Safety in the Workplace

WRH recognizes health and safety as a vital component in achieving its vision, mission and values. It is committed to providing safe and harm free care to all patients and a safe work environment for all employees. When faced with a threat to our employees’ health and safety, WRH will take action for the employees’ protection and not wait for scientific certainty.

Safety is everyone’s responsibility. Every staff member and student, regardless of the department in which they work, is responsible for patient safety. All employees are responsible for working safely, reporting hazards and unsafe conditions, and taking all reasonable measures to protect themselves at work.

Rights and Responsibilities

The Occupational Health and Safety Act describes the rights and duties of all those in the workplace, including the employee and the employer. It was designed to provide guidelines about how to work safely in the workplace.

You have a RIGHT to:
- A safe working environment
- Training to work safely
- Be informed of hazards
- Refuse unsafe work
- Ask questions about safety

You have a RESPONSIBILITY to:
- Be knowledgeable about Occupational Health & Safety
- Report any actual or potential health and safety hazards
- Wear appropriate personal protective equipment
- Follow the policies and procedures set in place

An incident is an unsafe event in the workplace that has resulted or could have resulted in harm to people or property if circumstances had been slightly different.

The most common types of health & safety incidents that may occur in a hospital setting are:
- Slip and falls
- Moving and lifting injuries (i.e. strains and sprains)
- Being struck by or striking against objects
ALL work related accidents and/or incidents involving a nursing student must be reported immediately to your instructor and the Most Responsible Person (MRP) on the unit.

<table>
<thead>
<tr>
<th>Accident / Incident Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Seek first aid if necessary.</td>
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<tr>
<td>2. Notify your instructor and MRP on the unit</td>
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<tr>
<td>3. Complete an Incident Investigation Report with your instructor/advisor</td>
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<tr>
<td>4. Work with MRP to complete an Unusual Occurrence Report form using Risk Monitor Pro</td>
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</tbody>
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**Reporting Unsafe Conditions**

- If you identify an actual/potential hazard, consult your Instructor and MRP
- Your concern will be investigated and recommendations will be made

**Sharps**

- A sharp is defined as anything capable of cutting or penetrating the skin or any part of a worker’s body (i.e. needles, knives, scissors, broken glass)
- When handling a sharp, consider what would be the safest method for handling the item, do you need to communicate to others around you the presence of the sharp, and what is the best method to dispose of the item so that no one will be injured by it.
- Discard a sharp IMMEDIATELY after use into the closest available sharps container
- Use a hemostat to remove scalpel blade(s) – DO NOT use your fingers
- NEVER recap
- All sharps containers should be sealed and replaced when ¾ full (DO NOT overfill) and placed in the grey tote in the dirty utility room – replace with an empty container IMMEDIATELY
- If you find a sharp that has been inappropriately disposed of, immediately isolate the area and get assistance. Your instructor/MRP should be alerted to the improper disposal of sharps immediately
- Large amounts of broken glass should be placed in a cardboard box, sealed and labeled accordingly
Potential for Needle-Stick Injuries

Examples of incorrect practices that may result in needle stick injuries include:

- Not properly securing the safety cap on a Safety Engineered needle after use
- Losing track of a needle (ie. leaving a needle on a patient’s bed)
- Not immediately placing a used sharp in the sharps container
- Not treating a needle with care and forgetting that it is a hazardous device
- Pushing a sharp into a sharps container that is too full or that has an item jammed in the flap of the lid
- Not communicating to nearby co-workers of actions involving the use of a sharp

Needle-Stick Injury Protocol

1. If the skin is broken, let the wound bleed freely
   – DO NOT apply direct pressure on the site
2. Clean the wound with antiseptic or soap & water. Apply a band aid on small wounds.
3. Notify your Instructor/MRP
4. IMMEDIATELY seek medical attention
   – Go to the MET Emergency Department for treatment
5. Consult your instructor for completion of an Incident Investigation Report.
   With your MRP, a Risk Monitor Pro incident will also need to be filled out.
Moving & Lifting Items

To avoid injury from moving and lifting items, factors to consider include:

- How much you can lift
- Size and shape of object
- Weight distribution of item
- Distance to be moved

You may need to ask for help, use a cart, clear the area or pathway, and/or secure moveable parts.

