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### PURPOSE

- ✓ To highlight the importance of certain safety and emergency protocols within the organization
- ✓ To ensure staff are appropriately educated with their safety and well being looked after while working on the job
- ✓ To ensure patient safety and security



## THP DECLARATION OF RESPECT

*Our Commitment to One Another*

As patients, staff, medical professionals, volunteers, learners, family members and visitors we are **Better Together**. We commit to living our values of compassion, excellence and courage, creating a healthy, safe and respectful environment for healing.

Together, we developed our shared expectations of how we treat one another and commit as a community to:

- Respect others and treat them as they would want to be treated
- Listen and engage to build trust and mutual understanding
- Involve one another and work as a team
- Take accountability for our actions and the impact they have on others
- Learn from our experiences and continuously improve



## What Defines a Respectful Workplace?

A Respectful Workplace is defined as a positive, safe, healthy, respectful and healing workplace that fosters and maintains one's dignity. It also supports an individual's physical, emotional and social well-being. In a respectful workplace, employees are valued, communication is polite and courteous, and people are treated as they wish to be treated.

Studies show that people are more likely to perform to the best of their abilities when they work in an environment where respect, diversity, opportunity, and inclusion are high priorities. To behave in a respectful manner involves being aware of other people's feelings, actively listening and being respectful to their opinions even when differences occur.

Lack of respect takes many forms and could include: unprofessionalism; profound rudeness; shouting or swearing; outbursts of anger; shaming of others; disruptive behaviour, demeaning comments or intimidation; unsolicited and unwelcome conduct or comments (oral or written); and gestures or contact which is reasonably known to cause offense, physical or emotional harm to either the target of such acts or bystanders.

Disrespect must not be confused with legitimate comment, advice or direction from a manager and/or supervisor regarding workplace performance, assignment of duties and/or other legitimate workplace requirements.

## It Starts With YOU!

Whether you are working, volunteering or receiving care we all have a role in contributing to creating a culture of respect at THP. A respectful workplace is a shared responsibility and we all play a part in building a respectful work environment and addressing conflict when it arises.

It takes all of us working as individuals and as a team to engage with one another in a positive and respectful way, to express and conduct ourselves in a professional manner, even when expressing a difference of opinion, and effectively respond and resolve incidents of disrespect when they occur. Everyone is responsible for fostering an open, honest and respectful environment.



## How can I demonstrate respect at THP?

Everyone has a role to play in contributing to a respectful workplace. You can demonstrate respect by:

- Modeling the THP Declaration of Respect
- Using AIDET
- Trying to understand the other person's point of view
- Actively listening to the opinions of others, even if they are different from your own
- Identifying your own feelings before sharing your concerns with another person
- Refraining from blaming, threatening, or name-calling even if you are angry or hurt
- Being mindful of your behaviour and the impact it has on the other person

## What Should I Do If I Experience Disrespectful Behaviour?

The following steps outline the actions to take when confronted with disrespectful behaviour:

### Step 1: Ask the person to stop their behaviour.

If you feel someone is behaving in a disrespectful manner, it is important that you tell them how it makes you feel, and request that they stop the behaviour. You could use the following script to support you in this discussion.

*"Name, do you have a few minutes to meet with me. I wanted to discuss with you some behaviours that I have been observing and how it impacts me. When you say or do ....., I find it disrespectful. I would appreciate in the future that you do not say or do that to me."*

Take note of the conversation for future reference.

### Step 2: Ask for assistance.



Assistance may be provided in the form of the Employee Family and Assistance Program (EFAP), getting a manager/leader involved, or simply talking to a friend. You have taken a brave step and sometimes it helps to talk it through.

If you are uncomfortable at addressing the behaviour on your own, a leader can assist you in addressing the disrespectful behaviour. You can expect that the leader would:

1. Meet with you and the person being disrespectful individually to review the behaviours of disrespect
2. Facilitate a conversation between you and the person being disrespectful
3. Review the declaration of respect and the expectations regarding respectful conduct at THP
4. Provide a written document summarizing the steps taken to resolve the disrespectful behaviour

**Our EFAP is a confidential and voluntary support service that can be reached at the Toll Free Number: 1.855.410.7628 24/7.**

### Step 3: Report the issue to your leader or Human Resources Business Partner.

If the individual continues to behave in a disrespectful manner despite being asked to stop or the severity of the behaviour warrants bypassing an informal resolution process, it's important that the incident is escalated to a leader or Human Resources Business Partner for further action.

*AIDET® will ensure that we provide excellent care to our patients, their families, and one another in a healthy and respectful environment.*

Our Service Excellence Program AIDET will help us ensure that we provide excellent care to our patients, their families, and one another in a healthy and respectful environment. AIDET is an evidence-based communication and relationship building tool that has been shown to reduce patient anxiety, improve patient outcomes and satisfaction for patients and one another. AIDET® stands for: Acknowledge, Introduce, Duration, Explanation and Thank You

## AIDET® OVERVIEW

- A ACKNOWLEDGE**  
Address the person by their name  
Make eye contact, smile & greet in a pleasant manner
- I INTRODUCE**  
Share who you are and what you do (name, role, expertise of self or team)
- D DURATION**  
Explain how long this step in the process will take
- E EXPLANATION**  
Outline in clear language what you will be doing and why, what they should expect and what the next steps are
- T THANK YOU**  
Thank the person (i.e. for their patience) and let them know that you have enjoyed working with them



# Emergency Management

## Emergency Management

Emergency Management is not just about responding to a situation and being reactive but also educating yourself and being proactive.

Eliminating the risk altogether is the goal.

The four components of the emergency preparedness program are:



## Emergency Codes

These codes can be found on the **back** of your hospital ID badge.

<b>CODE GREY - Essential Services Failure</b>
<b>CODE PURPLE - Hostage Taking</b>
<b>CODE PINK - Neonatal/Paediatric Arrest</b>
<b>CODE BLUE - Cardiac Arrest</b>
<b>CODE ORANGE - External Disaster/CBRNE</b>
<b>CODE WHITE - Violent Situation</b>
<b>CODE SILVER - Violence involving weapons</b>
<b>CODE BROWN - Hazardous Spill/Leak</b>
<b>CODE YELLOW - Missing Patient</b>
<b>CODE AMBER - Missing Infant/Child</b>
<b>CODE BLACK - Bomb Threat</b>
<b>CODE GREEN - Evacuation</b>
<b>CODE RED - Fire</b>
<b>CODE OB - Obstetrical Surgical Emergency</b>

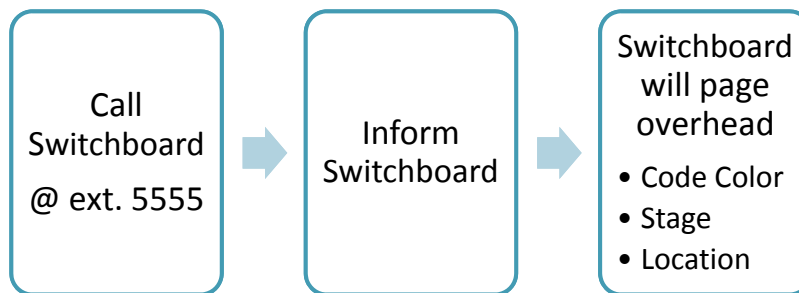
## Emergency Code Stages



The Emergency Management Program utilizes an incident level determination matrix which helps ensure that we have the appropriate level of response to a given incident.

STAGE LEVEL	REQUIRED RESOURCES	DOWN TIME	ORGANIZATIONAL IMPACT
STAGE 3 Site/Org Wide	Outside Agencies Required	Significant Impact or > 24 hrs	Hospital-wide or Site Closure
STAGE 2 Multiple Departments	Within Site + Specific Outside Vendors/Agencies Required	Site/Incident Specific > 2 hrs but < 24 hrs.	Site Impact
STAGE 1 Department	Within Department	Site/Incident Specific < 2 hrs	Minimal Impact

## How to Call a Code





## Code E-mail Alert

When a code is called, an email message describing the type and stage of the code is dispersed by Switchboard.

For Example:

**From:** Code Alert THC or Code Alert CVH  
**Sent to:** ALL USERS  
**Subject Line:** CODE RED –[LOCATION] – [STAGE]

An “All Clear” message will be sent in the same format once the Code has been resolved.



## Emergency Response Station

Emergency Response Stations are located throughout hospital site locations. In response to a code, members of the response teams will refer to the Job Action Sheet to find details of their roles and tasks for the designated code. These sheets will provide a detailed description of tasks people and / or teams are expected to perform during a Code response in a phased approach.





# Employee Responsibilities

## KNOW YOUR UNIT SPECIFIC PROCEDURES

Ensure you consult your department specific plan so that you know how to respond in the event of a Code.

## KNOW YOUR ROLE and LIMITATIONS

In the event of a Code, ensure you ONLY ACT in accordance with the training you have been provided with.

## CALL THE CODE/SEEK ASSISTANCE

Report Code situations to Switchboard at ext. 5555.

Be safe. Seek assistance from staff who have received training on how to respond to a Code situation.

# Mandatory Code of the Month Education

- Specific details on each of the codes are distributed to all staff through the **CODE OF THE MONTH** education program
- All staff are required to review the Code of the Month education and sign off with their manager
- Code of the Month education is distributed monthly by Email and also available on thpHub



**Code of the Month: CODE OB**

A CODE OB is called in response to an obstetrical emergency requiring immediate surgical intervention.

The CODE OB Emergency Response Team is made up of selected healthcare professionals who are responsible to attend an obstetrical emergency requiring caesarean section.

**CLINICAL INDICATIONS FOR CALLING A CODE OB**

- Major Antepartum / Intrapartum Hemorrhage
- Unrelenting Prolonged Fetal Heart Rate
- Deceleration lasting greater than three minutes
- Prolonged Second Stage
- Shoulder Dystocia

**WHO CAN CALL A CODE OB**

A CODE OB will be initiated by any member of Trillium Health Partners with the knowledge, skills and training to do so.

**HOW TO CALL A CODE OB**

- Call Switchboard at 5555
- Switchboard will page the CODE OB Emergency Response Team and will provide you with the code location.

**ONCE A CODE OB HAS BEEN CALLED**

- A healthcare professional remain with the patient at all times until the CODE OB Emergency Response Team arrives.
- All members of the CODE OB Emergency Response Team will report to the code location.

**WHO IS ON THE CODE OB EMERGENCY RESPONSE TEAM?**

- Obstetrician On-Call
- Surgical First Assist On-Call
- Anesthetist On-Call
- Paediatrician On-Call
- NICU Registered Nurse
- Birthing Suite CN/CL
- Birthing Suite Registered Nurse
- Respiratory Therapist
- OR Respiratory Therapist (Anesthesia Assist)
- Birthing Suite Operating Room Team
- Family Practice / Midwife (if involved)
- Security Services
- Patient Care Coordinator (after hours)
- Social Work and Spiritual Care (as needed)

**WANT MORE INFORMATION?**

To learn more about CODE OB you can consult the Emergency Management policies at:

- Emergency Preparedness Link
- Policies and Procedures
- Emergency Response Station Binder

Trillium Health Partners  
September 2016

# Additional Resources

## Code White/De-Escalation Training

Speak to your manager or Educator for more information about receiving advanced training in Code White/De-Escalation Training

## Evacuation Procedures

- See your Educator for more information on WeeVac patient evacuation procedures
- Additional videos are available on thpHUB for all staff to view (thpHub- Applications- Staff Learning- Additional Modules)



## Emergency Preparedness on thpHub

Visit the thpHub for more information on Code of the Month, All Emergency Codes, Pandemic Planning, and Infectious Disease Preparedness

# CODE RED & Fire Safety

Presented by:  
**Emergency Management**  
October 2015



## Code Red and Fire Safety

A **Code Red** is an emergency management tool, which ensures the Hospital is prepared to respond to a fire condition in the most effective and efficient way possible to save life and property .

[Click here to continue](#)

## Code Red and Fire Safety

In this module you will review the following topics:

- How to Safely **R.E.A.C.T.** to a Fire
- Elements of a **Fire Safety System**
- Elements of a **Fire Suppression System**
- General **Evacuation** Guidelines
- Procedure for calling a **Code Red**

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### How would you R.E.A.C.T.?

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Fire Safety System

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Fire Suppression

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Evacuation

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Code Red

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Quiz

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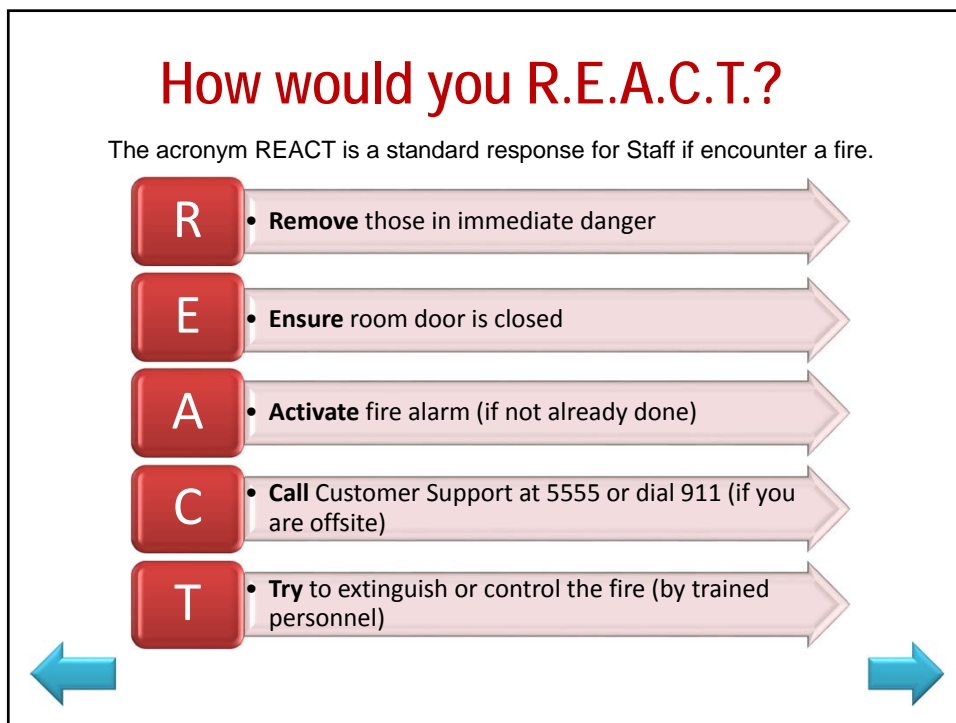
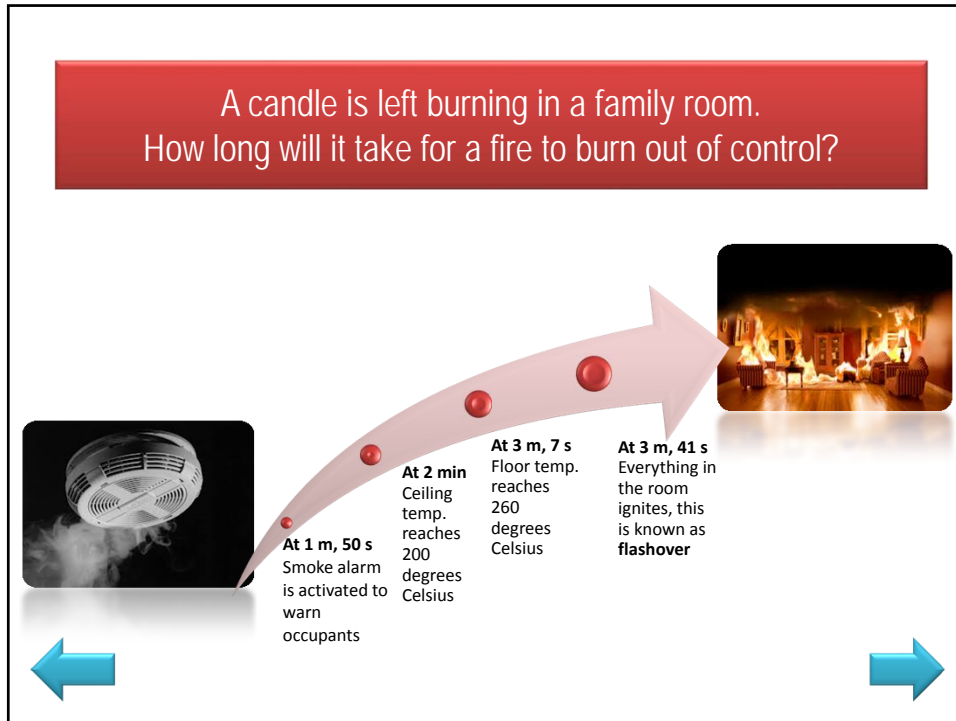


## Fire Triangle

A fire requires three elements in order to create the reaction needed to ignite.

Once a fire has started, the resulting chain reaction sustains the fire and allows it to continue until at least one of the elements is removed.







## How would you R.E.A.C.T.?

### Fire Safety System

Fire Suppression

Evacuation

Code Red

Quiz



## What is a Fire Safety System?



A fire safety system is an electronic system that detects fire conditions (smoke and/or heat).

