DEPARTMENT CIRCULAR NO. 1
SERIES OF 2008
Policy Guidelines Governing the Occupational Safety and Health of Workers in the Call Center Industry and Technical Guidelines on Safety and Health for Call Centers
PREFACE

The information technology-business process management (IT-BPM) industry in the Philippines, to which the sector of the call center industry belongs, has grown steadily since 2007 making the country the call center hub of the world. The industry has generated jobs equivalent to billions of pesos in revenue. Staff turnover rate has improved over the years but concerns over safety and health conditions at work remains to be an important issue. Available scientific information derived from local and international studies acknowledge that there are recognized health and safety issues associated with call center work.

To respond to the safety and health issues in the industry, the Department of Labor and Employment issued Department Circular No. 1, series of 2008, Policy Guidelines Governing Occupational Safety and Health in the Call Center Industry. In addition, a set of technical guidelines was also prepared to compliment the Department Circular for the use of both workers and employers. It presents the fundamental health and safety principles and the preventive measures needed to deal with these issues.
TECHNICAL GUIDELINES ON SAFETY AND HEALTH FOR CALL CENTERS

Managing Health and Safety Hazards
Health and safety hazards differ from one call center to another. These depend in the tasks involved, nature of work organization, performance quotas and requirements, type of clients, individual and psychosocial factors.

The Guidelines addresses the following health and safety concerns associated with the typical tasks performed and common working conditions in call 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 be 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 and technical environment, workstation design, job design/organization, work position and practice, work demand and schedule and individual and psychosocial factors.

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 easily reach objects that are frequently used?

3. Work position and practice
   a. Do you consciously change your posture frequently?
   b. Are your shoulders relaxed and level when working with the computer?
   c. Are your wrists straight when using your keyboard and mouse?
   d. 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?
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 result to drying of the eyes, thus increasing eye discomfort. Symptoms of eye strain include smarting, itchiness, redness, tearing or dryness, and eye pain. (Box 2)

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. Physical work environment
   a. Is the air not too dry with a relative humidity of at least 40%?
   b. Is the air movement comfortable (<0.5 m/sec)?

3. 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?

4. 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?

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?

Health Problems Linked to Telephone Use

Call 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 are 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

Call center operators are at risk for voice problems because of the nature of their job and 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)

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

1. Physical work environment
   a. Is the intensity of background noise at acceptable levels that allow you to speak without 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 to lessen the load to the vocal system?
   b. Can you complete the script without 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 speaking too loud?
   • avoiding smoking?
**Psychosocial Stressors at Work**

Stressful work environment in call 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 call 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)

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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?

**Box 5. KEY QUESTIONS TO ASSESS RISK OF STRESS AT WORK:**

1. **Work demand**
   a. Are you assigned with realistic work quotas?
   b. Are your skills being utilized adequately in your job?
   c. Do you often deal with violent and irate clients?
   d. Is there a system in place to help you deal with violent 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 feedback?
   d. Are your opinions considered when the company makes decisions that will directly affect you?

3. **Work schedule**
   a. Are the duration and frequency of 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. **Job security / stability**
   Do you have security of tenure in your job?
Prolonged Nightwork

The call center work schedule in the Philippines is mostly set at nighttime or “graveyard shift” to coincide with the regular business hours of 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 workers. Many have been known to experience health problems such as sleep disorders, eating disturbances and gastrointestinal disorders, mental problems and probably cardiovascular disturbances.

Work performance and efficiency are affected as well, resulting to errors and accidents. Another hazard of night shift work is the increased use of caffeine, alcohol or drugs (i.e. methamphetamine or sleeping pills) by workers trying to overcome the effects of fatigue or trying to get some sleep. Also, very early or very late shifts create safety and transportation problems. (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 lightly?
      • 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 and alcohol abuse
      • Are you provided with information on the adverse effects of alcohol, amphetamine, caffeine and cigarette use to keep awake at night?
      • Do you have specific policies on preventing the occurrence of these problems?

2. 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 transportation may not be available at these times?

Box 7. KEY QUESTIONS TO ASSESS AN OCCUPATIONAL HEALTH AND SAFETY PROGRAM:

For the Employer

1. Work Policy
   a. Do you have a workplace policy on safety and health such as Drug-Free Workplace, HIV-AIDS Prevention, TB-Free Workplace and Smoke-Free Workplace?
   b. Does your company have clear work policies regarding employee involvement in decision making, performance evaluation, incentives, and workplace improvement?

2. 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?

3. Do you have a safety and health committee?

4. Do you have a system of recording and reporting work-related injuries and illnesses?

5. What is the nature of your health and safety services?

6. Are your workers, supervisors given information and training on occupational safety and health and related concerns?

7. Does your company implement programs on the following:
   a. Work Environment Measurement
   b. Fire Safety
   c. Electrical Safety
The complaints reported by call center employees may be caused by hazardous factors which have been identified 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:

**Health and Safety Tips for Computer Use**

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
- Take frequent changes in work posture
- Take adequate breaks from computer work

**A. Adjusting and customizing the workstation**

- Position top of monitor below eye level to favor a downward gaze
- 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. Chairs appropriate for computer work should have:**

- Adjustable height
- 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 refraction error
  - Exercising eye muscles and blinking
  - Looking into the distance

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

Call 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 call 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 his/her 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 days. It is generally accepted that complete adaptation to night work is more possible with the prolonged stay of workers 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.

