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安全通訊 Safety Bulletin

Nov / Dec 2025

香港職業安全衛生協會
THE HONG KONG OCCUPATIONAL SAFETY AND HEALTH ASSOCIATION

第30屆海峽兩岸及香港、澳門地區職業安全健康學術研討會

作者: 梁偉光教授博士 香港職業安全衛生協會執行委會員委員

今年第30屆「海峽兩岸及香港、澳門地區職業安全健康學術研討會」在中國雲南省昆明市舉行。昆明市全年氣候溫暖宜人、四季如春，享有「夏無酷暑、冬無嚴寒」的「春城」美寓。本屆研討會由「中國職業安全健康協會」主辦，大會主題為：「**堅持融合創新驅動發展，共創職業安健的美好未來 - 區域職安健協同發展新路徑**」。

開幕禮儀式及合照

我們香港職業安全衛生協會一行12人組團參與今年的研討會，並由主要代表參加週年大會。大會原本有200多人報名參加，但因為颱風影響導致航班取消和延誤，有40多位人士未能出席，最終仍有170多位人士參加今本次研討會。

研討會場地及與會者

目 錄 CONTENTS

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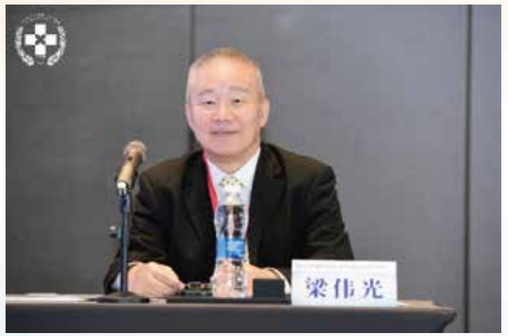
大會上，除了我們的會長鄒鼎興先生在嘉賓致辭中發言，前會長甘耀權先生亦發表了精彩演講，題目為：**「古老的十神命學體系能否協助職安工作者重新審視職安的管理」**。另外，兩位前會長楊中源先生和梁偉光教授博士獲邀擔任分場演講的主持人。演講嘉賓及專家來自國內、台灣、香港和澳門，共有37位講者分別分享其專業領域的心得或學術研究成果，論壇於9月26日中午圓滿結束。

會長鄒鼎興先生

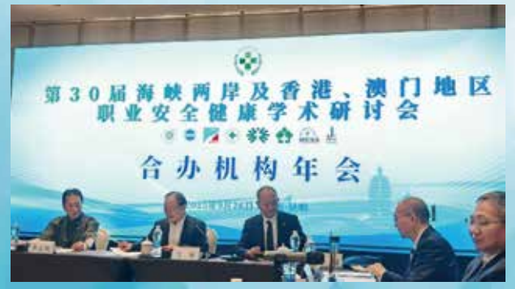
前會長甘耀權先生



前會長梁偉光教授博士

前會長楊中源先生

9月26日早上，主辦機構同時間舉行了「海峽兩岸及香港、澳門地區職業安全健康學術研討會」的合辦機構週年大會，由我們三位主要代表 - 會長鄒鼎興先生、前會長楊中源先生和梁偉光教授博士出席。議程包括：報告去年在哈爾濱舉行會議的情況並進行檢討，今年會議的籌備工作和結果，以及確認明年的主辦機構和地點等事項。會議確定，明年2026年第31屆「海峽兩岸及香港、澳門地區職業安全健康學術研討會」將由澳門勞工事務局和澳門建築安全協會主辦，並於10月下旬在澳門舉行，請大家密切留意稍後公佈的詳情，切勿錯過！



週年大會與會者

中國職業安全健康協會將主辦權移交給下屆澳門的主辦單位

Optimising Workplace Health: Strategies in Ergonomics and Well-being

Author: Dr Justine Chim, Certified Professional Ergonomist and Registered Safety Officer

Author's Profile:
Dr Chim is the Director and Principal Consultant of Chim's Ergonomics and Safety Limited, bringing over 15 years of consultancy experience to approximately 150 local and global corporations across eight countries. She is Asia's first and only internationally Certified Professional Ergonomist (CPE) under the Australian certification system and a Registered Safety Officer (RSO). Passionate about workplace health and safety, occupational ergonomics and employee well-being, Dr Chim has been appointed as an advisor (Ergonomics) for the International WELL Building Institute, collaborating with global experts.

What is Ergonomics and Employee Well-being?

