

MOVE IT RIGHT

ERGONOMICS AT WORK

Protect your back, shoulders & body.



ERGONOMICS

LIFT • PUSH • PULL
REACH • CARRY • POSITION

Fabiano Brothers
ESTABLISHED 1885

READY, SET, MOVE!

Starts after 9/2/26

Good ergonomics means setting up the task so your body can work in a strong, controlled position. Small changes in how you lift, push, pull, reach, sit, and carry can make everyday movement easier and safer.

THE CHALLENGE

For 25 days out of the next 30 days, complete at least one Move It Right action. Choose a habit that helps you plan the task, position your body, use the right equipment, or move with better control. One intentional action counts for the day.

AT WORK OR ON THE ROAD

- Plan the move before lifting, carrying, pushing, or pulling.
- Get close to the load and set your feet before lifting.
- Keep the load close and move your feet instead of twisting.
- Use a cart, dolly, hand truck, or other equipment when available.
- Ask for help with a heavy or awkward load.

AT HOME OR ANYWHERE

- Use good body position when carrying groceries, laundry, boxes, or supplies.
- Break a heavy or awkward load into smaller trips.
- Push rather than pull when practical and you can stay in control.
- Set frequently used items within easy reach.
- Take a brief stretch or posture reset after staying in one position.

WHY THIS MATTERS

Ergonomics is about matching the task to the person. Plan the move, use a strong body position, use the right tool, and ask for help when needed.

ONE SMART MOVE COUNTS EACH DAY

PLAN IT

POSITION IT

MOVE IT

USE EQUIPMENT

ASK FOR HELP

CHALLENGE AT A GLANCE

25 DAYS

Complete the challenge
on 25 of 30 days.

150 MINUTES

Optional exercise
in addition to the challenge.

SUBMIT

Send to HR
within 5 days of completion.

HIP REWARDS

\$10 HIP Challenge
\$10 HIP Exercise

Employees can complete one challenge every 30 days.

Questions? Email hr4u@fabianobrothers.com or use Paycom's Ask Here.

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MOVE SMARTER AT WORK

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Mark each day you complete one Move It Right action. Submit to HR within five days of completion.

Use the large boxes below to make your marks easy to see and easy to write.

MONTHLY PLANNER

MONTH: _____

SUN	MON	TUE	WED	THU	FRI	SAT

Number of DAYS you completed the challenge



Number of MINUTES you exercised



EMPLOYEE COMPLETION

PRINTED NAME: _____

SIGNATURE: _____ DATE: _____