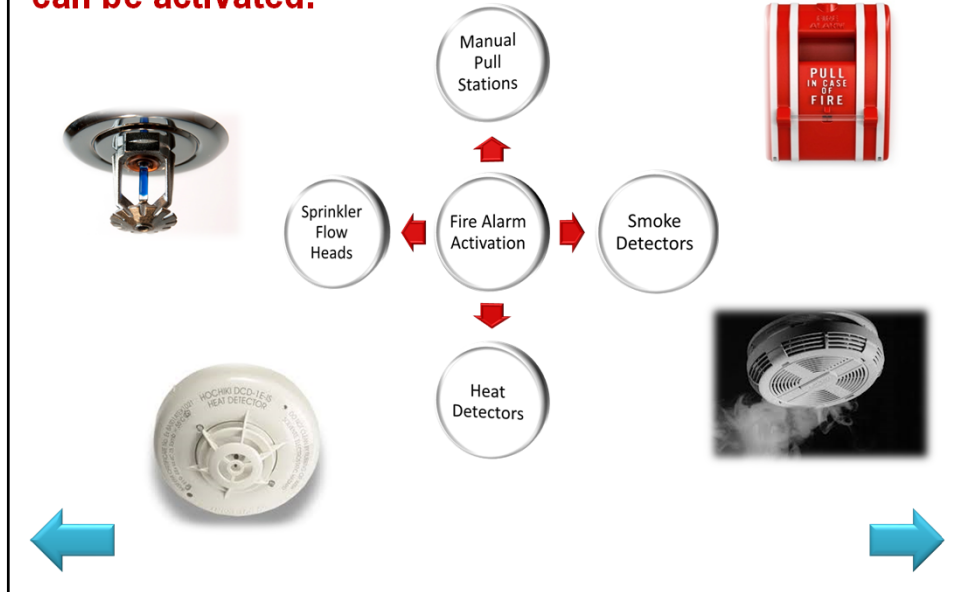
Smoke and/or heat detectors will activate the **Fire Alarm** and shut down ventilation fans, ground elevators and release mag locks.

A fire under the sprinkler will activate the **fire suppression system**.

The fire alarm system can also be activated manually by means of **Fire Pull Stations**.

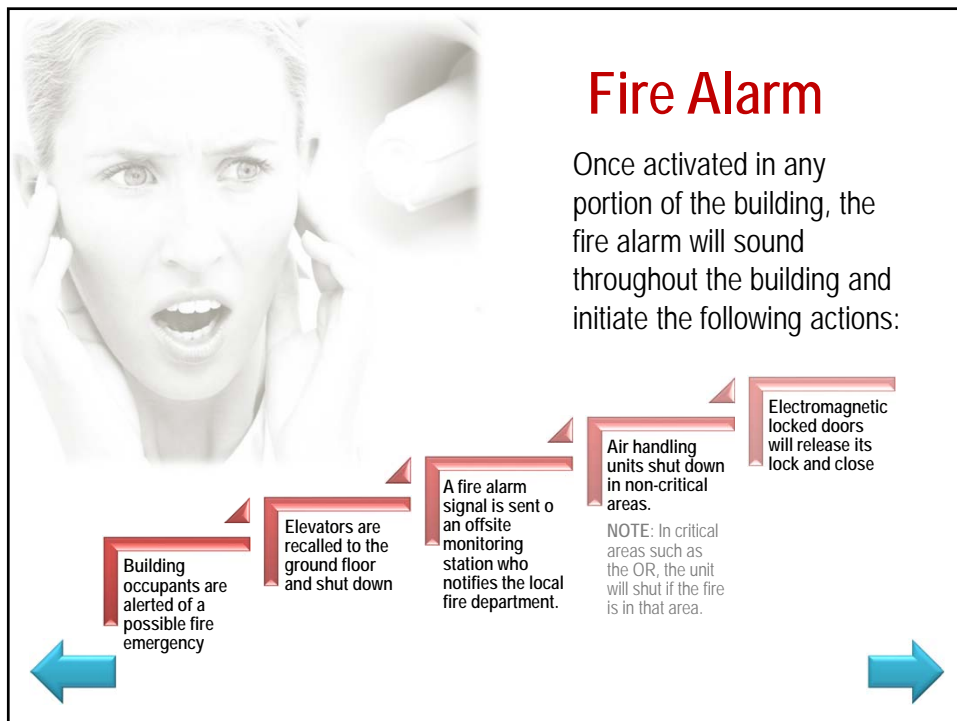


## There are 4 ways the fire safety system can be activated:





## Fire Alarm

Once activated in any portion of the building, the fire alarm will sound throughout the building and initiate the following actions:





 **How would you R.E.A.C.T.?**



 **Fire Safety System**

**Fire Suppression**

Evacuation

Code Red



Quiz



## What is a Fire Suppression System

Trillium Health Partners employs a **Wet Sprinkler System**. If the Fire Safety System detects a fire condition, it reacts by dispensing water to suppress the fire through **sprinkler heads nearest to the fire**.

We also have a chemical system located in equipment-sensitive areas (such as the MRI rooms) in order to prevent equipment damage.



## Fire Suppression Equipment

Trillium Health Partners has the following fire suppression equipment available

- Sprinkler heads **nearest to the fire** will activate

Automatic Sprinkler System



- For the use of the Fire Department.

Standpipe and Hose System



- For use of staff trained at Trillium Health Partners.

Portable Fire Extinguisher



## Using a Fire Hose



**Fire hoses** installed throughout the buildings are for the use of the Fire Department, not Trillium Staff or the general public.



## Using a Fire Extinguisher

Only Staff who have  
received training at  
Trillium Health Partners  
may use the Fire  
Extinguishers located  
throughout the building.



## Using a Fire Extinguisher



***DO NOT*** re-use a fire  
extinguisher which has  
been discharged or  
has the pin pulled out.



## Using a Fire Extinguisher



***DO NOT*** place a discharged fire extinguisher in its holder.



## Using a Fire Extinguisher

**Before** using a fire extinguisher, it is important to ensure the PIN is secure and not previously removed. It is also a good idea to check that the inspection tag is valid. Next,

**P**ull the pin

**A**im at the base of the fire

**S**queeze the handle

**S**weep back and forth



## Fire Prevention

How can we stop a fire from happening and spreading ?

### BREAK THE FIRE TRIANGLE

Be proactive and **break the Fire Triangle** (that is, never allow the three fire elements to have contact). In the event of a fire, **remove one of the elements** (for example, use water to eliminate heat, or an extinguisher to eliminate O<sub>2</sub>)

### CONTROL AND CONFINE

If the fire triangle cannot be broken then we must control and confine the fire.



## Smoke Hazard

Smoke is extremely toxic and spreads rapidly. Smoke causes people to become:

- disoriented
- impaired
- blinded
- confused

Smoke may also hinder search and rescue and firefighting efforts.



## Fire Containment

The best way to confine and control the spread of fire is to ensure that all doors are closed and all **fire separation doors** are never wedged open or obstructed.

A fire separation door is designed to resist fire for a limited period of time in order to contain and confine the spread of fire and smoke.



How would you R.E.A.C.T.?



Fire Safety System



Fire Suppression

Evacuation

Code Red

Quiz



## Hospital General Evacuation

At Trillium Health Partners, we do not evacuate a building because of a fire alarm. If an evacuation is warranted, **Code Green** is initiated and an evacuation will commence in an orderly fashion according to the procedures outlined in **Code Green**.

**DO NOT** initiate evacuation of patients, visitors, or staff unless advised that a **Code Green** has been called.



## Who do we assist?

- All patients receiving active treatment
- People with physical/mental disabilities
- People under medication influence
- People with hearing/visual disabilities
- Paediatric patients
- Older adults

*In the event of an evacuation do a headcount of all patients, family, visitors and staff. Ensure you are leaving the area through a set of fire doors to a safe zone. Close the door behind you once everyone has been evacuated.*

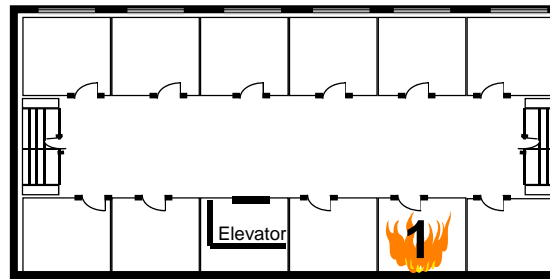




## Unit Patient Evacuation Procedures

### Evacuation of Endangered Patients

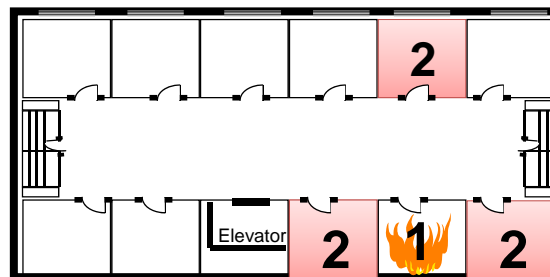
1. If it is safe to do so, first evacuate the room in which the fire originates



## Unit Patient Evacuation Procedures

### Evacuation of Endangered Patients

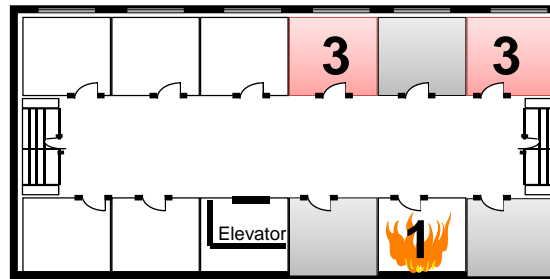
2. Next, evacuate those adjacent and opposite



## Unit Patient Evacuation Procedures

### Evacuation of Endangered Patients

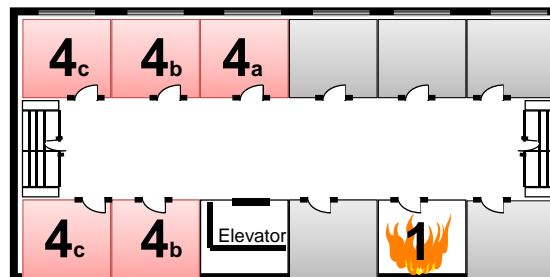
3. Continue, evacuating in order of easy accessibility





## Unit Patient Evacuation Procedures

### Evacuation of Endangered Patients

3. Continue, evacuating in order of easy accessibility



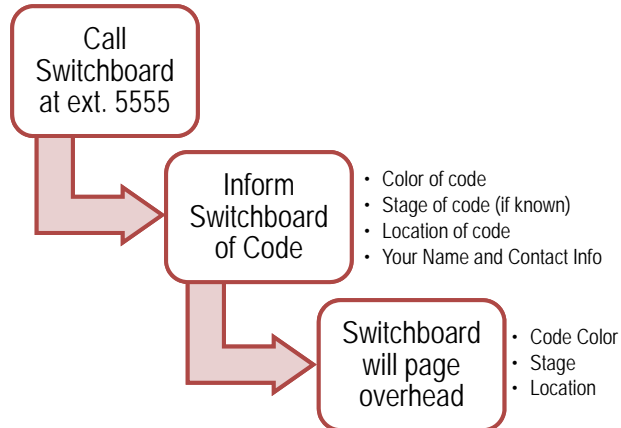


- ✓ How would you R.E.A.C.T.?
- ✓ Fire Safety System
- ✓ Fire Suppression
- ✓ Evacuation
- Code Red
- Quiz



## How to Call a Code

Follow these steps if you have to call a Code:



## Code Alert Email

When a code is called, an email message describing the type and stage of the code is dispersed by Switchboard.

For Example:

**From:** Code Alert MH & QHC or Code Alert CVH  
**Sent to:** ALL USERS  
**Subject Line:** CODE RED – [LOCATION] – [STAGE]

An "All Clear" message will be sent in the same format once the Code has been resolved.

## For More Information



For more information consult

- **Emergency Management Binder** available in all Emergency Response Stations
- Review information available on THP HUB
- Consult the Policies and Procedures in Paradigm



## Emergency Response Station

The Emergency Response Stations are located in most departments and are easily accessible to all staff. Each station consists of:



# Annual Staff WHMIS Education

Welcome to Trillium Health Partners Annual Staff WHMIS Education. This course will take you approximately 25 minutes to complete.

To begin, click on the navigational button, NEXT.



MODULE 1    MODULE 2    MODULE 3    MODULE 4

Annual Staff WHMIS Education

## About This Course

This is a mandatory education course as required by WHMIS legislation.

All employees are required to renew their WHMIS education on an annual basis. This module will provide you with information on how WHMIS works, the hazards of controlled products in the workplace, and precautions to take in order to work safely with hazardous materials in the workplace.

This course fulfills the education requirements of both WHMIS 1988 and WHMIS 2015.

**This course is comprised of four parts:**

- MODULE 1: Background
- MODULE 2: Review of WHMIS 1988
- MODULE 3: Overview WHMIS 2015
- MODULE 4: Annual Mandatory WHMIS Quiz



# Module 1: Background

At the end of this module you will be able to:

- Explain the purpose of WHMIS
- Identify the three main components of WHMIS
- Identify ways that your employer and supervisor can protect you from workplace hazards
- Describe other ways to find out about workplace hazards



## Background

Introduced in **1988**, the Workplace Hazardous Material Information System (WHMIS) is a hazard communication system for Canadian workplaces designed to address workers rights to know about hazards in the workplace and how to work safely.

The goal of system is to reduce injury and disease by communicating specific health and safety information about controlled products so that the information can be used to reduce exposure to hazardous materials.

The system focused on three key components:



Until February 2015, the Workplace Hazardous Material Information System was known as:



WHMIS 1988



## The Global Harmonization System (GHS)

The Global Harmonization System (GHS) is an **international** initiative to standardize chemical hazard classification and communication globally.

GHS has been adopted by many of Canada's trading partners, including the United States.



## Canada Introduces WHMIS 2015

On February 11, 2015, the **Government of Canada** modified the Workplace Hazardous Materials Information System (WHMIS) to incorporate the Global Harmonized System of Classification and Labeling of Chemicals (GHS) for workplace chemicals, with the **Province of Ontario** following on July 1, 2016.

The combination of standards from WHMIS 1988 combined with the standards of GHS will be known as WHMIS 2015



## Phased Implementation

Organizations have until December 2018 to fully implement WHMIS 2015 into their workplaces.

Until then, the Province requires all employees to be trained on the components of both WHMIS 1988 and WHMIS 2015.



## Module 2: WHMIS 1988 Review

At the end of this module you will be able to:

- Explain the purpose of WHMIS
- Describe the roles and responsibilities of suppliers, employers, and workers under WHMIS
- Define 'controlled' product
- Identify WHMIS 1988 hazard symbols and describe their related characteristics and precautions to take
- Identify the parts of a supplier label
- Locate WHMIS information for a controlled product on your work site

# What is WHMIS?

Introduced in **1988**, the Workplace Hazardous Material Information System (WHMIS) is a hazard communication system for Canadian workplaces designed to address workers rights to know about hazards in the workplace and how to work safely.

The goal of system is to reduce injury and disease by communicating specific health and safety information about controlled products so that the information can be used to reduce exposure to hazardous materials.

The system focused on three key components:



Until February 2015, the Workplace Hazardous Material Information System was known as:



**WHMIS 1988**

# WHMIS Roles and Responsibilities

## The Supplier

- For products sold or distributed in Canada, suppliers are required to determine if the product falls under WHMIS
- Provide a current MSDS (3 years old or less)
- Ensure the product is appropriately labeled

## The Employer

### Employers must:

- Develop and maintain an education program
- Ensure products are properly labeled, and that
- MSDS's are readily available to workers.

### Department managers are required to:

- Develop safe work procedures
- Ensure workers have been trained with respect to working with hazardous materials
- Employers are also required to review the information and training provided annually

## The Worker

- Participate in WHMIS education and training provided by the employer
- Apply the education and training to protect themselves and others in the workplace
- Use proper protective equipment when handling, storing, or transporting hazardous materials
- If there are any problems with labels or MSDS's workers must notify their supervisor.



## What WHMIS Covers

WHMIS legislation covers a specific group of products called **Controlled Products**.

### CONTROLLED PRODUCT

A controlled product is any product or ingredient that meets the criteria for one or more classes of hazards established by WHMIS.

### OTHER HAZARDOUS PRODUCT

Some products such as consumer products and explosives are regulated by other legislation.

Although these products may not be regulated by WHMIS or labelled within an MSDS, these materials may pose a hazard and therefore there is still an expectation that workers be educated and aware of any hazards associated with them.

## Other Hazardous Materials

The following are examples of other hazardous materials and the legislation which regulates them.



### Explosives

Federal Explosives Act



### Radioactive Materials

Canadian Nuclear Safety Commission & relevant Acts



### Cosmetics

Many are governed by the Food and Drug Act



### Consumer Products

Various consumer product regulations



### Food & Food Additives

Various Acts and Regulations



### Drugs & Diagnostic Chemicals

Food & Drug Act



### Pesticides

Pest Control Act



### Hazardous Wastes

Both federal and provincial legislation

## WHMIS 1988 Classification of Controlled Products

- There are 6 classes and 8 symbols used to identify WHMIS 1988 Controlled Products
- Each of these classes has a corresponding symbol, description, and set of precautions that should be observed when working with or handling a controlled product
- This information appears on both the Material Safety Data Sheets and product labels



## Class A: Compressed Gas



### Class A: Compressed Gas

- Contents are under pressure
- May explode if heated or damaged
- May puncture skin and cause fatal embolism with a sudden release of high pressure gas streams
- Examples: oxygen and nitrogen



### Precautions

- Transport and handle with care
- Secure cylinders properly
- Store away from sources of heat or fire
- Use proper regulator

## Class B: Flammable & Combustible



### Class B: Flammable & Combustible

- may burn or explode when exposed to heat, sparks, or flames
- may burn readily at room temperature
- May burn when heated
- Includes sub divisions: B1: Flammable Gas, B2: Flammable Liquids, B3: Combustible Liquids, B4: Flammable Solids, B5: Flammable Aerosols, B5: Reactive Flammable Materials
- Examples in the workplace include alcohol, acetone, and methanol.