Ergonomics is a human-centred discipline that focuses on optimising the interaction between humans and other components within a system. This approach is crucial in creating a workplace that minimises discomfort, reduces costs, enhances productivity, and improves overall human well-being. Practising ergonomists consider a range of factors, including physical, cognitive, social, organisational, and environmental elements.

According to BS 45002-1:2018, "well-being" encompasses a positive state of physical, psychological, and social well-being. Occupational Safety and Health (OSH) is a foundation to this framework in workplace setting, ensuring employees are safe, healthy, satisfied, and engaged in their work (BSI., 2018).

Employee well-being encompasses three key dimensions: physical, psychological, and social.

- Physical well-being involves addressing work-related musculoskeletal issues and general health factors, including energy levels, fatigue, sleep quality, and the management of pain or discomfort.
- Psychological well-being focuses on emotional health, stress management, and self-actualisation, which collectively foster a positive mental state that enhances productivity.
- Social well-being emphasises the importance of strong interpersonal relationships among colleagues, supported by inclusive workplace practices and robust support networks that create a collaborative and supportive environment (Chim, 2024).

Three key applications of ergonomics in OSH management include manual handling, Display Screen Equipment (DSE)/office ergonomics, and workplace environment/design as required by local OSH legislation in Hong Kong.

(1) Manual handling governed by OSH Regulation (Cap 509A) Part VII, covers activities such as lifting, lowering, pushing, pulling, and carrying loads, emphasising the need for proper techniques to prevent injuries (Labour Department, 2010).

(2) DSE/office ergonomics mandates compliance with the OSH (Display Screen Equipment) Regulation, effective since July 4, 2003, to protect the health of individuals who use computer equipment for extended periods (Labour Department, 2003).

(3) The workplace environment/design requirement under the OSH Ordinance (Cap 509) compels employers to provide and maintain a safe, health-conscious workplace, ensuring environments are structured to minimise risks (Labour Department, 2023).

Why Are Occupational Ergonomics Vital for Employee Well-Being?

Manual handling is a significant concern in workplace safety, particularly in Hong Kong, where it ranks as the second-highest accident category among all workplaces from 2015 to 2024. OSH Statistics published by the Labour Department in 2024 indicate that injuries sustained while lifting or carrying contribute to 17% of occupational injuries, translating to 4,942 reported cases in 2024 alone. High-risk industries include Human Health Services, which accounts for 25% of these injuries, followed closely by Wholesale (25%), Social Work Services (23%) and Construction (18%). This prevalence highlights the importance of implementing effective ergonomics practices to prevent manual handling injuries and foster a safer working environment (Labour Department, 2024).

The impact of ergonomics is particularly evident among office and homeworkers, where about 95% of office workers reported spending over six hours on computing tasks. Alarmingly, approximately 75% of these workers have experienced musculoskeletal symptoms since 2015, with common discomfort reported in the neck, lower back, and shoulders. A recent study revealed that 83% of homeworkers also engaged in prolonged computer use, with 63% suffering from similar symptoms. Among those affected, 18% of office workers and 26% of homeworkers sought medical consultations for their discomfort. This persistent issue highlights the importance of addressing musculoskeletal health in both traditional office settings and remote work environments (Chim, 2025).

How to Apply Occupational Ergonomics in the Workplace?

To effectively implement occupational ergonomics in the workplace:

- **Manual Handling Operations:** follow the OSH Regulation (Cap 509A) Part VII requirements, including conducting thorough risk assessments, maintaining records, and implementing preventive and protective measures to minimise risks. Organisations should appoint competent individuals to oversee these operations and provide training to employees when allocating new tasks or introducing new technologies.

- **DSE/Office Ergonomics:** follow the OSH (Display Screen Equipment) Regulation requirements, to protect employees who use display screen equipment for extended periods. Dr Justine Chim developed the **FITS model** as a brief illustration as follows:

  - ✎ **F: Furniture evaluation and selection,** focusing on ergonomic task review, and fitting evaluation and trial, ensuring the furniture is suitable to promote proper working posture.
  - ✎ **I: Individual workstation assessments,** customising the setup for each user, ensuring optimal chair height, monitor placement, and keyboard and mouse positioning.
  - ✎ **T: Training and education,** empowering employees by teaching them the principles of office ergonomics and their practical applications.
  - ✎ **S: Stretching exercises,** encouraging regular breaks help alleviate muscle tension and reduce eye strain.

