promoting and maintaining the health and safety of the workers. Specific provisions in the OSHS concerned with prevention and control of workplace hazards include the following:

a. Rule 1000 - General Provisions
- Employer responsibility to comply with the OSHS and to protect workers from hazards
- Rights and duties of workers
b. Rule 1030 - Training of Personnel in Occupational Safety and Health
- Competency and training requirements for OSH personnel
c. Rule 1040 - Health and Safety Committee
- Composition and functions
d. Rule 1050 - Notification and Keeping of Records of Accidents and/or Occupational Illnesses
- Procedures for the recording, notification and investigation of occupational accidents and illness
e. Rule 1070 - Occupational Health and Environmental Control
- Hazard assessment and control

f. Rule 1960 - Occupational Health Services
- Medical, dental and emergency services and facilities

g. Rule 1940 - Fire Protection and Control

h. Issuances from the Department of Labor and Employment
- Department Order No. 53-03 Guidelines for the Implementation of a Drug-Free Workplace Policies and Programs for the Private Sector
- Department Order No. 73-05 Guidelines for the Implementation of
- Policy and Program on Tuberculosis (TB) Prevention and Control in the Workplace

i. HIV and AIDS Policy and Program in the Workplace

j. Anti Sexual Harassment Policy and Program

k. Smoke-Free Work Environment Policy and Program