When moving and lifting items, remember to:

1. Assess the weight of the object
2. Firm grip on object
3. With feet shoulder width apart, use your legs to lift the object
   - avoid twisting
   - keep the object close to your body
   - keep your head up (don’t look down)
4. Using your legs, keep a straight back and lower the item to the ground
Appropriate Footwear

All WRH staff, students, and volunteers must wear safe and appropriate footwear. Examples of appropriate footwear in Patient Care Areas and Labs include, but are not limited to, the following:

Examples of an acceptable type of “croc” in Patient Care Areas only, (Note: Not to be worn in Labs and any other areas where the potential for exposure to physical, chemical and/or biological contaminants is higher):

Unacceptable Footwear

Examples of unacceptable footwear in Patient Care Areas and Labs include, but are not limited to, the following:
**Latex Sensitivity/Allergies**

- Symptoms include: dry, flaky, or itchy skin, a rash, or hives
- Advise your instructor immediately if you experience symptoms of a latex allergy
- Areas of WRH currently designated as “Latex-Safe” include ED, Surgery 1 (8N), L&D, NICU, Family Birthing Centre, Oncology, Medicine and Respiratory Care
- A list of latex-containing products within the hospital is available through the Materiels Management Department

**Scent/Fragrance Policy**

- A Scent/Fragrance Policy has been implemented due to health concerns arising from exposure to scented products
- The aim of the policy is to provide a scent free environment for all employees, patients and visitors
- Please limit the use of strong perfumes, colognes, hand lotions, soaps, and hair spray while in the workplace

**Workplace Violence & Harassment**

The Occupational Health & Safety Act states that an employer has the obligation to keep workers safe from workplace violence and address workplace harassment.

WRH is committed to providing a safe and secure work environment, free from violence, threats, bullying, intimidation and harassment. Threats, threatening behavior or acts of violence against employees, members of medical/dental professional staff, patients, clients, visitors, residents, affiliates (including students and volunteers) or other individuals on WRH properties, will not be tolerated by WRH.

WRH’s Workplace Violence/Harassment Response Protocol Policy provides more information on what workplace violence, harassment, and bullying are and the protocol for addressing these issues. The policy can be found on the WRH Intranet Policy Library.

**What to Do If You Experience Threatening or Violent Behaviour**

You should immediately report any behaviour you witness which you regard as threatening or violent to your instructor and the most responsible person (MRP) on the unit.
**What to Do If You Experience Workplace Harassment**

Any incidents of workplace harassment or workplace bullying should be immediately reported to your instructor and the most responsible person (MRP) on the unit.

**Domestic Violence**

The hospital acknowledges that domestic violence doesn’t just happen at home and can cross over into the workplace. If WRH becomes aware, or ought reasonably be aware of domestic violence that would likely expose a worker to physical injury in the workplace, we will take every precaution reasonable to protect the worker.

**Provide Information to a Worker**

Under the OHSA, employers are obligated to provide information to a worker to protect their health & safety including information about individuals they may encounter in the course of their work that may be violent and/or expose the worker to physical injury.

**Right to Refuse Unsafe Work**

A worker may refuse to work or do particular work when they have reason to believe workplace violence is likely to endanger them. Promptly report any such circumstances to your instructor or MRP and complete a Risk Monitor Pro report. While they investigate the circumstances, you will remain in a safe place that is as near as reasonably possible to your assigned work area.

**Confidentiality**

WRH understands the sensitivity and confidential nature of the information gathered when reporting an incidence of violence or harassment and has developed confidentiality procedures that recognize and respect the privacy of all parties involved.
### Guiding Definitions of Workplace Violence & Harassment

| Workplace Violence | - The *exercise* of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker; and/or  
| | - *An attempt to exercise* physical force against a worker, in a workplace, that could cause physical injury to the worker. |
| Workplace Harassment | - Engaging in a course of vexatious comment or conduct against a worker, in a workplace, that is known or ought reasonably to be known to be unwelcome. |
| Workplace Bullying | - Conduct which is known, or ought reasonably to have been known, would undermine another individual’s self-esteem and damage that individual’s self confidence including, but not limited to the following behaviors when directed at another individual or group of persons:  
- Sudden and unpredictable angry outbursts  
- Rude or abusive comments or conduct  
- Unjust, persistent criticism of a person, especially in the presence of others  
- Belittling of a person’s opinions, especially in the presence of others  
- Yelling at or using profanity towards someone  
- Spreading false and malicious rumors, gossip or innuendo  
- Purposefully excluding or isolating someone from normal work-related interactions required to perform the job |
INFECTION PREVENTION AND CONTROL

Windsor Regional Hospital believes that Infection Prevention and Control is vital for our patient safety. As a result, the hospital has adopted a hand hygiene campaign supporting the fact that hand hygiene is the single most effective way to prevent health care-associated infections and the spread of antimicrobial resistance organisms.

