Program/Service Information Report



Health and Safety Update

2017

TO: Board of Health

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Medical Officer of Health and CEO

Key Points

- Continuous improvement of the health and safety program was a large focus for 2017 which
 included analyzing a comprehensive review of the program and developing and initiating an
 action plan for the health and safety program.
- Ongoing commitment to managing and eliminating health and safety risks was continued through maintaining existing programs such as: the Joint Health & Safety Committee (JHSC); workplace inspections; JHSC meetings; accident/incident reporting and investigation; training and awareness; and ergonomics.

Strategic Directions & Goals

Organizational Capacity - We will improve our capacity to effectively deliver public health programs and services.

- We will promote and support the psychological health of staff.
- We will support a work culture of continuous learning.
- We will implement processes for continuous quality improvement (CQI).

Operational Plan Objectives

Wellington-Dufferin-Guelph Public Health (WDGPH) is committed to protecting the health and safety of all its employees. In fulfilling this commitment, WDGPH will provide and maintain a safe and healthy work environment, which strives to exceed the legislated requirements and utilize best practices. WDGPH recognizes that excellence in health and safety can only be achieved through the active participation of everyone in the organization. To support this commitment, educating employees on their duties and responsibilities relating to health and safety is a priority. This is operationalized by implementing a proactive health and safety management system including the following areas:

- Health and Safety Commitment and Continuous Improvement;
- Health and Safety Duties and Responsibilities;
- Joint Health and Safety Committee (JHSC);

- Hazard identification and communication:
- Accident/Incident/Illness and Investigation;
- Safe Work practices;
- Office Safety and General Health and Safety Rules;
- Workplace Violence Prevention;
- · Training and Awareness; and
- Emergency Response.

Summary of Program Requirements

Program: Health and Safety

Goals:

- Protect the health and safety of all WDGPH employees;
- Provide and maintain a safe and healthy work environment;
- Meet or exceed health and safety legislation requirements;
- · Utilize health and safety best practices;
- Promote the active participation in the health and safety program of everyone in the organization; and
- Educate employees on the health and safety programs.

Strategy:

 By maintaining a proactive health and a safety system through a continuous improvement model of plan-do-check-act, WDPGH ensures that the health and safety of all WDGPH employees is protected.

Requirements:

- Maintain or exceed compliance with health and safety legislation requirements
- Strive to achieve health and safety best practices.

Success Indicators:

- Workplace inspections % completed relative to requirements each year.
- Hazard identification- % of identified hazards corrected each year.
- JHSC meetings % held relative to requirements each year.
- Accident/incidents % reduction in number and severity year to year.
- Training and awareness % of staff trained relative to requirements each year.
- Legislative compliance monitoring the above to ensure compliance with existing and new legislation.

Performance variance or discrepancy identified:

 A comprehensive review/revision continues of all the existing Health and Safety Policies, Procedures, Forms and Guidelines/Manuals and the creation of new Policies, Procedures, Forms and Guidelines/Manuals where gaps exist in the health and safety program.

Highlights

BACKGROUND:

This Report provides an update on key Health & Safety activities that occurred in 2017 as part of the ongoing process of a proactive health & safety program and to demonstrate its commitment to employee health, safety and wellness.

2017 Accomplishments

Continuous Improvement

At the end of 2016/beginning of 2017, a comprehensive audit of the health and safety program was conducted by a qualified external provider to establish a foundational baseline for the Health and Safety program and also to identify strengths and opportunities for improvement moving forward.

A large focus for 2017 was analyzing the audit and implementing an action plan to continually improve the health and safety program over the coming years.

The main focus for the second half of 2017 was a comprehensive review/revision of all the existing Health and Safety Policies, Procedures, Forms and Guidelines/Manuals and the creation of new Policies, Procedures, Forms and Guidelines/Manuals where gaps exist in the health and safety program.

In total, by the end of 2017, there have been approximately 32 Policies, 22 Procedures, 10 Forms and a Health & Safety Manual that have had an initial review and first new drafts developed. To help expedite this process, a contract Health and Safety Coordinator was hired to work with the Emergency Preparedness Health and Safety Officer from September to December 2017.

In 2018, these Policies, Procedures, Forms and Guidelines/Manuals will be finalized and implementation continued to enhance the health and safety program.

Joint Health & Safety Committee (JHSC)

The JHSC is a key requirement of the *Occupational Health and Safety Act (OHSA)* and the Internal Responsibility System. There is required representation from workers and management on the committee which consists of 7 members (three management and four workers) and the Emergency Preparedness Health & Safety Officer as a resource. The JHSC continued to meet monthly to discuss health & safety matters and provide input to resolve hazards and help

prevent injuries. The JHSC is a central committee meaning that one committee represents all WDGPH locations as opposed to having individual site-based JHSCs. The JHSC continued to perform one of its key functions of monthly inspections of the workplace to identify hazards so they can be resolved to prevent accidents and injuries.

JHSC Inspections

During 2017, each WDGPH facility (six total) was inspected each month by the JHSC members. Twenty seven hazards were identified and corrected in 2017 and all were C class hazards.

The types of hazards are ranked as A, B, or C:

- **A** Hazard could cause death, permanent disability, loss of a body part, extensive loss of a structure, equipment or material.
- **B** Hazard could cause serious injury or illness that results in temporary disability, property damage that is disruptive, but less severe than A.
- **C** Hazard could cause minor injury or illness that is non-disabling, property damage that is not disruptive.