### Precautions

- Store away from Class C (oxidizing materials)
- Store away from sources of heat, sparks, and flame
- Do not smoke near these materials

## Class C: Oxidizing Material



### Class C: Oxidizing Material

- can cause other materials to burn or explode by providing oxygen
- may burn skin and eyes on contact
- Examples of materials in this class might include bleach or perchloric acid



### Precautions

- Store away from Class B (flammable and combustible) materials
- Store away from sources of heat and ignition
- Wear recommended protective equipment



## Class D: Division 1 Poisonous & Infectious



### Class D: Division 1 Poisonous & Infectious

- Materials cause immediate and serious toxic effects
- May cause immediate death or serious injury if inhaled, swallowed, or absorbed through the skin
- Examples: methanol, phenol



### Precautions •

- Avoid inhaling gas or vapours
- Avoid skin and eye contact
- Wear recommended protective equipment and clothing
- Do not eat, drink, or smoke near these materials
- Wash hands after handling

## Class D: Division 2 Poisonous & Infectious



### Class D: Division 2 Poisonous & Infectious

- Materials cause **immediate or permanent injury following repeated or long-term exposure**
- Irritates eyes, skin, and breathing passages
- May lead to chronic lung problems and skin sensitivity
- May cause liver or kidney damage, cancer, birth defects, or sterility
- Examples: formalin 10%, Klean n Shine Surface Cream Cleanser



### Precautions •

- Avoid inhaling gas or vapours
- Avoid skin and eye contact
- Wear recommended protective equipment and clothing
- Do not eat, drink, or smoke near these materials
- Wash hands after handling



## Class D: Division 3 Biohazardous Infectious



### Class D: Division 3 Biohazardous Infectious

- Includes microbiological materials
- May cause illness or death
- Examples: tuberculosis, viruses such as influenza, and fungi-like mold's and their toxins



### Precautions •

- Avoid inhaling gas or vapours
- Avoid skin and eye contact
- Wear recommended protective equipment and clothing
- Do not eat, drink, or smoke near these materials
- Wash hands after handling

## Class E: Corrosive Material



### Class E: Corrosive Material

- Includes caustic and acid materials which can destroy skin or eat through metals
- Will burn eyes and skin on contact
- May cause damage to tissues of the respiratory tract if inhaled
- Examples: sodium hydroxide, hydrochloric acid, nitric acid, Crew Super Blue Bowl Cleaner, acetic acid



### Precautions

- Store acids and bases in separate areas
- Avoid inhaling these materials
- Avoid contact with skin and eyes
- Wear recommended protective equipment and clothing

## Class F: Dangerously Reactive



### Class F: Dangerously Reactive

- These materials may be unstable, reacting dangerously to jarring, compression, heat, or exposure to light; and burn, explode, or produce dangerous gases when mixed with incompatible materials
- These products may self-react dangerously (for example, they may explode) upon standing or when exposed to physical shock or to increased pressure or temperature, or they emit toxic gases when exposed to water
- Example: picric acid



### Precautions •

- Store away from heat
- Avoid shock and friction
- Wear recommended protective equipment and clothing

## Product Labelling

- There are two types of labels:
  - **Supplier Labels**, which suppliers are responsible for placing on all products sold or distributed
  - **Workplace Labels**, which employers may use if the supplier label falls off, is defaced, or the product was transferred to another container.



Supplier Labels



Workplace Labels

## Supplier Label Requirements

slash-marked borders

symbols for each product class

English and French

product name

main hazards

precautions that should be taken

first aid measures

reference to the MSDS for more information

supplier

**SUPPLIER LABEL**

Additional Resource Material  
For more information about WHMIS,  
visit the following websites:  
[www.cco-ccc.gc.ca/whm-ccm/whmip-ccm/whmip-ccm-eng.php](http://www.cco-ccc.gc.ca/whm-ccm/whmip-ccm/whmip-ccm-eng.php)  
[www.cco-ccc.gc.ca/whm-ccm/whmip-ccm/whmip-ccm-fr.php](http://www.cco-ccc.gc.ca/whm-ccm/whmip-ccm/whmip-ccm-fr.php)

**Supplier Labels** placed on products under WHMIS (1988) will have a hash border around it. Canadian supplier labels are also bilingual, English and French. (Note: Under WHMIS 2015, the hash border is no longer required).

1. WHMIS Hazard Symbols
2. Hash border (Canadian only)
3. Product Name
4. Main Hazards
5. Precautions (such as PPE to use when handling)
6. First Aid Measures
7. Reference to MSDS for further information
8. Supplier

A product identifier – normally the trade name

### Methyl Alcohol

**Precautions:**

Use in well ventilated area

Avoid contact with skin and eyes

Keep away from spark and flame

Refer to Material Safety Data Sheet

Precautions to take

A statement that says the MSDS is available in the workplace

FRANCAIS AU VERSO

**Required:** if the supplier label becomes illegible or if the product was received and transferred to another container.

**Not Required:** if the transferred material is used in its entirety prior to the end of the work shift, for example a mixed solution of floor cleaner that will be emptied at the end of the shift.



# Material Safety Data Sheet

MATERIAL SAFETY DATA SHEET - 9 SECTIONS	
<b>SECTION 1 - PRODUCT INFORMATION</b>	
Product Name	WHMIS Classification (optional)
Product Use	
Manufacturer's Name	Supplier's Name
Physical and Mailing Address	Physical and Mailing Address
Emergency Contact Phone Number	Emergency Contact Phone Number
<b>SECTION 2 - HAZARDOUS INGREDIENTS</b>	
Hazardous Ingredients (very specific)	
<b>SECTION 3 - PHYSICAL DATA</b>	
Physical State (What does it look like? Is it a liquid, gas, or solid?)	
What happens to it under a variety of circumstances? (i.e. heat, freezing, dropping, etc.)	
<b>SECTION 4 - FIRE AND EXPLOSION DATA</b>	
Flammability and how to extinguish. Includes a wide variety of details concerning how easily this product will ignite / explode and how to deal with it.	
<b>SECTION 5 - REACTIVITY DATA</b>	
How stable is this product?	How it reacts under various conditions.
Incompatibility with other substances.	Hazardous Decomposition Products
<b>SECTION 6 - TOXICOLOGICAL PROPERTIES</b>	
Information about how the product affects and enters the body. Immediate affect. Long term toxic affect.	
<b>SECTION 7 - PREVENTIVE MEASURES</b>	
Exposure limits. In summary, immediate and long term affects to the human body.	
Personal Protective Gear, ventilation, etc., leak and spill info, waste disposal, handling and storage.	
<b>SECTION 8 - FIRST AID MEASURES</b>	
Special shipping instructions	
<b>SECTION 9 - PREPARATION INFORMATION / Who prepared this and contact info</b>	

- The Material Safety Data Sheet (MSDS) gives you information about the hazards that are associated with a product
- The product supplier must provide an MSDS for all products it supplies to the employer
- It is the employer's responsibility to ensure it is accessible to all workers in the workplace
- The MSDS must be kept up-to date

In the event of exposure, the MSDS must be given to the doctor providing treatment, so that the appropriate care is provided.

# Locating MSDS/SDS Information

If you are looking for detailed information on a controlled product found in the workplace you will be able to locate their corresponding MSDS/SDS in the following locations:



## Department Binder

- Your department may maintain a WHMIS 1988/2015 binder available for referencing a department specific inventory list and corresponding MSDS/SDS. This can be handy in the event of a power outage. It is the responsibility of the department manager to ensure that this binder is kept up to date.



## Site Specific Master Book

- Each site's **master MSDS/SDS book** can be found in the Employee Health, Safety and Wellness department and contains information for all departments on that site.



## thpHub

- The master books may also located on the thpHUB
- The database is called Wellnet or MSDS Online
- The Wellnet database/MSDS Online is always up to date

# To access Wellnet/MSDS Online

## Step 1: Access the thpHub, Quick Links

Trillium Health Partners Better Together thpHUB

Home | About THP | Outlook | Foundation | Careers | Volunteers | THP Website | Search

STRATEGIC PLAN | DEPARTMENTS | EDUCATION & RESEARCH | POLICIES & PROCEDURES | MEDICAL EDUCATION | EMPLOYEE RESOURCES | LIBRARY | PEOPLE FINDER | APPLICATIONS

**In Touch**  
Ask Michelle & Dante Email  
Taking a Moment with Michelle - Town Hall  
Better Together Newsletter  
Taking a Moment with Michelle - Blog  
Shout-Outs

**On-Call Schedules**

**Quality/Access/Sustainability Goals**  
QIP Scorecard  
BII Portal and Quality Boards  
Advancing Safety Portal  
Quality Improvement Plan (QIP)  
Quality and Patient Safety  
Sustaining Accreditation

**Better Together**  
Organizational Leadership  
Leadership Corner NOW OPEN...

**CM DASHBOARD** **OUTBREAK** **CODE UPDATE**

**Trillium Health Partners NEWS & EVENTS**  
SAVE THE DATE - Inside Ride @ Credit Valley Hospital  
We invite you to participate in the 2nd Annual Inside Ride in support of our hospital's POGO Clinic taking place on October 5th!  
Save the Date! Back to School - September 21, 2016  
from 8:30 a.m. to 3:30 p.m. at the Living Arts Centre Messagerie. Details and registration information available here.  
Save the Date! Riding Through October Health Fair  
Connect With Us at Trillium

**Organizational**  
**Consent**

**Medical / Professional Staff**  
Medical & Professional Staff Portal  
Physician Directories  
Rounds  
On-Call Schedules

**Drug Information**

**Emergency Preparedness**  
Code of the Month  
Emergency Codes  
Pandemic Planning  
Ebola Virus Disease (EVD) Preparedness

**Committees**  
Infectious Disease Council  
Nursing Advisory Council  
NAC - Best Practice Spotlight Organization  
NAC - Registered Nursing Advisory Committee  
Seamless Transitions

**ESSENTIALS** Work Request | Policies & Procedures | E-lookit | Projects | Ask Michelle & Dante | SLC Teaspace | Total Rewards | Careers | IT Help | HES

Quick Links | Privacy | Feedback | Site Map | Care | Offices | Team 2016

On the thpHUB, click on Quick Links

# To access Wellnet/MSDS Online

## Step 2: Locate the Quicklink

Trillium Health Partners Better Together thpHUB

Home | About THP | Outlook | Foundation | Careers | Volunteers | THP Website | Search

EDUCATION & RESEARCH | POLICIES & PROCEDURES | MEDICAL EDUCATION | EMPLOYEE RESOURCES | LIBRARY | PEOPLE FINDER | APPLICATIONS

**Click on the WHMIS MSDS DATABASE link**

WHMIS MSDS DATABASE

Classifieds | cpsi/csp

CRITICALL | electronic | RxTx

Ontario | HIROC | HOOPP | Lexicomp | MISSISSAUGA BOARD OF TRADE

Ontario | MHPCN | Natural Standard | NATURAL MEDICINES | Ontario Ministry of Health and Long-Term Care

OntarioMD.ca | Ontario | RAO

**ESSENTIALS** Work Request | Policies & Procedures | E-lookit | Projects | Ask Michelle & Dante | SLC Teaspace | Total Rewards | Careers | IT Help | HES

Quick Links | Privacy | Feedback | Site Map | Care | Offices | Team 2016



# To access Wellnet/MSDS Online

## Step 3: Select Your Site

**WellNet / MSDSONline** provides a service to obtain and update the MSDS/SDSs and make them available in the database. This database is always up to date.

**Select the WHMIS Database for your site.**

The screenshot shows the Trillium Health Partners thpHUB website. The navigation menu includes: STRATEGIC PLAN, DEPARTMENTS, EDUCATION & RESEARCH, POLICIES & PROCEDURES, MEDICAL EDUCATION. The breadcrumb trail is: Trillium Health Partners > Our Teams > Safety > WHMIS MSDS. The left sidebar lists: SAFETY, Prevention, WHMIS MSDS, Workplace Hazards, Ergonomics, NAOSH. The main content area is titled "WHMIS MSDS" and includes a "MSDS & WHMIS Inventory" section with the text: "Electronic On-Line database link (read only) to your WHMIS MSDS Inventory for Trillium Health Center." Below this, two links are highlighted: "WHMIS Database-MH/QHC" and "WHMIS Database-CVH". The bottom of the page features a footer with "ESSENTIALS" and various utility links like "Work Request", "Policies & Procedures", "E-Book", "Projects", "Ask Michelle & Darin", "SLC Teamwork", "Total Rewards", "Careers", "IS Help", "HS", "Quick Links", "Privacy", "Feedback", "Site Map", "iCare", "iShare", "Team Zone".

# Module 3: WHMIS 2015 Overview

In this section, we will review the key features of GHS which have been adopted to form WHMIS 2015.

# Introduction to WHMIS 2015

Recall from earlier in this module we reviewed GHS and the introduction of the new standards to Canada and Ontario:

**The Global Harmonization System (GHS)**

The Global Harmonization System (GHS) is an *international* initiative to standardize chemical hazard classification and communication globally. GHS has been adopted by many of Canada's trading partners, including the United States.



**Canada Introduces WHMIS 2015**

On February 11, 2015, the Government of Canada modified the Workplace Hazardous Materials Information System (WHMIS) to incorporate the Global Harmonized System of Classification and Labeling of Chemicals (GHS) for workplace chemicals, with the Province of Ontario following on July 1, 2015.

The combination of standards from WHMIS 1988 combined with the standards of GHS will be known as WHMIS 2015.



# What Will Remain the Same?

**Roles and Responsibilities**

The roles and responsibilities of Supplies, Employers, and Workers remain the same in WHMIS 2015, as they were previously.

**WHMIS Roles and Responsibilities**

The Supplier	The Employer	The Worker
<ul style="list-style-type: none"> <li>For products sold or distributed in Canada, suppliers are required to determine if the product falls under WHMIS</li> <li>Provide a current MSDS (3 years old or less)</li> <li>Ensure the product is appropriately labeled</li> </ul>	<p><b>Employers must:</b></p> <ul style="list-style-type: none"> <li>Develop and maintain an education program</li> <li>Ensure products are properly labeled, and that MSDS's are readily available to workers.</li> </ul> <p><b>Department managers are required to:</b></p> <ul style="list-style-type: none"> <li>Develop safe work procedures</li> <li>Ensure workers have been trained with respect to working with hazardous materials</li> <li>Employers are also required to review the information and training provided annually</li> </ul>	<ul style="list-style-type: none"> <li>Participate in WHMIS education and training provided by the employer</li> <li>Apply the education and training to protect themselves and others in the workplace</li> <li>Use proper protective equipment when handling, storing, or transporting hazardous materials</li> <li>If there are any problems with labels or MSDS's workers must notify their supervisor.</li> </ul>



# What Will Remain the Same?

## Locating Information

Locating information on WHMIS remains the same with 2 small exceptions:

1. Material Safety Data Sheets (MSDS) will be called **Safety Data Sheets (SDS)**
2. Updates will only be made if there is a change to the product

**Locating MSDS/SDS Information**

If you are looking for detailed information on a controlled product found in the workplace you will be able to locate their corresponding MSDS/SDS in the following locations:

- Department Binder**
  - Your department may maintain a WHMIS 1988/2015 binder available for referencing a department specific inventory list and corresponding MSDS/SDS. This can be handy in the event of a power outage. It is the responsibility of the department manager to ensure that this binder is kept up to date.
- Site Specific Master Book**
  - Each site's master MSDS/SDS book can be found in the Employee Health, Safety and Wellness department and contains information for all departments on that site.
- thpHub**
  - The master books may also located on the thpHub
  - The database is called Winnet or MSDS Online
  - The Winnet database/MSDS Online is always up to date

# What Will Remain the Same?

## Employer Labels

Must still be placed on products on which the original supplier label is removed, defaced, or the product is transferred to a different container.

The only minor difference is the reference to MSDS which will now be SDS.

**Methyl Alcohol**

**Precautions:**

- Use in well ventilated area
- Avoid contact with skin and eyes
- Keep away from spark and flame
- Refer to Material Safety Data Sheet

**Required:** if the supplier label becomes illegible or if the product was received and transferred to another container.

**Not Required:** if the transferred material is used in its entirety prior to the end of the work shift, for example a mixed solution of floor cleaner that will be emptied at the end of the shift.

## What Will Change?

- **New** terms and definitions
- **New** classification rules and hazard classes
- **New** hazard pictograms (symbols)
- **New** label requirements
- **New** standardized format for Safety Data Sheets (formerly called Material Safety Data Sheets)

## WHMIS 2015 Terms and Definitions

Term	Definition
<b>Class</b>	A term used to describe the different types of hazards
<b>Category</b>	Used to describe the level of hazard by assigned numbers (or letters) with category 1(or A) being the most hazardous
<b>Hazard Group</b>	WHMIS 2015 has two major groups – health and physical
<b>Hazard Statement</b>	Brief standardized statements that describe the hazards based on the hazard classification of the product
<b>Pictogram</b>	refers to the GHS symbol on the label and SDS. Not all categories have a symbol associated with them
<b>Precautionary Statement</b>	Standardized phrases that describe the recommended steps to be taken to minimize or prevent adverse effects from exposure to or resulting from improper handling or storage of a hazardous product
<b>SDS</b>	Safety Data Sheet. In WHMIS 1988, this was known as MSDS Material Safety Data Sheet.
<b>Signal Word</b>	There are two signal words in the GHS system – DANGER and WARNING which are used to communicate the level of hazard on both the label and the SDS. The appropriate signal word to us is set out by the classification system. DANGER is used for the most hazardous materials, while WARNING is used for less serious. There are also categories where no signal word is used

# WHMIS 2015 Hazardous Products

- A controlled product is any product or ingredient that meets the criteria for one or more classes of hazards established by WHMIS
- There are 3 major hazard groups:
  1. Health hazards
  2. Physical hazards
  3. Environmental hazards
- Each of the hazard groups has classes and categories

**Note:** At this time, WHMIS 2015 has not adopted the Environmental Hazard Group classification

# WHMIS 2015 Hazard Classes

## Physical Hazard Classes










Combustible Dusts
Corrosive to Metals
Flammable Aerosols
Flammable Gases
Flammable Liquids
Flammable Solids
Gases Under Pressure
Organic Peroxides
Oxidizing Gases
Oxidizing Liquids
Oxidizing Solids
Pyrophoric Gases
Pyrophoric Liquids
Pyrophoric Solids
Self-Heating Substances and Mixtures
Self-Reactive Substances and Mixtures
Simple Asphyxiants
Substances and Mixtures Which, in Contact with Water, Emit Flammable Gases
Physical Hazards Not Otherwise Classified

## Health Hazard Classes

Acute Toxicity
Aspiration Hazard
Biohazardous Infectious Materials
Carcinogenicity
Germ Cell Mutagenicity
Reproductive Toxicity
Respiratory or Skin Sensitization
Serious Eye Damage/Eye Irritation
Skin Corrosion/Irritation
Specific Target Organ Toxicity - Repeated Exposure
Specific Target Organ Toxicity - Single Exposure
Health Hazards Not Otherwise Classified