All staff and visitors are asked to clean their hands when entering the hospital. There are two methods of performing hand hygiene. This can involve washing with soap and water or using Alcohol-Based Hand Rub (ABHR).

Hand washing with soap and water is recommended when your hands are visibly soiled and/or you have used hand sanitizer a maximum of 10 times. If you should develop any sensitivity to the alcohol based hand sanitizer, please advise your instructor.

**How to Hand Wash: (Method to be used if hands are visibly soiled)**

1. Wet hands with warm running water
2. Apply soap
3. Lather soap for 15 seconds
4. Rinse thoroughly under running water
5. Pat hands dry with paper towel
6. Turn off water using paper towel

**How to Use Alcohol-Based Hand Rub: (Preferred Method)**

1. Apply 1 to 2 pumps of product to palms of dry hands
2. Rub hands together palm to palm, between and around fingers, including the back of each hand and fingertips
3. Rub hands for 15 seconds until product is dry
4. Do not use paper towels
4 Moments For Hand Hygiene

Windsor Regional Hospital also follows the Ontario Ministry of Health and Long-Term Care initiative of “4 Moments for Hand Hygiene”. Regular Hand Hygiene audits are conducted throughout the hospital to ensure that all healthcare providers (including students) are maintaining a safe environment for our patients.

Standard Precautions

Windsor Regional Hospital believes in transparency of Hospital Acquired Infection Rates. This is also now a ministry-mandated reportable statistic.

In order to keep these numbers down, every patient is assessed upon admission. As a result of this assessment and other specific physical conditions, patients may require isolation.

It is your responsibility to be aware of your patients’ status at all times.
Precaution Cards

The following isolation precaution cards are used at Windsor Regional Hospital.

Contact Transmission requires direct skin to skin contact and physical transfer of microorganisms from an infected or colonized patient. Transfer occurs by: Patient to Patient contact; Patient to Staff contact and Patient to contaminated equipment or environment contact.

Example: MRSA, VRE, Clostridium difficile

Droplet Transmission involves contact of the conjunctivae or the mucous membranes of the nose or mouth of a susceptible person with large particle droplets (larger than 5 µm) containing microorganisms. These droplets are generated from a patient by coughing, sneezing, talking or during bronchoscopy or suctioning.

Example: Meningitis, Pneumonia
Some organisms require both droplet and contact precautions to be in place.

Example: RSV, Influenza

Airborne transmission occurs when a patient known or suspected to be infected with microorganisms transmits secretions by airborne droplet nuclei (5 microns or smaller) whereby the microorganisms stay suspended in the air and that can be dispersed widely by air currents within a room or over a long distance.

Example: Tuberculosis, Measles, Chicken Pox
Personal Protective Equipment

Examples of Personal Protective Equipment (PPE) include gloves, gowns, masks, hair nets, rubber gloves, latex gloves, dust masks, hearing protection, and goggles.

To protect yourself when using WHMIS or Non-WHMIS products, information regarding use of personal protective equipment is available on the product's supplier label and the Materials Safety Data Sheet (MSDS).

For infection control purposes, the required Personal Protective Equipment (PPE) is outlined on each of the isolation signs.

There is also a preferred way for donning and doffing (removing) PPE:

**Steps for Donning PPE:**

1. Perform Hand Hygiene
2. Put on Gown
3. Put on Mask
4. Put on Eye Protection (Goggles or Face Shield)
5. Put on Gloves

**Steps for Doffing (Removing PPE):**

1. Remove Gloves
   - Outside of gloves is contaminated!
   - Avoid touching the outside of gloves when removing
2. Remove Gown
   - Outside of gown is contaminated!
   - Avoid touching the outside of the gown when removing
3. Perform Hand Hygiene
4. Remove Eye Protection (Goggles or Face Shield)
5. Remove Mask
6. Perform Hand Hygiene