JHSC Meetings

There were 10 JHSC meetings in 2017. The meetings continued to be held/rotated through key WDGPH locations. Each meeting was chaired by the worker co-chair or the management co-chair, on a rotating basis. Minutes of the meetings were posted on the WDGPH intranet for staff to see.

Training/Awareness

The following training was completed in 2017:

- JHSC Certification (5 days) 1 employee;
- CPR 109 employees;
- Respirator Fit Testing 90 employees;
- Safety Pendant/Code White Awareness All staff required; and
- Violence/Harassment Prevention All staff required.

Ergonomics

WDGPH continues implementation of a proactive ergonomics project to help decrease sedentary behaviour and prevent musculoskeletal disorders. Approximately 65 sit/stand work stations were deployed to staff which equals approximately 28% of the WDGPH workforce.

Accident/Incident Statistics Summary

The following two definitions are provided to set the context for the statistics summary.

Accident: An undesired event that results in injury to a person and results in a Workplace Safety Insurance Board (WSIB) claim.

Incident (Near Miss): An undesired event that does not result in injury but under slightly different circumstances could have.

For comparison the total number of reported accidents/incidents for the past three years is as follows:

Year	Number	
	Incidents/Accidents	
2015	23	
2016	18	
2017	19	

The following chart provides a detailed summary of the 2017 statistics. Overall, the types of incidents/accidents consisted of slips/trips/falls; potential needle stick; strain on a body part; exposure to smells; potential TB exposure; struck against an object; cut; verbal aggression; and car accident.

Month	Incident/ Accident	Туре	Location	Details	Corrective Action
January	Incident	Aggression - Verbal	Chancellors Way	Client was verbally aggressive with reception.	 Code White initiated Managers responded to reception area defusing the situation. Code White and safety pendant policy/procedure revised. Awareness training provided to all staff on Code White and safety pendant policy/procedure.
	Incident	Potential Exposure - Clients to Expired medications	Chancellors Way	4 drawers of plastic binfilles with expired medications accessible to clients.	Bins and medications were removed from accessible area to a secured area and properly disposed of.
	Incident	Privacy	Fergus	Usage of personal cell phone to communicate with client for DOT visits.	 Staff advised not to use personal cell phones for work purposes. WDGPH cell phones ordered for DOT needs.
February	Incident	Exposure - Smells	Fergus	Employee highly sensitive to scents.	 Reinforced with office staff importance of not wearing scents. Implemented measure to reduce exposure to scents in reception area with Plexiglas barrier and fans. Continue to reinforce WDGPH is a scent free workplace through signage and Stay Well.
	Incident	Exposure - Smells	Chancellors Way	Employee highly sensitive to scents.	 Continue to reinforce WDGPH is a scent free workplace through signage and Stay Well. Advised employee they can leave area when necessary.

Month	Incident/ Accident	Туре	Location	Details	Corrective Action
March	Incident	Potential Exposure – Needle Stick	Chancellors Way	Sharps container lid did not fit properly.	 New style of sharps containers ordered with proper fitting lids. Staff advised about reporting hazards.
April	Accident	Car Accident	County Rd. 12, Wellington	Car accident - staff car hit by another car, staff not at fault.	 Safe driving awareness bulletin sent to all staff in Stay Well. Defensive driver training investigated for all staff with regular driving roles.
	Incident	Potential Exposure - TB	Chancellors Way	A staff member fixing a piece of equipment in the TB negative air clinic area concerned about potential exposure to TB.	 Proper preventive measures were being followed such as the client wearing a face mask and being seen in the negative air area. Concern resolved.
May	Incident	Struck against an object	Fergus	Grazed right side of the temple on outdoor security key pad.	Keypad relocated to a location where it does not pose a hazard.
	Incident	Strain - Hip	Client's home	Bent down and strained something in right hip while picking up toys.	Staff member made aware of proper body mechanics based on previous training provided.
June	Incident	Strain - Back	Chancellors Way	Helping a client move from a lobby chair to a chair with wheels.	Purchased a proper wheelchair for each office.
	Incident	Client	Chancellors Way	2 clients locked themselves in bathroom with large amount of harm reduction supplies.	 A Director spoke with the clients confirming they were ok. Poster placed in bathrooms indicating someone will knock on the door if closed for more than 30 minutes.
	Incident	Client - Felt Faint	Fergus	Client felt faint.	Staff assisted client until feeling better.

Month	Incident/ Accident	Туре	Location	Details	Corrective Action
July	None				
August	Accident	Cut - Finger	Chancellors Way	Cut finger on sputum induction cabinet while cleaning.	 Cut resistant protective gloves provided for cleaning booth. Investigated retrofitting the booth to remove sharp edges. Staff received Tetanus shot.
	Incident	Aggression - Verbal	Fergus	Client verbally aggressive to reception staff.	 Manager helped deescalate the situation. Safety pendant/code white training provided.
September	Incident	Aggression - Verbal	Service Provider Office	Service provider verbally aggressive during a Health Protection inspection.	 Director attended future inspections with staff. EAP session provided for staff. Mobile devices issued for field staff.
October	None				
November	Incident	Client - Driving	Community Partner	Client concerned with volunteer drivers ability to drive.	Incident was reported to Community Partner employing the driver for investigation.
	Accident	Strain - Back	Fergus	Strained lower back while helping a child pick up boots.	Staff member reminded of proper body mechanics based on previous training provided.
December	Incident	Slip, Trip, Fall - Strain to Back	Chancellors Way	Slipped on ice in parking lot and fell straining back.	 Staff wearing appropriate footwear. Facilities notified of the need for additional salt on the parking lot. Slip/trip/fall awareness bulletin sent to all staff in Stay Well.

Related Reports

None.