

## **Ergonomic Expectations as We Transition from Remote to Hybrid Office Work**

### Keynote Sessions

#### Faculty:

Kermit G Davis

For many workers worldwide, remote work continues to be utilised, whether full-time or hybrid. Remote work has many unique exposures relating to the failure to adequately provide an ergonomic work environment, virtual meeting requirements, and work-family balance. Most workstations in the home are makeshift, so workers need special accommodations to accommodate a laptop, limited auxiliary equipment, and poor seating. Working remotely has been recognised for multiple employee benefits. As many companies transition into a hybrid model (e.g., work a few days at work and remotely), workers must be accommodated in two workstations. Oftentimes, companies have invested in high-quality chairs and tables, monitors, even dual monitors, and input devices. Less investment has been given to the remote office, potentially causing adverse outcomes. Many factors continue to complicate the hybrid office model, including virtual meetings, poor workstation set-up, productivity concerns, and well-being. Postural mobility during the workday may be the most important intervention to offset the negative impact of continual virtual meetings, intense computer work, and mental stress. Future hybrid work schedules must balance productivity demands, physical demands, mental stress, burnout, and work-family balance to keep workers healthy and engaged with the company.

#### **About Our Speaker:**

Kermit G Davis

Dr Kermit Davis is a Professor at the University of Cincinnati, where he is the graduate programme director of the Environmental and Occupational Hygiene and Occupational Safety and Ergonomics programmes at the University of Cincinnati. Dr Davis is a past-President of the Human Factors and Ergonomics Society (HFES) and a Fellow of HFES (2013) and the American Industrial Hygiene Association (2019). His research has concentrated on reducing the ergonomic stressors of healthcare workers and patients in healthcare settings (e.g., hospitals, long-term care facilities, and home healthcare). In the last 3 years, his research has focused on virtual offices in the United States and the United Kingdom.