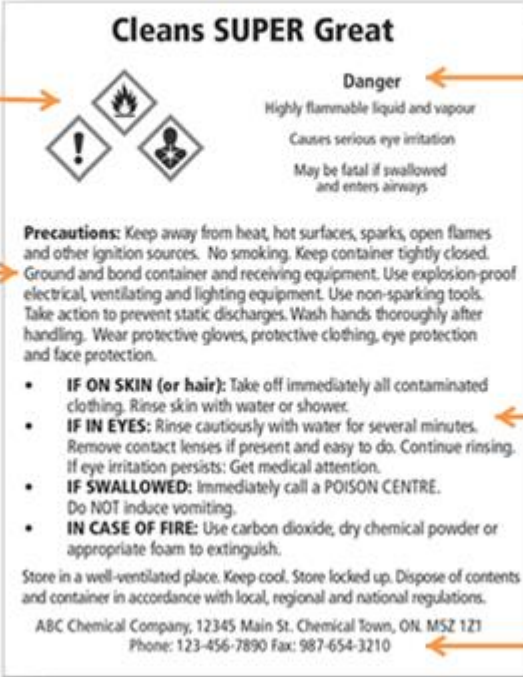


# WHMIS 2015 Hazard Pictograms

WHMIS 2015	Types of Hazards
	Gases under pressure
	Flammables (gases, aerosols, liquids, solids), Pyrophoric (liquids, solids, gases), Self-reactive substances and mixtures, Self-heating substances and mixtures, Substances and mixtures which, in contact with water, emit flammable gases, Organic peroxides
	Oxidizing (liquids, solids, gases)
	Acute toxicity (fatal or toxic)
	Carcinogenicity, Germ cell mutagenicity, Respiratory sensitization, Reproductive toxicity, Specific target organ toxicity - single exposure, Specific target organ toxicity - repeated exposure, Aspiration hazard
	Acute toxicity (harmful), Skin irritation, Eye irritation, Skin sensitization, Specific target organ toxicity - single exposure (respiratory irritation or drowsiness or dizziness)
	Corrosive to metals, Skin corrosion, Serious eye damage
	Self-reactive substances and mixtures, Organic peroxides
	Biohazardous infectious materials

# WHMIS 2015 Supplier Label Example

**Cleans SUPER Great**



**Hazard Pictograms**

**Signal Words:**  
Danger or Warning

**Precautionary Measures (response, prevention, storage, and disposal)**

**Precautionary Statements (response)**

**Supplier Identifier (Supplier Name, Address, and Telephone Number)**

## Cleans SUPER Great



**Danger**  
Highly flammable liquid and vapour  
Causes serious eye irritation  
May be fatal if swallowed and enters airways

**Precautions:** Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking. Keep container tightly closed. Ground and bond container and receiving equipment. Use explosion-proof electrical, ventilating and lighting equipment. Use non-sparking tools. Take action to prevent static discharges. Wash hands thoroughly after handling. Wear protective gloves, protective clothing, eye protection and face protection.

- **IF ON SKIN (or hair):** Take off immediately all contaminated clothing. Rinse skin with water or shower.
- **IF IN EYES:** Rinse cautiously with water for several minutes. Remove contact lenses if present and easy to do. Continue rinsing. If eye irritation persists: Get medical attention.
- **IF SWALLOWED:** Immediately call a POISON CENTRE. Do NOT induce vomiting.
- **IN CASE OF FIRE:** Use carbon dioxide, dry chemical powder or appropriate foam to extinguish.

Store in a well-ventilated place. Keep cool. Store locked up. Dispose of contents and container in accordance with local, regional and national regulations.

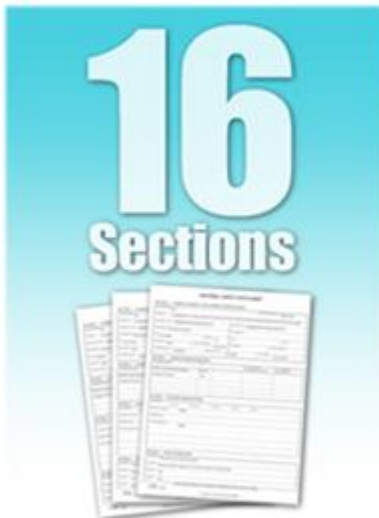
ABC Chemical Company, 12345 Main St, Chemical Town, ON, M5Z 1Z1  
Phone: 123-456-7890 Fax: 987-654-3210

## Supplier Label Comparison

The following chart displays a comparison of the WHMIS 1988 and WHMIS 2015 supplier label features

WHMIS 1988	WHMIS 2015
Product Identifier	Product Identifier
Supplier Identifier (Name Only)	Supplier Identifier (Name, Address And Telephone)
Hazard Symbols (Circle)	Hazard Pictograms (Diamond)
Risk Phrases	Hazard Statements (Standardized Wording)
Precautionary Measures	Precautionary Statements (Response, Prevention, Storage And Disposal)
First Aid Instructions	Precautionary Statements (Response)
Reference To MSDS	No reference to MSDS or SDS
No Signal Word	Signal Word (Danger Or Warning)
Hashed Border	No Border

## Safety Data Sheets (SDS)



Under WHMIS 2015, Material Safety Data Sheets will be called Safety Data Sheets, or SDS for short. Key Features and Requirements of SDS's:

- Standardized 16-section SDS
- Suppliers must provide to customers
- Must be available to all workers
- Updates required when significant new information is available
- Information will be easier to find for SDS users, since all SDS's will have the same layout.
- Now provide hazard classifications for hazardous products in your workplace

In the event of exposure, the MSDS must be given to the doctor providing treatment, so that the appropriate care is provided.



# Safety Data Sheets Sections

	SDS Section	Information Requirements (partial list)
1	Identification	Product identifier, recommended use and restrictions on use, supplier contact information, emergency phone number.
2	Hazard identification	Classification (hazard class and category), label elements (including hazard pictogram, signal word, hazard statement and precautionary statements) and other hazards (e.g. thermal hazards).
3	Composition/information on ingredients	For a hazardous product that is a substance: the chemical name, synonyms, CAS No. and the chemical name of impurities, stabilizing solvents and stabilizing additives where classified and that contribute to the classification of the product. For a hazardous product that is a mixture: for ingredients that present a health hazard, the chemical name, synonyms, CAS No. and concentration. Note: Confidential Business Information Rules may apply.
4	First-aid measures	First-aid measures by route of exposure as well as most important symptoms/effects.
5	Fire-fighting measures	Suitable (and unsuitable) extinguishing media, specific hazards, special equipment and precautions for fire fighters.
6	Accidental release measures	Protective equipment, emergency procedures, methods and materials for containment and clean up.
7	Handling and storage	Precautions for safe handling, conditions for storage, including any incompatibilities.
8	Exposure controls/personal protection	Exposure limits, engineering controls, personal protective equipment.
9	Physical and chemical properties	Appearance, odour, odour threshold, pH, melting/freezing point, boiling point and range, flash point, upper and lower flammable or explosive limits.
10	Stability and reactivity	Reactivity, chemical stability, possible hazardous reactions, conditions to avoid, incompatible materials, hazardous decomposition products.
11	Toxicological information	Description of various toxic effects by route of entry, including effects of acute or chronic exposure, carcinogenicity, reproductive effects, respiratory sensitization.
12	Ecological information*	Aquatic and terrestrial toxicity (if available), persistence and degradability, bioaccumulative potential, mobility in soil.
13	Disposal considerations*	Safe handling and methods of disposal, including contaminated packaging.
14	Transport information*	UN number and proper shipping name, hazard classes, packing group.
15	Regulatory information*	Safety, health and environmental regulations specific to the product.
16	Other information	Other information, including date of the latest revision of the SDS.

## Module 4: Annual WHMIS Quiz

You will now complete the annual mandatory WHMIS quiz.



# Additional Resources

## Publications

Workplace Hazardous Materials Information System Ontario. Reg.860

<http://www.e-laws.gov.on.ca/navigation?file=home&lang=en>

## Ontario Occupational Health & Safety Act

[http://www.e-laws.gov.on.ca/html/statutes/english/elaws\\_statutes\\_90o01](http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_90o01)

## Organizations

Health Canada

[http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/ref\\_man/ref\\_manual\\_index-eng.php](http://www.hc-sc.gc.ca/ewh-semt/pubs/occup-travail/ref_man/ref_manual_index-eng.php)

## Canadian Center for Occupational Health and Safety

<http://www.ccohs.ca/>

## Conferences

Industrial Accident Prevention Association (IAPA): Health and Safety Conference Canada

<http://www.iapa.ca/>

# For More Information Contact



**Mississauga Hospital and  
Queensway Health Centre**  
Daniel Bukvic (x2640)

**Credit Valley  
Hospital Site**  
Karen Floyd(x5888)



# Workplace Violence Education

Welcome to Trillium Health Partners Workplace Violence Education. This course will take you approximately 10 minutes to complete.



## About This Course

This is a mandatory education course as required by the Occupational Health and Safety Act of Ontario.

All employees are required to renew their Workplace Violence education on an annual basis. This module will provide you with information on how to recognize workplace violence and harassment in the workplace and the steps to take to report an incident.



**Health & Safety at Work**



## Module 1: Background

This module will introduce you to:

- Trillium's commitment to employees and responsibilities as an employer; and
- Trillium's Workplace Discrimination, Harassment, and Violence Prevention Policy



**Health & Safety at Work**



## Our Commitment to Our People

We are Better Together. At THP we are committed to cultivating and fostering a healthy, safe, respectful and healing environment for all.

Every individual has the right to **respect and dignity** and **freedom from violence and harassment** in the workplace.

**Any act of inappropriate behaviour, harassment or violence is unacceptable and will not be tolerated.**

---

## Our Commitment to Each Other

To be *Better Together*, we *commit* to cultivating a culture of caring that promotes a safe and supportive environment for everyone who provides care, supports caregiving, receives care or visits the hospital.

This means we will consistently:

- Treat one another with respect, compassion and dignity;
- Maintain clarity and consistency in our practices, expectations and outcomes;
- Build trusting relationships with one another by acknowledging our efforts, listening to one another and responding to our needs;
- Express ourselves through open and honest communication; and
- Strive to create a hospital environment that promotes healing and wellness.



## THP's Workplace Discrimination, Harassment and Violence Prevention Policy Statement

- To support our commitment, THP will not tolerate any acts of violence and will take all reasonable and practical measures to prevent violence in the workplace.
  - All employees, professional staff, volunteers, students/learners, independent and external contract workers, and any individuals who represents THP are bound by THP's Workplace Discrimination, Harassment and Violence Prevention policy.
  - All people who attend THP including patients, visitors, contractors, vendors, delivery persons, customers etc. are expected to adhere to the principles of the THP policy and contribute to a workplace free of violence.
- 

## THP's Responsibilities

- Take the appropriate actions to keep all employees safe by reinforcing policies and procedures
  - Ensure that all employees receive education and information on how to report any incidence of workplace violence, and ensure appropriate response by THP staff
  - Conduct a workplace assessment of the risks of workplace violence that may arise from the nature of the workplace
  - Advise any employees involved in a violent situation of the resources available to assist them (e.g. Security, EHSW, Employee Assistance Program, Human Resources, Police, etc.)
  - Investigate all complaints of Workplace Violence or Harassment
-

## Module 2: Workplace Violence and Harassment

This module will introduce you to workplace violence, workplace sexual harassment, workplace harassment, risks factors in the workplace, and prevention strategies.

Health & Safety at Work



### What is Workplace Violence?



- The use of physical force against or by an individual in the **Workplace** that causes or could cause physical injury;
- The attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker;
- A statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker

*The **Workplace** includes all locations where individuals conduct THP business or social activities and where their behavior may have a subsequent impact on work relationships, environment and or performance.*

*Threats of violence that occur by way of electronic communications (e.g. unwelcome phone calls, messages on email, voice mail or social media and the display of offensive materials) may also be considered to have occurred in the Workplace.*

## What is Workplace Sexual Harassment?

### Workplace Sexual Harassment

Engaging in a course of vexatious comment or conduct against a worker in a workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or

Making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the worker and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.



## What is Workplace Harassment?

### Workplace Harassment

Engaging in a course of vexatious comment or conduct against staff in a workplace that is known, or ought reasonably to be known, to be unwelcome.



## What Are The Types of Workplace Violence?

### Violence may be perpetrated in the workplace by:

- Someone with no relationship to the workplace
- A patient, visitor or customer of THP
- An employee (employee to employee)
- Someone with a personal relationship with a staff member (domestic abuse)

## Are you at Risk? *Patients and Visitors*



Behaviour could be influenced by fear, frustration and the patient's medical condition.



Clinicians have to be mindful of the risks associated with working with patients one-on-one, especially when physical contact is necessary.



## Are you at Risk? *Staff to Staff*

In a work environment, there is a potential for incivility or disrespectful behaviour that could escalate.

Unresolved incivility could escalate to violence or threats.



## Are you at Risk? *Workplace*

Access to restricted areas by the general public or people with no reason to be in certain locations pose a risk.

Staff may also be vulnerable to violence or harassment in isolated areas.



# THP Prevention Strategies



**THP has a number of prevention strategies in place:**

- **Polices and Procedures** – THP has a Code of Conduct and THP’s Workplace Discrimination, Harassment and Violence Prevention policy that all individuals are expected to be in compliance with
- **Training** – general hospital orientation, annual mandatory learning, specialty training such as de-escalation training to prevent workplace violence
- **Workplace Design** – certain areas are designed to provide a barrier for staff in the event of a violent situation
- **Security and Access** –
  - Visitor and patient access is controlled through staff only access to certain areas
  - ID badges are required for all staff
  - THP uses security systems including surveillance cameras and Panic Buttons where appropriate
  - SafeWalk program
- **Code White** – THP has an established Code White program to provide immediate assistance to staff in potentially violent situations
- **Code Silver**- THP has an established Code Silver program to provide immediate response to incidents involving weapons



## Module 3: Reporting an Incident

In this section you will be introduced to the steps to take if you experience violence in the workplace.

Health & Safety at Work



## If you experience violence in the workplace

From a **patient or visitor**, ensure the following steps are taken:

Object and let the patient / visitor know it's not okay.

In a crisis situation, call Code White ext. 5555 or 911 if offsite

If required, seek medical attention through EHSW or Emergency Dept. if after hours

Report incident to your Leader and EHSW immediately

Complete an on-line incident report and document in the patient chart

Ensure all who are in direct care of patient/visitor are aware of behaviours. Revise care plan as required

## If you experience violence in the workplace

From a **colleague or staff member**, ensure the following steps are taken:

Object and let the staff member know it's not okay.

In a crisis situation, call Code White ext. 5555 or 911 if offsite

If required, seek medical attention EHSW or Emergency Dept. if after hours

Report incident to your Leader and EHSW

Complete an on-line incident report

Contact Human Resources for support or if you wish to file a formal complaint

## What You Can Expect Following an Incident



- All known incidents and reports of Workplace Violence including Workplace Harassment and Workplace Sexual Harassment are investigated in accordance with THP's Workplace Discrimination, Harassment and Violence Prevention policy
- Complaints shall be investigated both confidentially and objectively with respect for the rights of all parties involved
- Personal information will be disclosed on a need to know basis in accordance with the Hospital's legal and ethical responsibilities
- If inappropriate conduct has been found, appropriate corrective action will be taken

## Supports Available Following an Incident



- THP has an Employee Assistance Program (EAP) that is available to all staff and any members of the household 24 hours a day, 7 days a week (see HUB for details)
- Your Manager is a resource to help you through the process or guide you on next steps
- You may speak with an Occupational Health Nurse in the EHSW clinic during business hours
- Through the EHSW clinic, an appointment may be made to see the onsite counsellor.
- Human Resources are available for additional support as required

## Advancing Safety

This online module is only available on the THPHub. It covers incident reporting and the incident reporting system, RL6.

<http://thphub/education/MoreLearningLinks/Pages/iLearnforMHQHC.aspx>

## Environmental Awareness



## What is an Environmental Management System?

- ❑ An Environmental Management System is a process used to manage and improve environmental performance
  - ❑ The Mississauga Hospital and Queensway Health Centre have been voluntarily registered to an Environmental Management System standard (ISO14001) since 2004
  - ❑ Overtime we'll share and improve processes to expand the system to Credit Valley Hospital too
  - ❑ An ISO4001 registration is like a Hospital or Lab accreditation process with an environmental focus
  - ❑ ISO14001 has two requirements:
    - Compliance with legal requirements
    - Continual improvement on environmental performance
- 

## What should staff know?

- ❑ Every individuals actions help us improve!
    - Be aware of the Environmental Policy & Significant Aspects
    - Know the programs in place and current objectives
    - Know how you could positively or negatively impact on the environment
    - Have an interest in environmental initiatives
    - Complete your Mandatory Training programs
  - ❑ You know your job best
    - Use common sense in regard to your work and how it may interact with the environment
    - Suggest or make a change to reduce impacts to the environment in your area
    - Report issues to Team Leaders, Managers or through Risk Pro
    - Report emergencies (e.g. Code Red, Code Brown); Managers ensure they are entered to RiskPro
-

## What should staff know?

### ❖ Patient Care is the priority

- Our efforts to improve the hospitals environmental performance supports patient care, minimizes our environmental impact on the community and can save money for our operation

### ❖ Goal of the environmental policy

1. Improve environmental performance
2. Prevent pollution where possible



## Environmental Programs

### Operational Control

Programs in place to support the environmental system

1. Hazardous Material Management
2. Waste Management
3. Energy Management
4. Air Quality
5. Water Management (quality & conservation)



## Environmental Objectives @ THP

Program Categories	Environmental Objectives for 2013/2014
Environmental Management System	<ul style="list-style-type: none"> <li>• Launch Mandatory Training Program – Environmental Awareness</li> </ul>
Waste Reduction	<ul style="list-style-type: none"> <li>• Divert 35 % of non-hazardous waste from landfill (average of all sites).</li> </ul>
Energy Conservation (Natural Gas and Electricity)	<ul style="list-style-type: none"> <li>• To obtain electrical energy savings:                             <ul style="list-style-type: none"> <li>a) 300 kW of peak demand savings and</li> <li>b) 300 kW x facility load factor x 8,760 hours in energy savings each year</li> </ul> </li> </ul>
Water Conservation	<ul style="list-style-type: none"> <li>• Identify and implement opportunities to reduce water consumption.</li> </ul>
Hazardous Materials Management	<ul style="list-style-type: none"> <li>• Consolidate cleaning chemicals for multi purpose use (3 sites).</li> <li>• Convert cleaning chemicals to green products at Mississauga Hospital.</li> </ul>
Emergency Preparedness	<ul style="list-style-type: none"> <li>• Standardize Code Brown preparedness programs across the 3 sites (Spill kits, training for all, training for spill response team)</li> </ul>

## Hazardous Material Management

### ❖ Protecting staff

- WHMIS procedure
  - Annual WHMIS Training & Awareness of requirements
  - Material Safety Data Sheets (MSDS)
  - Department specific Annual Chemical Inventory and continual MSDS updates from Manufacture.
- Personal Protective Equipment (PPE)
- Code Brown, Code Red Training & Awareness
- Occupational Hygiene Monitoring
- Asbestos Management Program
- Radiation Safety Program

## Health & Safety Awareness Training

Welcome to Trillium Health Partners Health & Safety Awareness Training module. This module will take you approximately 10 minutes to complete.

