U.S. Department of Labor

Occupational Safety and Health Administration Marlton Area Office 2 Executive Drive Suite 120 Marlton, New Jersey 08053



July 24, 2023

Amazon.com Services, LLC – TEB3 Attn: Azhar Mohammed Operations Manager Site Leader and / or current Acting Site Leader 2651 Oldmans Creek Rd Logan Township, NJ 08085

Re: Inspection # 1646340

Dear Mr. Mohammed:

An inspection of your workplace at 2651 Oldmans Creek Rd, Logan Township, NJ, beginning on January 30, 2023, was conducted pursuant to a complaint filed with the Marlton Area Office:

• Workers are exposed to the hazard of Ergonomic and Musculoskeletal Injuries.

The investigation included (1) a review of OSHA 300, 300A, and 301 injury and illness recordkeeping forms for the years since the facility started operation until the date of the inspection, (2) private employee interviews, (3) management interviews, (4) review of your company's overall ergonomic hazard control efforts, (5) review of employee first aid logs and treatment logs, (6) analysis of work performed in outbound process paths, video of employees performing tasks in several inbound and outbound process paths, and analysis of ergonomic risk factors using the revised NIOSH lift equation¹.

Findings

Based on the review of the injury and illness information, interviews with employees, and ergonomic risk assessments, employees are exposed to a high risk of serious musculoskeletal disorders when routinely working in the following process paths as presented in the table below.

PROCESS PATH	NIOSH Maximum	NIOSH	Employees	Lower Back MSD
	Lifting Index (LI)	Composite Lifting	Assessed (N)	Injuries (N)
	Measured	Index (CLI)		
OUTBOUND SORT	3,58	2.30	4	8

Applications Manual for the Revised NIOSH Lifting Equation, https://www.dir.ca.gov/dosh/dosh publications/mmh.pdf

The NIOSH Lift Index provides a risk score from measurements of the weight of the items lifted, the distance the item is from the body and from the floor during the lift, the twist of the torso, the security of the grip on the item, the duration of the lifting, and the frequency of the lifts. A score greater than 1 has been shown to predict the risk of low back injury among workers.

During the Sort task, employees are required to scan and lift packages weighing up to 50 lbs, from conveyor belts to Cages and Go-Carts. Loading carts and cages requires manually lifting packages from the conveyor belt and transferring the package to the cage or cart, loading the cage or cart from the bottom to the top of the cage. These movements done during the outbound sorting task require low and high reaches to fill the carts and cages, hazardous shoulder/trunk postures, and awkward hand positions due to holding the scanner while lifting packages, placing employees at risk for MSDs including low back injuries.

This hazard alert letter identifies jobs with a high level of ergonomic risk that are in addition to the process paths OSHA has recently listed in the 5(a)(1) violation. While some ergonomic risk factors can be reduced or eliminated by implementing a single means of abatement, in most cases a process will provide the most effective method of addressing the risk factors. Amazon recognizes feasible mitigation strategies, including but not limited to, those outlined in the NIOSH guidance on Elements of Ergonomics Programs, as evidenced by inclusion of those and many other methods in the Amazon document North American WHS Ergonomics Procedure North America, Published: March 20th, 2020, Effective: March 20th, 2020. Elements of an effective ergonomics program include, but are not limited to the following:

- 1. Worksite analysis to recognize and identify existing manual handling hazards in the workplace and develop an effective ergonomics program. Conduct an ergonomic assessment by a certified professional ergonomist, or other qualified professional. An analysis should include an assessment with validated methods [i.e., NIOSH lifting equation, the lumbar motion monitor, ACGIH TLV for Hand Activity and Upper Limb Localize Fatigue or other validated ergonomic risk assessment methods for manual handling tasks. and employee participation (e.g., surveys, interviews)]. Periodic ergonomic surveys of employees and risk assessment of process paths in the workplace should be conducted at appropriate intervals or when changes to the work may change the ergonomic risk, to evaluate effectiveness of controls,
- 2. Training and education for exposed employees, including methods to evaluate the effectiveness of the training. Re-training should be done annually, or as operations change. Training should be done in a manner understandable by all employees (in a language that they speak) and address hazards associated with the work they perform, early recognition of musculoskeletal injuries and illnesses, the ergonomic risk factors associated with their job(s), and how to prevent MSDs. The training should include the elements of the ergonomics program and the affected employee's role in the program. Training should also be provided to operations area managers and process assistants as well as First Aid staff. The supervisors' training program should allow recognition of ergonomic risk factors, early signs of MSDs, and how to respond when risk factors are observed or when symptoms are reported. The training program should include the establishment's health care providers to ensure they are able to recognize symptoms of MSDs and are familiar with appropriate protocols for treatment of MSDs. Educational material or training on ergonomics should be provided to people responsible for designing jobs and buying equipment, tools, workstations, and parts,