Substantial Benefits of the FITS model: it minimises the risk of injuries associated with musculoskeletal disorders for computer users, enhances overall health and wellness in the workplace, and boosts productivity by ensuring a better fit between employees and their tasks, leading to increased comfort and performance (Chim, 2014).

- **Ergonomic Workplace Design** focuses on enhancing work performance, reducing physical strain, ensuring safety compliance, and promoting employee wellness. Organisations can create a healthier, more productive work environment that supports both employee welfare and operational efficiency (Chim, 2018; Labour Department, 2010).

  Workplace design plays a crucial role in promoting employee health and well-being. Studies emphasise that thermal comfort is a key determinant of occupant satisfaction, overshadowing factors like acoustics and lighting. However, individual comfort levels can vary significantly within shared environments. Additionally, door ventilation can contribute to conditions such as Sick Building Syndrome, which can lead to symptoms including headaches and exhaustion. Lighting also poses challenges, as glare on computer screens can lead to eye discomfort. Noise in open-plan offices is a major complaint, reported ten times more frequently than in private offices, which can have a detrimental impact on employees' physical and psychological health (Chim, 2024).

With the rise of remote work, ergonomics has become even more vital for employee well-being. Research shows that satisfaction with home workstations has a positive correlation with physical well-being, though it does not significantly impact psychological well-being. Conversely, overall environmental comfort at home has a positive impact on both dimensions of well-being. Organisations should implement work-from-home policies that include ergonomics programs guided by professionals. This entails providing ergonomic furniture, establishing workstation setup guidelines, and offering environmental comfort checklists (Chim, 2024).

Who is Involved in the Application of Healthy Workplace Ergonomics?

The application of healthy workplace ergonomics involves multiple stakeholders, each playing a critical role in promoting a safer and more efficient work environment:

- **Employees** are encouraged to actively participate by self-assessing their ergonomic needs and providing feedback.
- **Management and human resources** are vital for providing leadership support, allocating resources, developing policies, and facilitating employee training, as well as managing reporting channels for musculoskeletal disorders.
- **Ergonomists** offer expertise in risk assessment, consultation, design, evaluation, and education to raise awareness about ergonomic practices.
- **OSH professionals** collaborate to integrate ergonomic strategies into the broader OSH management system, ensuring comprehensive risk management.
- **Facilities management** focuses on workspace design, maintenance, and implementing environmental controls that enhance comfort and safety.

Together, these stakeholders develop a holistic approach to workplace ergonomics that promotes employee well-being and productivity.

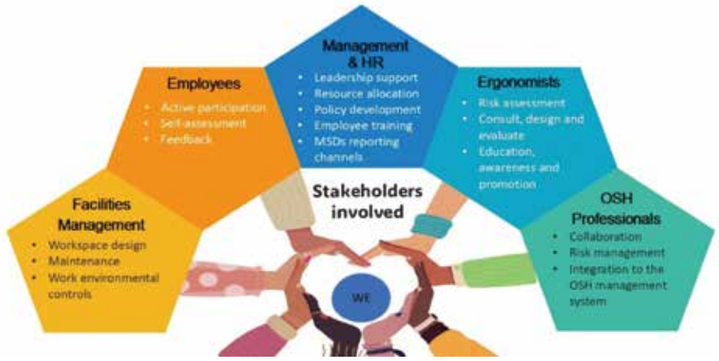


Figure 1: Stakeholders involved in the application of healthy workplace environments

Conclusion

Adhering to legislative requirements and conducting thorough ergonomics hazard management is essential for fostering a safe and healthy workplace. The integration of ergonomics not only aligns with OSH standards but also significantly enhances employee well-being, productivity, and overall job satisfaction. It is crucial to embed these strategies into the OSH management system to create an environment that prioritises comfort and safety. By prioritising ergonomics, organisations can effectively mitigate risks associated with musculoskeletal disorders and promote workplace safety and health, ensuring a healthier workforce that thrives in a supportive environment.