To begin, click on the navigational arrows



## Introduction

This online module explains your rights and responsibilities while at work and tells you what Ontario's Occupational Health & Safety Act (OHSA) expects from Trillium Health Partners (the employer), your supervisor and you (the employee). These are things you need to know and understand so you can be safe at work today and every day.



## Health & Safety Awareness Education



This module is divided into four sections:

- Get On Board
- Get In The Know
- Get Involved
- Get More Help

MODULE 1

## Module 1: Get on Board

At the end of this module you will be able to:

- Describe why you are important to Health & Safety
- Describe the duties of the employer
- Describe the duties of the supervisor
- Describe the duties and rights of workers





MODULE 1

## Module 1: Get on Board



One of the first things I learned when I started working here is that every job has hazards. No matter how safe it looks.

I found out that the way I can stay safe is by knowing about anything in this workplace that could hurt me or make me sick.

Each of us here, has a role to play in safety at work.

If we all cooperate and do what's expected of us, we can get home safely at the end of the day.

MODULE 1

## Module 1: Get on Board



The number of people in Ontario who suffer a work related illness or injury each year can fill the seats of a dozen big hockey arenas.

Studies show that new and young workers in Ontario are three times more likely to get hurt during their first month on the job than at any other time AND the greatest risk among new workers are workers over 45.

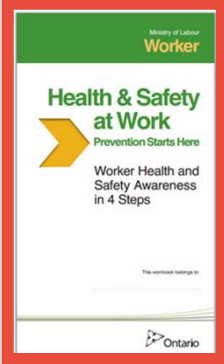
That's because they often aren't told about or don't understand the hazards of the job.

Sometimes we don't know what questions to ask.

Sometimes we don't even know who to ask.

MODULE 1

## Module 1: Get on Board

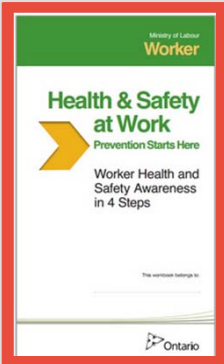


### How the Occupational Health & Safety Act works

The Occupational Health & Safety Act (OHSA) is a set of laws that spells out the duties of **employers, supervisors** and the rights and duties of **workers**. There are also different Regulations that are attached to the OHSA. They contain more detailed laws about how to make the workplace safe in specific situations. For example, several Regulations explain what is needed to work safely with chemicals and other hazardous materials. This includes training, warning labels on products and information sheets. There are also Regulations for different types of workplaces, such as health care facilities.

MODULE 1

## Module 1: Get on Board



### The Purpose of OHSA

The main purpose of the OHSA and Regulations is to keep workers from getting hurt or sick on the job.

Inspectors from the Ministry of Labour, who make sure the laws are followed, may issue orders or lay charges if they are not being followed. If a person is convicted of breaking the law, the OHSA supports penalties such as fines or time in prison.




OHSA gives everyone in the workplace duties. These duties are connected to the level of authority each person has at Trillium Health Partners (the workplace). OHSA breaks them down to three main levels of authority:

- 1) The **Employer** (Who is in charge of everyone)
- 2) The **Supervisor**
- 3) The **Worker (you)**

MODULE 1


## Module 1: Get on Board

Click on each picture to find out the duties of the Employer, Supervisor and Worker



MODULE 1

## Module 1: Get on Board



### Duties of the Employer

- Make sure workers know about hazards and dangers in the workplace and how to work safely
- Make sure every supervisor knows how to take care of health and safety on the job
- Create health and safety policies and procedures for the workplace
- Make sure everyone knows and follows the health and safety procedures
- Make sure workers wear and use the right protective equipment
- Do everything reasonable to keep workers from getting hurt or sick on the job

MODULE 1

## Module 1: Get on Board

Click on each picture to find out the duties of the Employer, Supervisor and Worker



MODULE 1

## Module 1: Get on Board

### Duties of the Supervisor

- Tell workers about hazards and dangers in the workplace and show them how to work safely
- Make sure workers follow the law and the workplace health and safety policies and procedures
- Make sure workers wear and use the right protective equipment
- Do everything reasonable to keep workers from getting hurt or sick on the job



MODULE 1

## Module 1: Get on Board

Click on each picture to find out the duties of the Employer, Supervisor and Worker



MODULE 1

## Module 1: Get on Board

### Duties of the Worker

- Follow the law and the workplace health and safety policies and procedures
- Always wear or use the protective equipment that your employer requires you to wear as instructed
- Work and act in a way that won't hurt you or any other worker
- Report any hazard you find in the workplace to your supervisor





MODULE 1

## Module 1: Get on Board



You should never have to be worried that you will get in trouble for asking a question or reporting a problem. It is against the law for your employer or supervisor to punish you in any way for complying with the OHSA or for asking your employer or supervisor to comply with OHSA.

This is called a “reprisal”. It is against the law for your supervisor or employer to threaten to punish or fire you for doing these things.

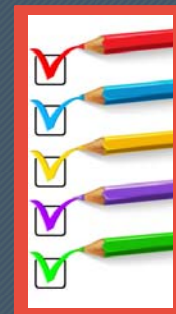
You also have the right to refuse to do unsafe work if you have reason to believe it puts you or a fellow worker in danger.

MODULE 2

## Module 2: Get In The Know

At the end of this module you will be able to:

- Explain that you have the right to know about workplace hazards
- Identify examples of workplace hazards
- Identify ways that your employer and supervisor can protect you from workplace hazards
- Describe other ways to find out about workplace hazards



MODULE 2

## Module 2: Get In The Know

### You need to know about Hazards

A hazard is anything in the workplace that could hurt you or the people you work with.

A hazard can take many forms. Sometimes more than one hazard can combine to make an even bigger hazard.

You need to know about the hazards in your workplace before you start working.



MODULE 2

## Module 2: Get In The Know

### The most common hazards in Ontario workplaces are:



#### 1) Repetitive Movements

Someone who bends all day, or someone who lifts heavy things over and over again, especially above the shoulders or below the knees.

#### 2) Workplace Violence

It can happen in many workplaces, especially to employees working alone - in healthcare facilities or to a healthcare worker in a home setting.



MODULE 2

## Module 2: Get In The Know

The most common hazards in Ontario workplaces are:



### 3) Slips, Trips and Falls

Can occur from things like spills, adverse weather conditions, cluttered work areas, raised platforms or carrying items that obstruct your view.

### 4) Chemicals, Fumes, Toxic Dust or Germs and Viruses in Labs and Healthcare workplaces

These are less visible hazards that can be related to your work. Its important to know these hazards. Sometimes they can make you sick immediately; other times you don't know you are sick until months or even years later.



MODULE 2

## Module 2: Get In The Know

### You need to know about Hazards

It is the **Employer's** responsibility to ensure that Supervisors have the experience and training to keep workers safe and healthy while they work.

It is both the **Employer's** and **Supervisor's** responsibility to inform workers of health and safety hazards.

Know **your role** and report hazards to your Supervisor/Employer as soon as possible so they can fix it.

### Do you know the answers to these questions? If you don't, ask!

- 1) What are the hazards of this job?
- 2) Is there any special training needed for this job?
- 3) Do I have the right protective equipment for this job?
- 4) If I have any questions about safety, who do I ask?

MODULE 2


## Module 2: Get In The Know

### Protecting you from Hazards

There are many ways that Trillium Health Partners can protect you from workplace hazards.

The best way is to get rid of or eliminate the hazard completely.



For example: replace a toxic cleaning chemical with one that is non-toxic.



Click on the dots on the hazard image to find out ways we can reduce hazards when we can't eliminate them altogether.

MODULE 2

## Module 2: Get In The Know



**1** **Reduce how long or how often you come in contact with the hazard**

- Do this by arranging the work differently so that you are not exposed as long. For example: vary the amount of time you spend on each segment of the whole task.

If the hazard still exists after trying to remove it or reduce it, your employer may require you to use protective equipment and/or protective devices.

Click the red X to close

MODULE 2


## Module 2: Get In The Know

### Protecting you from Hazards

There are many ways that Trillium Health Partners can protect you from workplace hazards.

The best way is to get rid of or eliminate the hazard completely.



For example: replace a toxic cleaning chemical with one that is non-toxic.



Click on the dots on the hazard image to find out ways we can reduce hazards when we can't eliminate them altogether.

MODULE 2

## Module 2: Get In The Know



**2** **OHSA states that your duty as a worker is to always wear or use the protective equipment that your employer requires**

- Even if the protective equipment is uncomfortable or you feel it slows you down; if OHSA or THP says you have to use it and wear it, you have to.

Machines or equipment that require guards on them must not have the guards removed or disposed of - its against the law. If the guard does not work do not use it and ensure it is replaced.

Click the red X to close



MODULE 2


## Module 2: Get In The Know

### Protecting you from Hazards

There are many ways that Trillium Health Partners can protect you from workplace hazards.

The best way is to get rid of or eliminate the hazard completely.



For example: replace a toxic cleaning chemical with one that is non-toxic.



Click on the dots on the hazard image to find out ways we can reduce hazards when we can't eliminate them altogether.

MODULE 2

## Module 2: Get In The Know



**3** Make sure you don't use any equipment or machine in a way that could hurt you or any other worker

- Do not play games, pranks or act in a way that may put others in danger.

Click the red X to close

MODULE 2


## Module 2: Get In The Know

### Protecting you from Hazards

There are many ways that Trillium Health Partners can protect you from workplace hazards.

The best way is to get rid of or eliminate the hazard completely.



For example: replace a toxic cleaning chemical with one that is non-toxic.



Click on the dots on the hazard image to find out ways we can reduce hazards when we can't eliminate them altogether.

MODULE 2

## Module 2: Get In The Know



### 4 Other ways to find out about hazards

- If your job involves using equipment your supervisor must instruct you on how to use it safely.
- Trillium Health Partners makes sure you know any policies and procedures about the work you do and the machines and equipment you use.
- THP is responsible for making sure that procedures are followed by everyone.

Click the red X to find out more

MODULE 2

## Module 2: Get In The Know



**Prevention begins with you!**

### Other ways to find out about workplace hazards

Learn how to operate equipment safely.

Learn about hazards through **training**

Training and information about chemical or hazardous material in the workplace can be found through Workplace Hazardous Materials Information System (**WHMIS**).

WHMIS training provides you with information and Material Safety Data Sheets (MSDS) instructions on how to use, store and get rid of hazardous materials safely.

Remember to report any hazards or "**near miss**" to your manager/supervisor and team lead right away!

MODULE 3

## Module 3: Get Involved

At the end of this module you will be able to:

- Explain your right to participate in all aspects of health and safety in the workplace
- Give examples of ways that you can participate in health and safety in your work
- Describe the roles of joint health and safety committees and health and safety representatives



**Health & Safety at Work**

MODULE 3

## Module 3: Get Involved



### Working Better Together!

The Occupational Health & Safety Act is all about knowing the health and safety duties of employers, supervisors and the worker.

**We all have to get involved!**

MODULE 3

## Module 3: Get Involved



The law requires employers who know about a hazard to try to reduce or eliminate it or make sure the workers are told how to deal with it.



The law requires supervisors who also know about a hazard, to explain to the workers how to deal with it.



The law requires workers to report any known hazards to their supervisor/employer.

You have a duty to speak up.

This includes identification and notification of equipment not working properly **BD1**

## Slide 116

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**BD1** Notification misspelt and missing period at the end of this sentence.  
Bukvic, Daniel, 07/04/2014



MODULE 3

## Module 3: Get Involved



### Get Involved to Keep your workplace safe!

- 1) Ask questions when you are not sure about something
- 2) You can become a worker member of the joint health and safety committee if selected by the workers you are representing or if selected by your union
- 3) Assist your health and safety representative or joint health and safety committee with health and safety inspections by pointing out possible hazards in your work area
- 4) Take your health and safety training seriously and put what you learn into practice in your job

MODULE 3

## Module 3: Get Involved

### Health & Safety Committees

A joint health and safety committee has to be set up at the hospital to meet compliance with the Occupational Health & Safety Act requirement for a committee.

The Joint Health and Safety Committees representing workers must regularly **inspect the workplace**.

Joint Health and Safety Committees have to have at least two people on them; the **workers or their union**. If any, pick one of them and the employer picks the other.

Workplaces with 50 or more workers, must have a committee of at least **four members** and at least half of the members have to represent workers.

### OHSA & Other Health & Safety Information

If you need help contact the Safety Specialist at your hospital site. As a second resource, you can also check the posted names of your Joint Health and Safety Committee members and speak with them.

If you can't find any of this information, talk to your supervisor.



MODULE 4

## Module 4: Get More Help

At the end of this module you will be able to:

- Explain your rights to refuse unsafe work
- Recognize that you can call the Ministry of Labour, without reprisal, if you report something unsafe to your supervisor or employer and they have failed to take action to address it
- Seek additional information about Health & Safety



MODULE 4

## Module 4: Get More Help

### Get More Help

The Ministry of Labour's job is to help prevent workplace injuries and illnesses by enforcing the OHSA and they want to know if there's a health and safety issue that hasn't been addressed, so there's a number that you can call. **Call: 1-877-202-0008**

You don't have to give your number when you call the Health and Safety Contact Centre.

It is against the law for your employer or supervisor to fire or punish you for complying with OHSA.

If you feel your employer is taking action against you for raising concerns about health and safety, you can discuss it with a union official (if you are a union member) or with the Ontario Labour Relations Board.

The Officer of the Worker Adviser provides free advice.

**Call: 1-855-655-6555**



MODULE 4

## Module 4: Get More Help

### Right to Refuse unsafe work

All workers have the right to refuse work if they have reason to believe it's dangerous. You can also refuse work if you have reason to believe the area where you are working is likely to **endanger you**, another co-worker or that you are in danger from workplace violence.

Tell your employer or supervisor as well as your health and safety representative that you think you are in danger and that you are not willing to do the work and why. The Supervisor will investigate.

Some workers such as: Nurses, firefighters and police officers cannot refuse work if the danger is a normal part of their job or if refusing work would put someone else in danger.

## Resources

<b>Ministry of Labour</b> Develops, communicates and enforces occupational health & safety requirements and employment standards. Develops, coordinates and implements strategies to prevent workplace injuries and illnesses and can set standards for health and safety training	1-877-202-0008  <a href="http://www.labour.gov.on.ca/">http://www.labour.gov.on.ca/</a>
<b>Worker's Health &amp; Safety Centre</b> An occupational health and safety training centre for workers, representatives, supervisors and employers	1-888-869-7950  <a href="http://www.whsc.on.ca/Home">http://www.whsc.on.ca/Home</a>
<b>Occupational Health Clinics for Ontario Workers</b> Six medical clinics located across Ontario that provide occupational health services and information	1-877-817-0336  <a href="http://www.ohcow.on.ca/">http://www.ohcow.on.ca/</a>
<b>Health &amp; Safety Ontario</b> Four health and safety associations that provide sector specific consulting, training, products and services	<a href="http://www.healthandsafetyontario.ca/HSO/Home.aspx">http://www.healthandsafetyontario.ca/HSO/Home.aspx</a>
<b>Canadian Centre for Occupational Health &amp; Safety</b>	<a href="http://www.ccohs.ca/">http://www.ccohs.ca/</a>
<b>Workplace Safety &amp; Insurance Board</b> Administers Ontario's no-fault workplace insurance for employers and their workers	1-800-387-0750 <a href="http://www.wsib.on.ca">www.wsib.on.ca</a>

## Health & Safety at Work



# Slips, Trips, and Falls Education



## About This Course

This is a mandatory education course as required by the Occupational Health and Safety Act of Ontario.

All employees are required to renew their Slips, Trips, and Falls education on an annual basis. This module will provide you with information on how to recognize potential workplace slips, trips, and falls hazards, preventative measures you can take to protect yourself in the workplace and the steps to take to report an incident.



Health & Safety at Work



## Module 1: Background

This module will introduce you to:

- The requirements of the Occupational Health and Safety Act; and
- Impact that Slips, Trips, and Falls have in the workplace.



Health & Safety at Work



## Legislation

In Ontario, employers are required by law to keep their workers safe. The following Acts and Regulations outline the responsibilities of employers as well as employees.

**Occupational Health & Safety Act:**

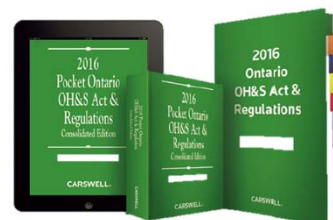
Employers must “take every precaution reasonable in the circumstances for the protection of a worker.” [Section 25(1)(h) and 27(2)(c)]

**Regulation for Health Care and Residential Facilities:**

Applies to a hospital as defined in the Public Hospitals Act (Reg. 67/93)

**Regulations for Industrial Establishments**

Section 11 requires floors and other surfaces used by any worker, to be kept free of obstructions, hazards and accumulations of refuse, snow or ice. (Reg. 851) Section 11





## Did you know

Canada-wide about **60,000** workers are injured annually due to falls.