- 3. Hazard prevention and control that includes the identification of paths with ergonomic risk factors and engineering, administrative, and work practice controls to materially reduce the hazard.
 - a. Engineering controls are designed by a certified professional ergonomist or other qualified professional and may include workstation redesign, tool and handle redesign, and use of mechanical lifting aids. The goal should be to make the job fit the person.
 - b. Administrative controls are implemented which reduce the duration, frequency, and severity of exposure to ergonomic risk factors. These controls may include job rotations that reduce ergonomic risk, reduction of repetitions, multiple person lifts, and maintenance of related equipment.
 - c. Work practice controls are implemented which include work techniques, new employee conditioning, and reduction of weight lifted.
 The following engineering, administrative and work practice controls are feasible and will materially reduce the hazard at this workplace:

Task/Process path: Sort

- Provide adjustable height workstations
- Provide carts with adjustable height platforms
- Design station to allow for sliding of items from the cart to the workstation
- Heavy packages should be moved using a vacuum lift or intelligent lift assist system
- Replace the handheld scanner with a wearable scanner on the finger or hand or use wrap around or machine vision bar code scanners
- Attach color-coded stickers to parcels to inform workers of their weight. This can also be done with an automated system.
- 4. Medical management Medical management includes protocols for treating musculoskeletal disorders (MSDs) that are developed and reviewed by a healthcare professional who is experienced and licensed in the diagnosis and treatment of MSDs. The protocols should address early recognition, evaluation, and referral of MSD cases. Healthcare personnel who treat employees with MSD symptoms must be practicing within the scope of their license and they must be trained to follow the MSD protocols. Systematic reviews of incident trends and worksite reviews for ergonomic risk and root cause analysis should be reported to operations management. The medical staff and managers should eliminate policies that discourage employees from reporting injuries and symptoms,
- 5. Program evaluation The elements of the ergonomics program; management leadership, employee participation, training, hazard identification and control, and medical management should be evaluated periodically (at least annually) to compare the ergonomics program policies and goals to the practices at the site.
- 6. Personnel responsible for OSHA recordkeeping must be trained in the requirements of OSHA recordkeeping. The entries on the OSHA 300 and 301 forms should be periodically verified by a knowledgeable person.

To evaluate your efforts in reducing these hazards, please send me a letter detailing the actions you have taken, or plan to institute, to address our concerns within 90 days of the date of this

correspondence. We will review your response and determine if a follow up is needed to further evaluate your workplace, including any recommended/implemented controls.

Under OSHA's current investigation procedures, we may visit your work site within six months to examine the conditions noted above. Enclosed is a list of available resources that may be of assistance to you in preventing work-related injuries and illnesses in your workplace.

Thank you in advance for your attention to these concerns. Working together, we can move closer to achieving the goal of workplaces free of preventable hazards. If you have any questions, please feel free to contact the Area Office at 895-596-5200.

Sincerely,

Paula Roderick-Dixon

Area Director

cc: Amazon Corporate Headquarters, 410 Terry Ave. N, Seattle, WA 98109

RESOURCES

OSHA 3220 Pocket guide, Worker Safety Series, Warehousing, https://www.osha.gov/sites/default/files/publications/3220 Warehouse.pdf

NIOSH Elements of Ergonomics Programs, www.cdc.gov/niosh/topics/ergonomics/ergoprimer/default.html

Applications Manual for the Revised NIOSH Lifting Equation, https://www.dir.ca.gov/dosh/dosh_publications/mmh.pdf

CAL/OSHA Ergonomics Guidelines for Manual Material Handling, https://www.dir.ca.gov/dosh/dosh/publications/mmh.pdf