President Mr. Edward Chow presented the certificate of appreciation to Dr Justine Chim

Dr Justine Chim delivered a presentation at a safety seminar

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輪班工作、時間類型與香港護士睡眠問題的關聯研究

作者: 李蓓茜 博士，馬婉婷 碩士，謝立亞 博士*

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睡眠問題已成為普遍的公共衛生挑戰，尤其對需要輪班工作的護士群體影響顯著。輪班工作，特別是夜班安排，會嚴重干擾人體生理時鐘，導致睡眠不足與質量下降，並增加焦慮與抑鬱等心理健康風險。然而，個體對輪班工作的耐受性存在差異，其中個人的時間類型被認為是關鍵因素。時間類型通常分為清晨型、中間型與夜晚型，不同類型的人其睡眠覺醒周期存在固有差異。有證據表明，與清晨型護士相比，夜晚型護士在執行夜班後可能獲得較長的睡眠時長，這提示時間類型或能調節輪班工作對睡眠的影響，但相關實證研究在香港護士群體中仍顯不足。

為此，香港中文大學公共衛生研究團隊開展一項研究，利用「HK Night」前瞻性隊列調查的基線數據，評估輪班工作暴露與時間類型對本地護士睡眠質量及失眠症狀的影響，並探討心理健康在其中的中介角色。研究重點關注每月夜班頻次、輪班起止時間等具體工作特徵，以期為優化排班制度提供實證依據。

研究於2022年3月至2023年2月展開，共招募926名參與者，包括718名輪班護士及208名日間辦公室職員。護士參與者需提供為期一個月的詳細排班表，用以精確計算每月夜班頻次等暴露指標。所有參與者完成線上問卷，收集其社會人口學特徵、健康行為、時間類型，並使用匹茲堡睡眠質量指數量表（PSQI）評估睡眠質量，失眠嚴重指數量表（ISI）評估失眠症狀，以及醫院焦慮與抑鬱量表篩查心理健康狀況。

結果顯示，與日間辦公室職員相比，夜班護士出現睡眠質量不佳的風險高出約3.4倍，出現失眠症狀的風險則高出約1.7倍。此外，與清晨型工作者相比，夜晚型工作者出現睡眠質量不佳的風險為其1.7倍。在輪班護士中，隨著過去一個月夜班次數的增加，睡眠質量不佳的風險也呈現顯著上升趨勢。同時，中班的開始時間亦與護士睡眠質量不佳呈現非線性相關。在機制探討方面，中介分析發現，不良心理健康是輪班工作睡眠問題之間的重要中介因子。具體而言，對於失眠症狀，抑鬱中介了超過70%的風險，焦慮中介了約50%的風險，顯示心理因素在失眠的形成中扮演了核心角色。

總結而言，研究顯示夜班工作、夜晚型時間類型及高夜班頻次均是護士睡眠問題的重要風險因素，且這些關聯在一定程度上通過不良心理健康所中介。這些發現為緩解護士群體的睡眠問題提供了明確方向，建議醫療機構在管理實踐中，除了審視和優化輪班制度，特別是夜班頻次與午班安排外，更應將針對性的心理健康支持作為核心干預策略，透過建立常態化的心理篩查與支援體系，更有效保障護士的睡眠健康與職業福祉。此研究策略亦可為其他高壓力職業群體的健康管理提供參考。

*時間類型：是近幾十年來基於人體基本休息-活動周期存在而提出的概念，其具體表現為個體在24小時內傾向於在特定時段睡眠與活動的行為規律。該周期具有可觀測的特徵，即在睡眠開始前後會出現活動量與身體姿態的顯著減少。時間類型通常分為三類：清晨型、中間型和夜晚型。

本項目由香港醫療衛生研究基金（HMRF）（Ref. No.18190471）和香港 General Research Fund（GRF）（Ref.: 14609923）資助完成。

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主要風險對比圖

風險等級	影響因素	風險群體	睡眠質量差風險倍數	失眠風險倍數
極高風險	夜班頻次	每月 ≥ 7次夜班	5.2倍	2.7倍
高風險	工作班次	夜班護士	3.4倍	1.7倍
中度風險	生理時鐘	夜晚型護士	1.7倍	—

夜班頻次（≥7次/月）
睡眠質量差: （5.2倍）
失眠風險: （2.7倍）

工作班次（夜班護士）
睡眠質量差: （3.4倍）
失眠風險: （1.7倍）

生理時鐘（夜晚型）
睡眠質量差: （1.7倍）
失眠風險: （無顯著差異）

主要發現

影響因素	誰的風險更高	睡眠質量差的風險倍數	失眠的風險倍數
工作班次	夜班護士 對比 日間辦公室職員	3.4倍	1.7倍
生理時鐘類型	夜晚型 對比 清晨型	1.7倍	無顯著差異
夜班頻次	≥ 7次/月 對比 無夜班	5.2倍	2.7倍
午班開始時間	12點前開始 對比 正午開始	風險降低86%	風險降低89%

HKOSHA NEWS

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As of end Dec 2025, there are 438 members in HKOSHA.

The following membership application was approved in Dec 2025

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