About **17,000** occur in Ontario.

**1 in 6** *lost time injuries* in Ontario are caused by a fall

---

## Did you know

- What % of lost time injuries result from Slips, Trips, and Falls at Trillium Health Partners each year?



**20%**

## Slips, Trips, and Falls in the Workplace

- Slips, trips and falls are among the leading causes of injuries resulting in workers missing time at work in Ontario.
- They can occur in anywhere at anytime. The most commonly reported locations where incidents happen are:
  - Hallways and stairs (both indoor and outdoor)
  - Parking lots and driveways
  - Office environments
  - Entrance way mats

## Slips, Trips, and Falls

- **A slip** is a sudden sliding motion when the foot (or footwear) loses traction with the walking surface resulting in a loss of balance.
- **A trip** occurs when a foot or lower extremity hits an object and the upper body continues to move resulting in a loss of balance. This often happens when stepping down to a lower surface such as from a step to ground level.
- **A fall** occurs when you are too far off your centre of balance. Falls can occur at either:
  - the **same** level
  - to a **lower** level
  - Falls can result in critical injuries such as fractures, unconsciousness, permanent disability, or death.

## Did you know

Falls can result in critical injuries such as fractures, unconsciousness, permanent disability or death

### Most severe



Falls from heights

### Most frequent



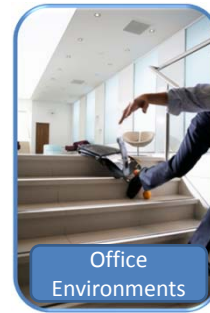
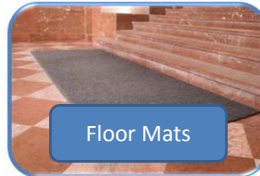
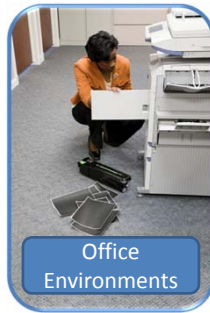
Falls on the same level

## Common Hazards

- A wet or contaminated floor surface
- Weather hazard such as snow or ice
- Poor lighting
- Loose, unanchored, or wrinkled rugs and mats
- Open cabinets or drawers
- Uneven surfaces
- Clutter such as equipment not stored properly
- Carrying too many objects which obstruct the view
- Surfaces with different traction

## Reported Locations

Slips, trips, and falls are most commonly reported in the following workplace areas:



## Prevention Strategies: **Avoid Combined Risks**

Your risk for a slip or trip is increased when you combine unsafe actions such as:

Doing this...	While also doing this...
Carrying a box	going up/down stairs
Texting on your phone	Walking
Climbing stairs	in poorly lit area
Stepping down onto	a wet or icy surface
Wearing proper footwear	walking on a slippery surface
Wearing wet/snowy boots	walking on a smooth surface

## Prevention Strategies- Walking Technique

- Take short deliberate steps, in which the mid-foot strikes the ground first, not the heel.
- Always centre the body over the feet. This allows you to ensure the mid-foot strikes the ground first, since most slips occur at the heel strike phase of gait.
- Walk whenever possible, don't run or rush. Take the time to be safe by slowing the walking pace.
- Change direction slowly when walking on slippery surfaces or look for a less slippery path if possible.
- Regularly inspect personal protective equipment such as treads on footwear



## Prevention Strategies- Proper Equipment

Make sure your footwear is appropriate for the task as per the **Hospital Footwear Policy**.

If you have been provided with Personal Protective Equipment (PPE), wear it for the tasks required as instructed, and as required under the Hospital Policy.

Regularly inspect personal protective equipment such as treads on footwear.





## Prevention Strategies- Carrying Technique



- Carry objects close to your body and below chest level, when possible, so you can see over or around what you're carrying.
- Carrying too many materials at once, or even smaller items in a way that will throw you off balance or obstruct your vision.....increases risk.
- Take the time to make more than one trip, ask for assistance, or use assistive devices (e.g. carts, dollies).



## Prevention Strategies- Environment

Situation	Hazard	Strategy
Black Ice or snow	Can look like wet pavement. Immediate entrances and stairs could be slippery from melted snow or ice.	Take extra care when walking.
Spilled Liquids	On a waxed shiny floor can be very difficult to see.	Clean up spills immediately or call for assistance. If available, place a 'wet floor' sign.
Wet Footwear	Can increase your potential to slip particularly if you are stepping to a smooth surface.	Walk slowly and carefully and wipe your feet on a floor mat if available, before stepping onto bare floors.
Icy or Snowy Surfaces	Can create a slipper surface and cause you to lose your grip or footing. These include slippery parking lots, roadways, sidewalks, slippery or wet stairs or floor.	Take extra care when getting out of your vehicle onto a snow or ice covered surface.
Dark conditions	Can cause you to misstep or not see a potential hazard.	Use caution when walking or climbing stairs in dark conditions. Turn on lights or use a flashlight.
Uneven pavement or walking surfaces	Watch out for uneven sidewalks, crosswalks and hazards such as potholes. Be aware of changes in friction of walking surfaces (e.g. walking from inside to outside, from snow to ice, from curb to road and from carpet to bare floor).	Slow down and take small careful steps if the surface is rough, cluttered, slippery or on an angle.
Unfamiliar locations	You may be unfamiliar with the surfaces.	Proceed with extra caution when unfamiliar with premises

## Prevention Strategies- Additional Tips



- Close desk and cabinet drawers
- Clear clutter/obstacles from pathways and observe good housekeeping practices
- Use a proper approved step stool for overhead reaching. Only use a ladder with proper training.
- Pick up/clean up items from the floor, when observed (ex: pens, paper, etc...)
- Use 'Wet Floor' signs and call for assistance for spills to be cleaned up



- Don't stand on a chair or boxes
- Don't climb shelves or racks
- Don't put frequently needed items on high shelves
- Don't use a ladder which is defective, remove it from use and report it to your Supervisor
- Use 'Wet Floor' signs and call 6500 for spills to be cleaned up
- Don't ignore hazards --- report them

## What Can You Do?



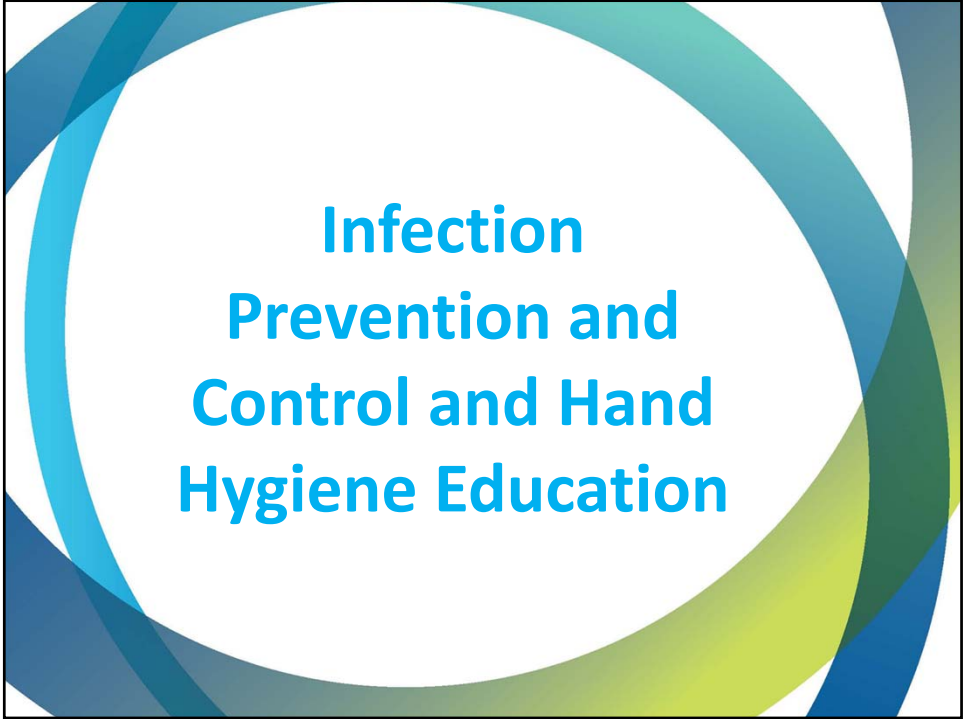
- **Educate yourself** about hazards which cause Slips, Trips, and Falls
- **Be aware** of your surroundings
- **Avoid hazards** when ever you can
- **Don't increase your risk** by combining hazardous behaviour
- Use **proper assistive devices**
- **Wear proper, well fitting, foot wear** in good condition
- **Follow any instructions** or training you are provided with
- **Report hazards** and incidents to your Supervisor and the incident reporting system (RL6)

## Reporting

**Incidents, concerns, and hazards** you encounter (even those not requiring lost time or medical attention) should be reported to your Supervisor and submitted through RL6 Incident Reporting System.

Examples can include, but are not limited to:

- Poor lighting
- Stair hazards
- Defective equipment
- Loose carpeting or mats
- Damaged flooring, spills
- Unsecured electrical/computer cords and wires
- Clutter
- Icy steps, entrances, parking lots
- Reckless behaviour



## Infection Prevention and Control and Hand Hygiene Education

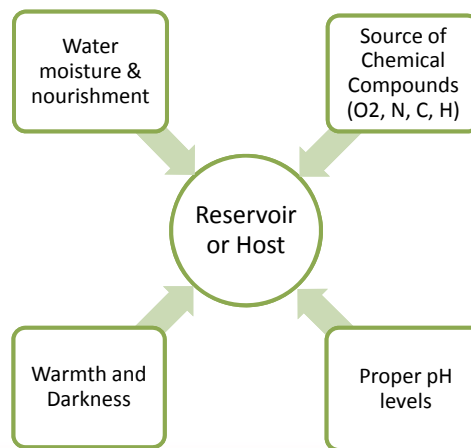
## Infection Control and Hand Hygiene Practices



## What is a Microorganism?

- Microorganisms are very small forms of life that require ideal physical and chemical environments to develop, grow and flourish.
- This can include a human host or inanimate object and can easily be spread through contact transmission

### How do microorganisms grow?



## Types of Microorganisms

### Normal Flora

Are non pathogens that live & grow in a certain area. Harmless or even beneficial to the body

### Bacteria

Pathogen and non pathogens. Pathogenic can cause serious infections. Treated with antibiotics. (e.g. Pneumonia, MRSA, C-Difficile, VRE, E-Coli)

### Viruses

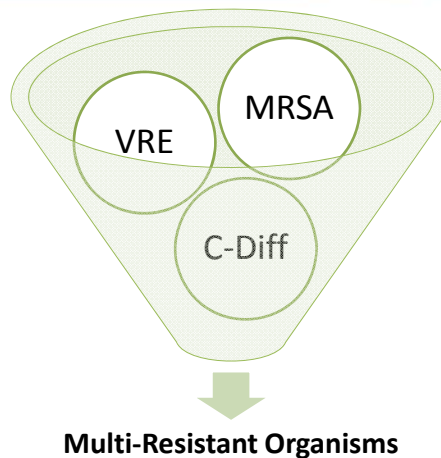
Smaller than bacteria. Grows inside of cells and take over cell. Not affected by antibiotics. Some can cause serious illness.(e.g. influenza, measles, rubella)

### Fungal

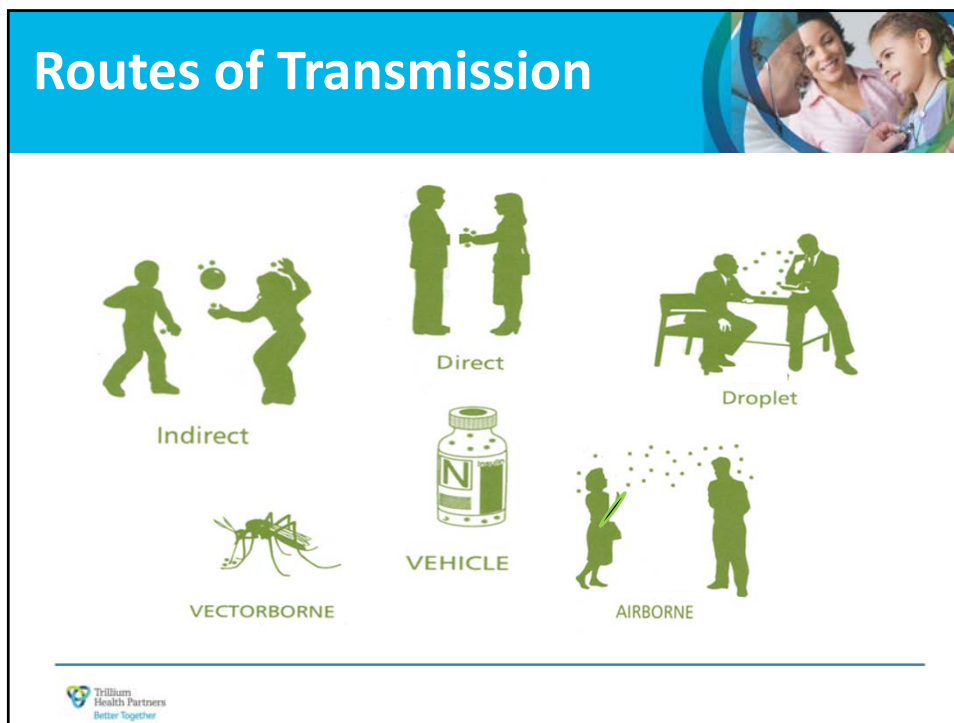
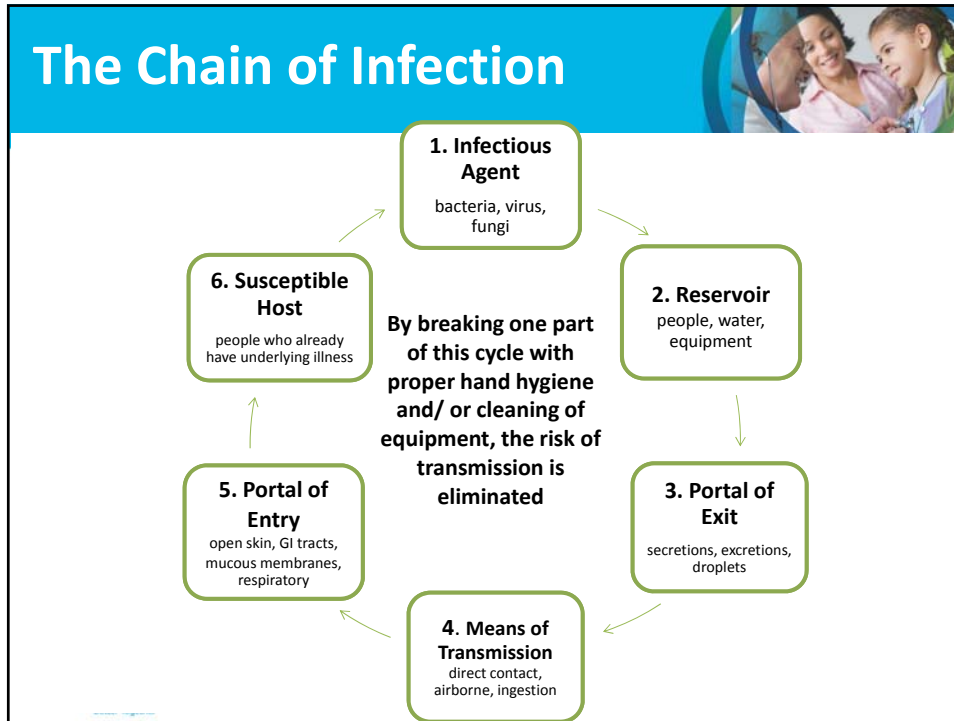
Grows on plants/animals and can be difficult to kill. Often starts growth in the lungs or on the skin (e.g. ringworm, athlete's foot, yeast infections)

## Most common Multi-Resistant Organisms (MROs):

- All 3 MRO's can be easily passed if proper hand hygiene is not performed and precautions not taken
- It is everyone's responsibility to ensure we eliminate the spread of infection







## Preventing Infection

The #1 way to prevent the spread of infection is in your hands: **Proper Hand Hygiene**



## Hand Hygiene

### Hand Sanitizing

This the **PREFERRED** method of hand hygiene before and after handling a patient, eating food, handling equipment, or moving between departments

A hospital grade sanitizer that is a minimum of 70% alcohol concentration will **KILL** most harmful agents

Must be rubbed for a minimum of 15 seconds or until dry. Not to be used on visibly soiled hands.

### Hand Washing

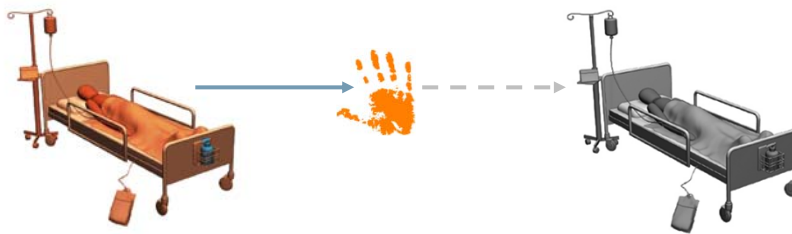
Is the **BEST** method of hand hygiene when coming into contact with any body fluids, your hands are visibly soiled, or handling equipment that is known to be contaminated.