Preventing Ear Injuries

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. The presence or absence of work-connected diseases is an indicator of effective preventive measures.

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 Safety and Health Committee Members
- General Safety Awareness/Orientation
- Fire Safety
- Materials Handling and Storage
- Ergonomics
- Electrical Safety
- Occupational Health and Environment Trainings
- Management of other Health-Related Issues such as Stress, Violence, HIV and AIDS, Drugs, Tobacco, Tuberculosis, and Hepatitis B
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.
   • Post monthly safety reports on bulletin boards. Update information regularly.
   • Extensively promote safety and health.
   • 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 a 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. All 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 CALL CENTERS:
Major Components of the OSH Program

1. Employer’s Obligations
   The Philippine 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 aimed at preventing, reducing and possibly eliminating health and safety hazards. This will indicate management commitment in providing a safe and healthful workplace. The policies should also form part of the whole operations, consistent with the key goal 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.
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

Administrative control measures

- Managerial efforts to reduce hazard exposure:
  - 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

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.

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:

- Employer responsibility to comply with the OSHS and to protect workers from hazards
- Rights and duties of workers
- Competency and training requirements for OSH personnel
- Composition and functions
- Procedures for the recording, notification and investigation of occupational accidents and illness
- Hazard assessment and control
- Medical, dental and emergency services and facilities
- Drug-Free Workplace Policies and Programs for the Private Sector
- Guidelines for the Implementation of a Drug-Free Workplace Policies and Programs for the Private Sector
- Guidelines for the Implementation of Policy and Program on Tuberculosis (TB) Prevention and Control in the Workplace
- Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program
- Guidelines for the Implementation of a Workplace Policy and Program on Hepatitis B
- Anti Sexual Harassment Policy and Program
- Smoke-Free Work Environment Policy and Program

References:

1. National Profile on Occupational Safety and Health (Philippines), DOLE-OSHC, Manila, 2006
2. National Occupational Safety and Health-Medium Term Plan (NOSH-MTP), 2006-2010
Series of 2008

POLICY GUIDELINES GOVERNING THE OCCUPATIONAL SAFETY AND HEALTH OF WORKERS IN THE CALL CENTER INDUSTRY

Pursuant to the rule-making authority of the Secretary of Labor and Employment under Article 5 of the Labor Code, as amended, and to ensure the protection and welfare of workers employed in the call center industry, the following Guidelines are hereby issued for the guidance of and compliance by all concerned:

SECTION 1. COVERAGE. – These Guidelines shall apply to all establishments, workplaces, operations and undertakings in the call center industry.

SEC. 2. DEFINITION OF TERMS. – As used in these Guidelines, the following terms shall mean:

a. “Call or Contact Center” refers to a central customer service operation where agents or customer care specialists or customer service representatives handle business-related telephone calls and other IT-related activities on behalf of a client.

b. “Occupational Safety and Health Program” refers to planned activities aimed to prevent, eliminate, reduce or control occupational risks and hazards.

c. “Safety and Health Committee” refers to a group of employees and management representatives concerned with the planning, policy-making, implementation and evaluation of all matters pertaining to safety and health.

d. “Safety and Health Personnel” refers to a qualified first-aid staff, nurse, dentist, physician or safety officer engaged by the employer to provide occupational safety and health services.

e. “Occupational Safety and Health Standards (OSHS)” refers to the set of Rules issued by the Department of Labor and Employment (DOLE) which mandates the adoption and use of appropriate practices, means, methods, operations or processes, and working conditions reasonably necessary to ensure safe and healthful employment.

SEC. 3. WORKPLACE POLICY ON OCCUPATIONAL SAFETY AND HEALTH. – An occupational safety and health policy shall be formulated by each establishment addressing the priority safety and health concerns in workplaces and worksites classified as call or contact centers, in accordance with the OSHS and other related Occupational Safety and Health (OSH) issuances.

SEC. 4. COMPONENTS OF THE OCCUPATIONAL SAFETY AND HEALTH PROGRAM. – The OSH program shall include:

a. Hazard and Risk Prevention and Control to reduce the extent of exposure to hazards and to decrease the likelihood for those hazards to cause illness or injury.

b. Capability building for members of the Safety and Health Committee to undertake risk management activities through information, training, and work environment safety and health interventions.

c. Referral and Access to Medical and Welfare Services - Appropriate services as required under Rule 1960 of the OSHS shall be made available which would address the physical, ergonomic and psychological aspects of the work environment as well as the health and safety needs of the workers.

SEC. 5. ROLES AND RESPONSIBILITIES OF THE EMPLOYERS AND WORKERS.-- The Parties herein shall have the following roles and responsibilities:

a. The employer shall formulate and implement a suitable OSH program based on its policy and in accordance with the OSHS and other related OSH issuances, and with the Technical Guidelines on OSH for the Call Center Industry.

b. The employer shall organize a health and safety committee pursuant to Rule 1040 of the OSHS in every workplace whose function is to develop and oversee the implementation of OSH program to include workers orientation and awareness on hazards identification, risk evaluation, prevention and control.

c. The employer shall require their workers to undergo an Orientation Course on OSH.

d. The employer shall provide the applicable number of safety and health personnel such as safety officer, occupational health nurse, occupational health physician and qualified first-aid staff as required by Rules 1030 and 1960 of the OSHS, and the required training for each category.

e. The workers are enjoined to take an active role in education and training, in developing and implementing joint continuing programs and information campaigns on safety and health.

SEC. 6. SOCIAL POLICY. - The employer shall make available occupational safety and health and welfare facilities needed by qualified individuals with specific needs for workers such as pregnant or lactating women, young, older and differently-abled workers.

SEC. 7. PROGRAM IMPLEMENTATION. - In line with the Zero Accident Program (ZAP), the Occupational Safety and Health Center (OSHC) of the DOLE shall coordinate the provision of training, information and technical assistance in the
SEC. 8. ENFORCEMENT AND MONITORING. - The Labor Inspectorate of the DOLE Regional Offices shall be responsible for the enforcement and monitoring of the provisions of this Circular.

SEC. 9. EFFECT ON EXISTING ISSUANCES AND AGREEMENTS. – This issuance shall serve as policy and procedural guidelines for the DOLE and its agencies in the administration and enforcement of applicable labor and social legislations and their implementing regulations.

Nothing herein shall be construed to authorize diminution or reduction of benefits being enjoyed by the employees at the time of issuance hereof.

SEC. 10. EFFECTIVITY. – This Circular shall take effect fifteen (15) days after its publication in a newspaper of general circulation.

Manila, Philippines, February 27, 2008.

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OFFICE EXERCISES
Hand and Wrist Exercises

Follow these hand positions one by one. Hold each for 3 seconds. Repeat 3 times.

1. **Arrow**
2. **Claw**
3. **Tabletop**
4. **Fist**
5. **In and out**
6. **Thumb to Tip**

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<th>Step</th>
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<tr>
<td>1</td>
<td>Arrow</td>
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<td>in and out</td>
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<td>thumb to tip</td>
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With your hand open and facing down, gently bend wrist from side to side, as far as possible. Hold for 3-5 seconds. Repeat 3 times.

Start by stretching your arm and hand out and slowly rotate the wrist down until you feel the stretch. Hold for 3 to 5 seconds. Next, rotate the palm up until you feel the stretch. Repeat 3 times.

Grasp your hand and hold your fingers with the other hand. Slowly bend your wrist down until you feel a stretch. Hold for 3 to 5 seconds. Relax. Repeat 3 times. Then slowly bend your wrist up until you feel the stretch. Hold and relax as above.

Sitting with your elbows on the table and palms together, slowly lower wrists to the table until you feel a stretch (your elbows will move outward a bit). Be sure to keep your palms together throughout the stretch. Hold 5 to 7 seconds. Relax. Repeat 3 times.
OFFICE EXERCISES

Neck and Shoulder Exercises

1. Raise the top of your shoulders towards your ears until you feel slight tension in your neck and shoulders. Hold this feeling of tension for 3 to 5 seconds. Then relax your shoulders downward into their normal position. Do this 2 or 3 times.

2. Sit or stand upright. Without lifting your chin, glide your head straight back. You are know you are doing this exercise right if it gives you the feeling of a double chin. Hold for 20 counts and repeat 5 to 10 times.

3. Drop your head slowly to the left, trying to touch your left ear to your left shoulder. Repeat on the right side. Slowly drop your chin to your chest, turn your head all the way to the left, then turn all the way to the right.

4. Slowly roll your shoulders backward 5 times in a circular motion. Next, roll your shoulders forwards.

5. Place your hands behind your head, and squeeze your shoulder blades together.
OFFICE EXERCISES

Back, Side and Leg Stretches

Interlace your fingers and lift your arms over your head, keeping the elbows straight. Press arms as far back as you can. To stretch your sides, slowly lean to the left and then to the right. In a similar way, bring your arms in front of your body, or behind to stretch the shoulder blades and chest.

Hold your right arm with your left hand just above the elbow. Gently push your elbow toward your left shoulder. Hold stretch for 5 seconds. Repeat with your left arm.

Grasp your shin. Lift the leg off the floor. Bend forward (curling your back), and reach your nose to your knee. Repeat with the other leg.

Hold one foot off the floor with your leg straight. Alternately flex your ankle (point your toes up) and extend (point your toes down). Repeat with the other leg.

Sit forward on the chair so that your back is not touching the chair’s back. Place feet flat on the floor. With a straight leg, lift one foot a few inches off the floor. Hold momentarily, and return your foot to the floor. Repeat with the other leg.

When standing, keep knees slightly bent. Place your hands on your lower back and gently push your hands forward while leaning back slightly.

Sit with one leg across the other. Place your arm or elbow on the outside of the crossed leg. Gently apply pressure, while looking the opposite way. Repeat with the other leg.