If done correctly, **REMOVES** all visible soils and harmful agents from the surface of your skin; does not kill

Utilizes soap, water, and drying of hands; requires a minimum of 15 seconds under running water

## Hand Hygiene Stops Transmission

- Transmission of organisms by hands of health care providers between two patients can result in health care associated infections (HAIs)
- Hand hygiene with alcohol-based hand rub , **correctly applied**, kills organisms in seconds
- Hand hygiene with soap and water, **done correctly**, removes organisms



## 4 Moments of Hand Hygiene



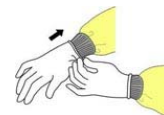
- 1) Can include direct AND indirect patient contact.
- 2) Can include wound care and contact with openings to the body such as nasal, mouth and eye care.
- 3) Can include exposure to blood, urine, feces, vomit and saliva.
- 4) Conducted immediately upon leaving patient environment

## Protective Measures

### Personal Protective Equipment (PPE):

- Specialized clothing or equipment worn by an employee for protection against infectious materials.
- This includes sanitizer, gloves, face and eye protection
- Personal Protection Equipment (PPE) is meant to protect NOT prevent

## Donning of PPE



## Doffing of PPE

The infographic illustrates the correct sequence for removing Personal Protective Equipment (PPE). It consists of a horizontal flow of six blue boxes, each containing a step name, with arrows pointing from left to right. Below each box are corresponding illustrations: 1. **Gloves**: Illustration of hands being pulled away from the wrists. 2. **Gown**: Illustration of a person pulling a yellow gown away from their body. 3. **Hand Hygiene**: Illustration of hands being washed with soap and water. 4. **Eyewear**: Illustration of safety glasses being lifted away from the face. 5. **Mask**: Illustration of a person pulling a mask away from their face. 6. **Hand Hygiene**: Illustration of hands being washed with soap and water. A small Trillium Health Partners logo is located at the bottom left of the infographic.

# Ethics

The word "Ethics" is centered in a large, bold, blue font within a white circular area. This central circle is surrounded by several overlapping, curved bands in shades of blue and green, creating a dynamic, abstract background.

## What is Ethics?

The simplest definition of ethics is “determining right from wrong.”

Ethics is about:

- Deciding **what** we should do,
- Explaining **why** we should do it, and
- Describing **how** we should do it.



Dr. Barbara Secker  
Joint Centre for Bioethics  
University of Toronto

## Ethical Principles

Principles are rules or beliefs that guide behavior.

In healthcare, four ethical principles are often referred to: autonomy, beneficence, non-maleficence, and justice.

There are also other ethical principles and values such as confidentiality, stewardship, utility, and disclosure (truth-telling) that may be relevant in healthcare situations.

- Autonomy (right to make one's own choices)
- Beneficence (doing good)
- Non-maleficence (avoiding harm)
- Justice (equity, fairness)



## An Example in Practice

**What:** We inform patients about their diagnoses and prognoses.

**Why:** The ethical principle that justifies this decision is autonomy – the right for individuals to choose what happens to them.

**How:** Disclosure of diagnoses and prognoses should be done in a respectful, private, compassionate and unrushed manner.



## Examples in Practice...

- A decrease in funding to the hospital has occurred
- Ethical Question: Should we lay off staff, close beds, reduce salaries or do something else?

Health Cost

Intervention

- You witness a manager being disrespectful towards a staff member.
- Ethical Question: Should you say or do something or not?

- A Patient suffers a stroke from which they are unlikely to recover.

- Ethical Question: Should life-sustaining treatment be continued or not?

Treatment

## Ethics Consultation

- Ethics consultations are carried out by trained ethicists from the Regional Ethics Program. The ethicist will help you to identify the ethical issue and work with you to find a resolution.
- For complex situations, the ethicist may participate or facilitate meetings with patients, family members, and teams.
- Generally, it is best to involve an ethicist early when the first “red flags” of uncertainty or conflict appear.

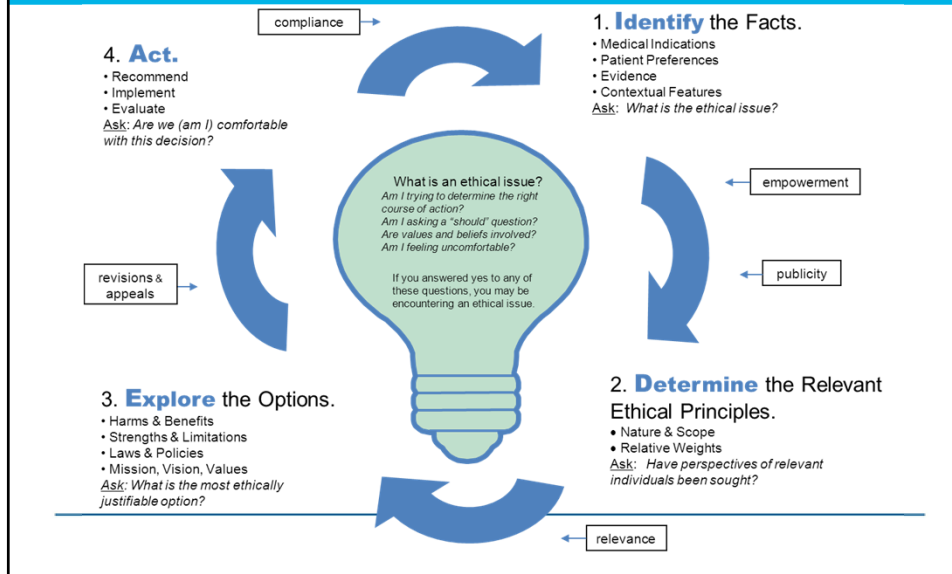


## IDEA Framework

- Trillium Health Partners has adopted the IDEA: Ethical Decision-Making Framework as a guide for making ethical decisions from the point of care to the boardroom. It is comprised of four steps and five conditions.

The IDEA Framework builds on the work of many others (Community Ethics Network; University of Toronto Joint Centre for Bioethics; Daniels & Sabin; Gibson, Martin & Singer).

## IDEA: Ethical Decision-Making Framework



## IDEA: 4 Step

The first letter of each step in this framework forms the acronym "IDEA."

- I** Identify the facts.
- D** Determine the relevant ethical principles.
- E** Explore the options.
- A** Act.

- Step 1: What is the ethical issue?
- Step 2: Have perspectives of relevant individuals been sought?
- Step 3: What is the most ethically justifiable option?
- Step 4: Are we comfortable with this decision?

## When to Contact the Ethics Program?

**Anyone with the organization, including patients, may contact the Ethics program. Please consider contacting the Ethics Program for support with any of the following:**

- ✓ If you are uncertain about what decision should be made (you are unsure about what the right thing to do is)
- ✓ If there are differences of opinion about what decision should be made (there are several options and you are unsure about which one to choose)
- ✓ If you are concerned that an unethical decision is being proposed or carried out
- ✓ If you would like to explore the ethical or legal aspects of a decision
- ✓ If you require assistance in development or review of an ethics-related policy
- ✓ If you wish to request an educational session on an ethics-related topic


**REFER TO BROCHURE FOR SPECIFIC CONTACT NAMES and NUMBERS**

## Additional Information

- Regional Ethics Program Brochure
- thpHub-> Departments-> Ethics



The screenshot shows the Trillium Health Partners thpHub website. The navigation menu includes 'STRATEGIC PLAN', 'DEPARTMENTS', 'EDUCATION & RESEARCH', 'POLICIES & PROCEDURES', 'MEDICAL EDUCATION', 'EMPLOYEE RESOURCES', 'LIBRARY', 'PEOPLE FIRST', and 'APPLICATIONS'. The 'DEPARTMENTS' menu is highlighted with a red box. Below the navigation, the page title is 'Ethics Program at Trillium Health Partners'. The main content area describes the role of the ethics program and includes a 'SCHEDULE' section with a calendar icon. A text box states: 'As of April 1<sup>st</sup>, 2016, the Ethics Program is offering a 7-day model of ethics service across the organization.' Below this, it mentions that an ethicist is available for consultation on Saturdays, Sundays, and statutory holidays between 0900 and 1700h.



## Accessibility for Ontarians with Disabilities Act, 2005 (AODA) and the Integrated Standards (IASR)

### Making Ontario Accessible

- The government enacted the **Accessibility for Ontarians with Disabilities Act in 2005**. It set out a clear goal and timeframe to make Ontario accessible by 2025.
  - Organizations and businesses have made great progress to reach that goal by training staff on accessible customer service, developing accessibility policies and multi-year plans, and making information and websites accessible.
  - **What is accessibility?** It simply means giving people of all abilities opportunities to participate fully in everyday life.
-

## Understanding the Law

- In this section you will learn about the five legislative components of Ontario's Accessibility laws.

Customer  
Service  
Standard

Employment  
Standard

Information &  
Communication

Transportation  
Standard

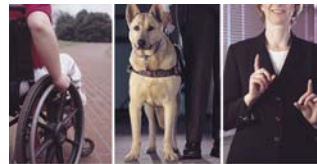
Public Spaces

## Accessible Customer Service



## What is Accessible Customer Service?

- Where **all people** are able to access our services free of barriers that may inhibit someone with a disability or impairment to fully participate in the activity or service being offered.
- At Trillium Health Partners, our 'customers' are the patients, visitors and families we serve on a daily basis.



## Examples of Physical Barriers



## Other Barriers

Can you think of examples of how these are barriers to people with disabilities?

Communication

Technology

Attitude

## Assisting those with a Disability

### Physical Disability

- Ask before you assist
- Be patient, receptive, and understanding
- Avoid touching any assistive device without permission

### Communication Disability

- Speak in a regular tone of voice
- Keep your questions short and simple;
- Clarify / rephrase if misunderstood; try communicating in the "mother language"

### Intellectual Disability

- Be supportive and patient;
- Consider using written language if verbal communication is difficult for the person
- Keep it simple; share one piece of info at a time

## Types of Impairments

### A person with Visual Impairments...

...has a reduced ability to see clearly

...usually has some degree of vision to assist them (i.e. tunnel, cataracts)

...may require assistance with their surroundings and require detailed directions

### A person with Hearing Impairments...

...may be hard-of-hearing, deafened, or culturally/orally deaf.

...may use sign language to assist with the communication process

...may utilize drawings, illustrations or key words when explaining information.

## Remember

- Treat a person with a disability / impairment the same as anyone else – be comfortable, relax and smile!
- Offer to assist an individual BUT don't insist – people with disabilities and impairments have various levels of independence and needs
- Don't raise your voice unless asked and don't be afraid to repeat or rephrase a statement / question



## Integrated Accessibility Standard Regulation: Training to Staff

Training is required as per AODA regulation as it relates to a person's duties and on the **Ontario Human Rights Code** as it relates to people with disabilities.

When the organization's accessibility policies change, organizations are also required to provide training.

Training must be provided to:

- All existing and new employees & volunteers
  - People who participate in developing our organization's policies
  - Other people who provide goods, services or facilities on behalf of the hospital
-

## Integrated Accessibility Standard Regulation

The Ontario Human Rights Code states that employers are required to meet the accommodation needs of employees with disabilities to the point of undue hardship.

- The **Employment Standard** builds on this requirement. It requires Trillium Health Partners to have processes in place to determine an employee's accommodation needs.
- 

## Integrated Accessibility Standard Regulation

The requirements applies to organizations with one or more employees in Ontario, and which provide goods, services or facilities to the public or to other organizations.

The requirements:

- Apply to paid employees
- Do not apply to volunteers and other non-paid individuals



## Accessible Formats & Communication Support

- Trillium Health Partners will consult with employees to determine their accessibility needs and how best to accommodate them
- Once hired, employees may request accessible formats and communication supports
- This requirement is similar to those in the Information & Communications Standard



## Accessible Formats & Communication Support

- An individual accommodation plan is a formal review process of workplace-related accommodations that is for an employee with a disability.
- The hospital works with the employee to find the appropriate accommodation that meets the individuals accommodation needs.





## Workplace Emergency Response

- Individualized emergency response information can help both employees with disabilities and the hospital be better prepared for a range of emergencies such as: fire, power outages or severe weather.
- For example, an employee who cannot hear a fire alarm will need to know how and when to safely exit the building in an event of a fire.



## Performance Management, Career Development & Redeployment

- Providing performance plan documents in **LARGE PRINT** to an employee with vision impairment
- Review an employee's accommodation plan to best determine whether the plan needs adjusting to improve his or her performance on the job
- Adjust accommodation support or update the plan with the employee to meet their new role or responsibilities in the event they are promoted or redeployed

## Return to Work Process



- At times, employees with disabilities may need to take time off work for a treatment, recovery or other reasons.
- The standard requires all employers to develop a process that supports employees who have been absent due to a disability and require disability-related accommodations when they return to work

## Information and Communication Standard

## Information & Communication Standards



For people without disabilities, technology makes things convenient. For people with disabilities, technology makes things possible.

The good news is that there is a solution to information and communication barriers through technology.

As long as they are set up right!

## Information & Communication Standards



When requested, Trillium Health Partners provides information and communication in an accessible format for people with disabilities.

- Alternatives to standard print are often referred to as **accessible formats** and ways to help communication between people are referred to as communication supports.
- Accessible formats and communication supports must be provided in a timely manner and at a cost that is not more than the regular costs charged to other people.

## Information & Communication Standards

**Some examples of Accessible Formats & Communication Support are:**

- Reading written information to a person directly
  - Text transcripts of audio or visual information
  - Hand written notes instead of spoken words
  - Information written in plain language
  - An electronic document formatted to be accessible for use with a screen reader
  - Large Print
- 

## Information & Communication Standards

### Exceptions to the Requirement

There may be instances where you are unable to convert requested information or communication.

For example: the technology to convert the information is not readily available.

The information may be lost in the conversation process and cannot be completed in a meaningful way, such as visual information or an x-ray.



## Information & Communication Standards

### Feedback Processes

Trillium Health Partners have external and internal feedback processes to receive and respond about how they provide service.

Under the Information and Communication Standard, feedback processes in place are accessible and include:

- Arranging accessible formats and communication supports upon request
- Notifying the public about the availability of accessible formats and communication support



## Information & Communication Standards

### Emergency Procedures, Plans or Public Safety Information

**Trillium Health Partners Emergency Procedures, Plans or Public Safety Information is available on our internal and external website.**

Emergency information include, but is not limited to:

- Emergency Plans and Procedures
- Maps, Warning Signs and Evacuation Routes
- Information you give the public about alarms or other emergency alerts



## Information & Communication Standards

### Accessible Website & Web Content

An organization's website is often a primary way it shares information to the public, that's why it is important that our website and web content is accessible.

Under the standard, Trillium Health Partners must conform with the International Web Content Accessibility Guidelines (WCAG) 2.0, as outlined in the standard.



## Transportation Standard



## Transportation Standard

### Prevent and Remove barriers for access transportation

The Transportation Standard sets out the requirements that will **Prevent** and **Remove** barriers to make it easier for people to access transportation.

Trillium Health Partners offers a shuttle bus service between the Mississauga Hospital, and Queensway Health Centre and Mississauga Hospital to Credit Valley Hospital.

The service runs  
Monday to Friday  
7:30 a.m. to 5:00 p.m.



## Transportation Standard

For the convenience of patients, staff, and visitors

The shuttle bus is accessible and equipped with a **hydraulic ramp** that provides access to person who requires assistive devices including **wheelchairs, scooters** and **walkers**.

Seating is also equipped with **arm rests**, and **seatbelts** to ensure safety.

### NOTE:

Our drivers are well trained in operating the hydraulic ramp and work with passengers with assistive devices.





## Public Space Standard

### Design of Public Space

Enhancements to accessibility in buildings will happen at a later date through Ontario's Building Code.

The Ontario Building Code, governs new construction and renovations in buildings.

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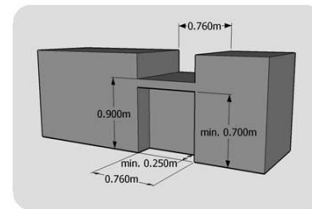


## Public Space Standard

### The Standard for the Design of Public Spaces Covers:

Services related elements like **service counters, fixed queuing lines** and **waiting areas**.

- Ensure having a minimum of one accessible counter when providing services to the public
- The Standard for the Design of Public Spaces **ONLY** applies to new construction and major changes to existing structures



## Public Space Standard

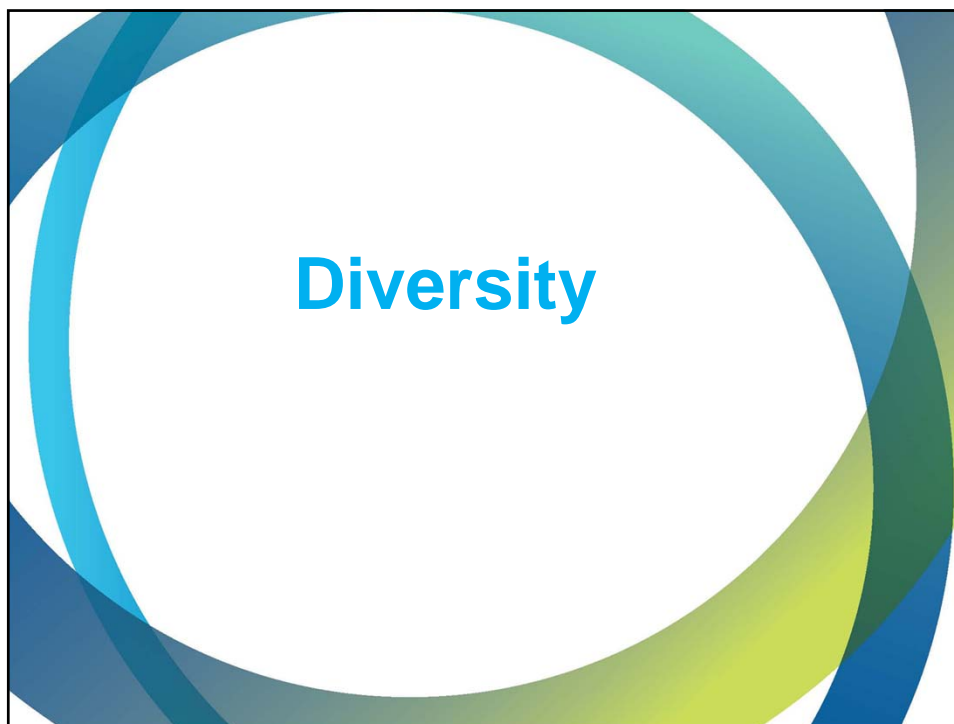


### The Standard for the Design of Public Spaces Covers:

#### Accessible Parking

Example:

- Ensure at least 4% of parking spaces in new lots (1 -100 parking spaces) are accessible parking spaces.



## What is Diversity?



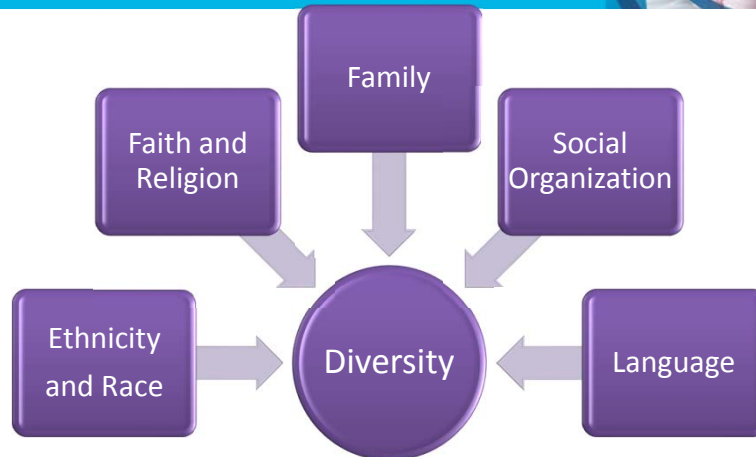
### **Diversity is:**

- Recognizing we live in a society that embraces a wide variety of people who coexist in practicing different beliefs, values and cultural systems

How do you differ from the person sitting beside you?



## What does Diversity look like?



Can you think of other examples of Diversity in our communities?



## Why be Diverse?

### Did You Know?

Trillium Health partners caters to a population in the Peel Region that has:

- a. a 40% immigrant base
- b. a 50% immigrant base
- c. a 60% immigrant base
- d. a 70% immigrant base

In 2006, the population of the Peel Region was **1,159,405** (last census in 2011, the population was at 1.3 million people). Of that, almost **700,000 people** are immigrants to Canada.



## Why be Diverse?



### Did You Know?

In 2006 census, how many people in the Peel Region viewed themselves as a visible minority?

- a. 30%
- b. 40%
- c. 50%
- d. 60%

In 2006, the population of the Peel Region was **1,159,405** (last census in 2011, the population was at 1.3 million people). Of that, almost **600,000** people saw themselves as visible minorities.



## Why be Diverse?



### Did You Know?

Excluding English, the next 3 top languages spoken in the Peel Region include:

- a. Urdu, Chinese, Portuguese
- b. Punjabi, Urdu, Chinese
- c. Punjabi, Portuguese, Polish
- d. Chinese, Polish, Punjabi

In 2006, other than English, Punjabi was the next highest spoken language in the Peel Region (**8% or 93,000 people**), followed by Urdu (**3.7% or 43,000 people**) and Chinese (**3.6% or 42,000 people**).

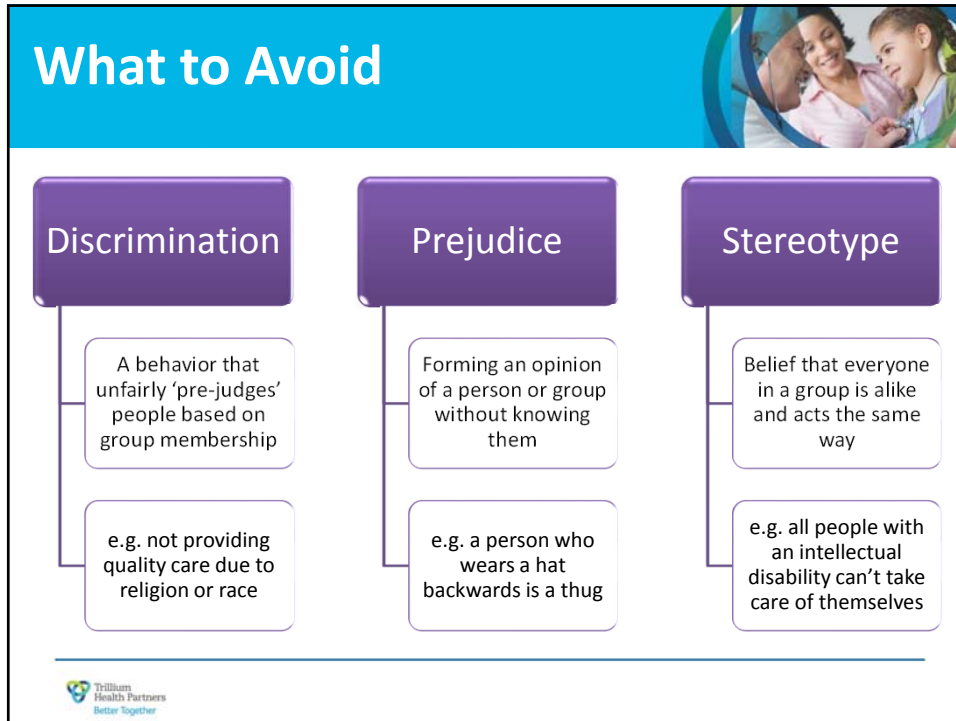






## French Language Services

- Trillium Health Partners Credit Valley Site and the Mississauga Site, Sexual Assault and Domestic Violence Program (SADV) have been identified by the LHIN as French Language Service providers within Peel Halton.
- Our partner, Summerville Family Health Team also offers Health Services in French.





## Footwear Facts

Footwear is a key part of our personal protective equipment program and all individuals working at the Hospital are required to wear appropriate footwear to protect against potential hazards in their work environment. To ensure compliance with the Occupational Health & Safety Act, and the Health Care and Residential Regulation, the use of appropriate footwear will apply to anyone who performs work activities at Trillium Health Partners.

Closed toe/closed heel shoes shall be the minimum standard for foot protection throughout the Hospital and footwear shall be suitable for the location/area in which the individual performs their work activities at the Hospital.

More information can be found in **Appendix B** of the Footwear Policy.

<b>Minimum Standard (Low Risk Environments)</b>		<b>Examples:</b>
<ul style="list-style-type: none"> <li>-Closed toe and closed heel</li> <li>-Non-slip resistant sole</li> <li>-Heel height no more than 2.5" (63.5mm)</li> </ul>	<ul style="list-style-type: none"> <li>-Low risk environment for foot injury</li> <li>-Typical office environment (not within patient care/clinical)</li> <li>- Low risk of sharps, needles, chemical or blood/ biological agents</li> <li>- No movement of heavy equipment /furniture</li> </ul>	
<b>Additional Requirements for Moderate Risk Environments</b>		<b>Examples:</b>
<ul style="list-style-type: none"> <li>- Feet must be entirely enclosed</li> <li>-Non-porous upper (i.e. no mesh running shoes)</li> <li>-Solid upper covering (i.e. no vents or holes on top or side of shoe)</li> <li>-Durable and impermeable to protect from chemicals, hot liquids, bodily fluids and sharps</li> <li>-Heel no more than 1.5" (38mm)</li> </ul>	<ul style="list-style-type: none"> <li>-Moderate risk environment for foot injury due to sharps, chemicals, hot fluids, blood/biological fluid splash</li> <li>- Crocs must be for healthcare closed toe and heel, no pores/holes on top</li> <li>Any person going through or working in (including offices located in) any of the following areas: <ul style="list-style-type: none"> <li>-Patient care/clinical areas</li> <li>-Laboratories</li> <li>-Diagnostic Imaging</li> <li>-Operating Room</li> </ul> </li> </ul>	
<b>Additional Requirements for High Risk Environments</b>		<b>Examples:</b>
<ul style="list-style-type: none"> <li>-Safety shoes with steel toe protection</li> <li>-Grade 1 footwear (CSA green tag)</li> </ul>	<ul style="list-style-type: none"> <li>-High risk environment for foot injury</li> <li>-Stores</li> <li>-Shipping/receiving</li> <li>-Construction sites</li> <li>-Facilities</li> <li>-Environmental Services</li> </ul>	

Title:	Footwear Protection – P&P INT
Folder Name:	Kernel Root\Trillium Health Partners\Corporate Policies and Procedures\Human Resources and Organizational Effectiveness\Integrated\Employee Health, Safety and Wellness\
Date of Issue:	8/5/2014
Policy Sponsor:	Tara McCarville VP
Next Revision:	8/5/2015

## 1. PURPOSE AND APPLICATION

This Policy and Procedure applies to all employees, Professional staff, volunteers, students, contractors and any others, hereinafter referred to as “Individuals”, who perform work activities at Trillium Health Partners (the “Hospital”). All “Individuals” are to abide by this Policy and Procedure.

The purpose of the Policy and Procedure is to:

- Ensure compliance with the Occupational Health and Safety Act, and the Health Care and Residential Facilities Regulation;
- Reduce the potential for foot injury due to inappropriate footwear; and
- Provide guidance on the selection of appropriate footwear.

## 2. GUIDING PRINCIPLES

This Policy and Procedure will ensure the Hospital’s compliance with the *Occupational Health and Safety Act*, the Health Care and Residential Facilities Regulation, the Canadian Standards Association (CSA) Standard Z195-02 and the Canadian Union of Public Employees (CUPE) and Ontario Nurses Association (ONA) Collective Agreements.

## 3. POLICY

- Footwear is a key component of an organization’s overall personal protective equipment program. All Individuals working at the “Hospital” are required to wear appropriate footwear for potential hazards in their work environment.
- The use of appropriate footwear will be a condition of employment for all Individuals at the “Hospital.”
- It is recognized that different kinds of hazards exist, and proper selection of footwear is essential to avoid a foot injury.
- Footwear shall be suitable for the location/area the Individual performs their work activities at the “Hospital.”

## 4. PROCEDURE

- A risk assessment may be conducted by Employee Health Safety & Wellness (EHSW) in conjunction with the Manager/Supervisor to identify hazards and determine the most appropriate footwear.
- Managers/Supervisors have the right to determine footwear requirements that exceed this Policy and Procedure.

## Trillium Health Partners – Policies & Procedures

Title:	Footwear Protection - P&P INT
Folder Name:	Kernel Root\Trillium Health Partners\Corporate Policies and Procedures\Human Resources and Organizational Effectiveness\Integrated\Employee Health, Safety and Wellness\

- Closed-toe and closed-heel shoes shall be the minimum standard for foot protection throughout the “Hospital.”
- Hospital employees required to wear CSA approved Grade 1 footwear for high-risk areas will receive an annual reimbursement, as per the CUPE collective agreement.

### ***Minimum Requirements for Footwear – Please also See Appendix B***

#### Direct Patient Care, Clinical Areas and Laboratories Footwear Criteria:

- Heel up to 1.5 inches (38mm).
- Minimum of 1/8 inch (5mm) thick flexible slip resistant sole.
- Shoes must be maintained in good condition.
- Closed toe and heel with solid upper covering (no holes on the top or side of the shoe).
- Shoe material must be impermeable to chemicals, hot liquids and sharps.
- Departments and/or clinical areas where splashes and spills of body fluids are anticipated, shoe covers should be worn and shall be removed or changed when soiled or leaving the department and/or clinical area.

#### Office and Clerical Areas Footwear Criteria:

- Heel up to a height of 2.5 inches (63.5mm).
- Flexible non-slip sole
- Shoes must be maintained in good condition

#### Maintenance, Environmental Services, Shipping/Receiving and Construction Footwear Criteria:

- Footwear must comply with CSA Standard Z195-02.
- Grade 1 footwear (CSA green tag)
- Footwear must be constructed with a puncture resistant sole.
- Individuals working around live electrical conductors shall wear safety boots with a sole that provides electrical shock resistance (CSA white tag).
- The Manager/Supervisor may specify other footwear requirements based on specific hazards (e.g. static dissipative, chainsaw protection).

## **5. RESPONSIBILITY**

### **Senior Management**

- Provide both resources and support for the Footwear Protection Policy and Procedure.
- Review and approve the Footwear Protection Policy and Procedure.

### **Manager/Supervisor**

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- Shall determine appropriate footwear for their area of responsibility.
- Advise Individuals as to footwear requirements for their department and/or clinical area.
- Enforce footwear protocol at all times.

### Individuals associated with Trillium Health Partners

- Wear appropriate footwear at all times, as outlined in this Policy and Procedure.
- Maintain footwear in good condition, and replace when necessary

### Employee Health Safety & Wellness

- Monitor safety standards for footwear, reviewing both legislative and industry standards.
- If requested, assist managers in the selection of appropriate footwear based on potential hazards from an assessment.
- Provide both resources and support for the Personal Protective Equipment Policy.
- Review and approve the Personal Protective Equipment Policy.

### Joint Health and Safety Committee

- Review the Personal Protective Equipment Policy.
- Assist the “Hospital” in identifying workplace hazards related to footwear safety.

**\*\*\* Any fines from the Ministry of Labour for Individuals resulting from any infractions related to this Policy and Procedure will be the sole responsibility of the Individual named in the offence. \*\*\*\***

## 6. EDUCATION/COMMUNICATIONS

Employees must receive documented training for all personal protective equipment (PPE) (i.e. Footwear) to be worn for the department and/or clinical area upon hire or if there are changes in the department and/or Program. This shall include:

- when PPE (Footwear) is required to be worn;
- where PPE (Footwear) should be worn; and
- proper care, cleaning, storage and replacement of PPE.

## 7. REFERENCES

- *Occupational Health and Safety Act*
- Regulation 67/93 for Health Care and Residential Facilities – Personal Protective Equipment
- Canadian Standards Association Standards – Classes of Protection
- CUPE Collective Agreement
- ONA Collective Agreement



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- Operating Room Nurses Association of Canada (ORNAC) Standards for Perioperative Registered Nursing Practice

**8. RELATED POLICIES**

- Code of Conduct - POL INT
- Dress Code for the OR - POL
- Personal Protective Equipment - PRO

**9. APPROVED BY**

21/07/2014 VP Strategy, People and Corporate Governance  
05/05/2014 JHSC's

**10. SUPERCEDES**

2008/02/29 CVH Footwear Policy Sept, 2011

Policy Author: Manager Employee Health Safety & Wellness

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### APPENDIX A

#### DEFINITIONS AND ACRONYMS

- **CSA:** Canadian Standards Association
- **CSA Grade 1 Footwear:** a shoe or boot with a protective toe that can withstand impacts up to 125 Joules (comparable to a 22.7 kg (50 lb) weight dropped from 0.6 m). Sole puncture protection is designed to withstand a force of not less than 1200 Newtons (270 lbs) and resist cracking after 1.5 million flexes.
- **Coefficient of Friction:** a term of reference that refers to the 'slipperiness' of a floor surface. A surface having a coefficient of friction of 0.5 or higher is considered to be a slip resistant surface.
- **CUPE:** Canadian Union of Public Employees
- **ONA:** Ontario Nurses' Association
- **PPE:** Personal Protective Equipment
- **Professional Staff:** Medical Staff, Dental Staff, Midwifery Staff and members of the Extended Class Nursing Staff who are not employees of the Hospital.
- **Protective Box Toe:** a component which, when incorporated into a boot provides protection against impact at the toe of the boot.
- **Protective Footwear:** a boot or shoe that provides protection from injury as defined in the CSA Standard CAN/CSA – Z195.1-02
- **Protective Sole:** a safety feature that provides puncture protection to the sole of the boot

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**APPENDIX B**

**MINIMUM REQUIREMENTS FOR FOOTWEAR**

<b>RISK</b>	<b>Potential Hazards</b>	<b>Appropriate Footwear</b>
<b>LOW</b>	<ul style="list-style-type: none"> <li>• Typical office environments.</li> <li>• Clinics with little risk of splashes of chemical or biological agents and needles or other sharps are not used.</li> <li>• Heavy materials, heavy equipment or furniture are not handled or moved</li> </ul>	<ul style="list-style-type: none"> <li>• Individuals should use good judgment with respect to the selection of footwear appropriate for the work environment.</li> </ul>
<b>MODERATE</b>	<ul style="list-style-type: none"> <li>• Typical patient-care or clinical areas</li> <li>• Typical laboratories</li> <li>• Needles or other sharps may be used</li> <li>• Blood or biological fluid splashes or sprays may occur</li> <li>• Chemicals may be handled in controlled settings (e.g. in fume hoods or on lab bench tops)</li> <li>• Floor cleaning materials or tracked in water that may cause the floor to be slippery.</li> <li>• Food handling areas</li> <li>• Toe impact protection is not required (i.e. there is little risk during work activities of dropping a heavy object onto the toe)</li> <li>• Ankle protection is not required (i.e. there is little risk during work activities of an</li> </ul>	<p>The footwear should have the following characteristics:</p> <ul style="list-style-type: none"> <li>• Well-fitting shoe in which the foot is securely placed and entirely enclosed. Sandals and gardening shoes are prohibited.</li> <li>• The sole is made of non-slip material.</li> <li>• The heel is low to moderate.</li> <li>• The shoe material must be durable and impermeable to protect from chemicals, hot liquids, or sharps.</li> <li>• Examples of appropriate footwear include non-porous running/walking shoes and flat street shoes. Individual departments/clinical areas may specify additional requirements for footwear.</li> </ul>

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<b>RISK</b>	<b>Potential Hazards</b>	<b>Appropriate Footwear</b>
	object striking the ankle).	

<b>RISK</b>	<b>Potential Hazards</b>	<b>Appropriate Footwear</b>
<b>HIGH</b>	<ul style="list-style-type: none"> <li>• Handling heavy materials, heavy equipment</li> <li>• Moderate to large volumes of hazardous substances are handled</li> <li>• Construction sites and typical maintenance work (including electrical installation or repair)</li> <li>• Oil or acids may be used or spilled</li> <li>• Large quantities of chemical substances are handled or dispensed</li> <li>• Sharp objects (nails, wire, tacks, scrap metal, broken glass) are present</li> <li>• Maintenance Department functions</li> </ul>	<ul style="list-style-type: none"> <li>• All footwear must comply with CSA Standard Z195-(latest version) and must be a Grade 1, safety shoe/boot. The sole must be oil and acid resistant.</li> <li>• Green Patch safety boots must be worn where ankle injury is likely (e.g. construction sites).</li> <li>• Safety shoes or boots with a white patch (electrical shock resistance) are required where there is a potential for exposure to live electrical conductors.</li> </ul>