

TOTAL COMMUNICATION ENVIRONMENT

Section C: Health and Safety

Policies and Procedures

Revised: 2013

.TCE

Section C: Health & Safety

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C.1 HEALTH AND SAFETY POLICY

TCE is committed to the health and safety of our employees and the prevention of occupational injuries and disease. It is our responsibility to effectively manage and communicate our policies and procedures regarding health and safety and maintaining compliance with the Occupational Health and Safety Act and related regulations.

To this end, every employee is responsible for working in a safe and healthy manner and promoting a secure and hazard free environment.

Total Communication Environment

- Recognizes that an essential part of our business is dependent on providing a safe and healthy work environment where every individual has been empowered to participate in our health and safety program.
- Recognizes and will take every reasonable step in ensuring a healthy and safe work environment.
- Recognizes and supports the efforts of our Health and Safety Representatives and the JHSC
- Recognizes that accidents and illnesses can be controlled, reduced, or eliminated.
- Recognizes the responsibility of both workers and supervisors to work safely and report all unsafe working conditions and ensure that safe and healthy working conditions are maintained.
- Recognizes all applicable government guidelines, standards, regulations and acts are a minimal requirement and we will meet or exceed these requirements.
- Recognizes that the evaluation of everyone employed by TCE must be measured by their health and safety performance.
- Recognizes an Early and Safe Return to Work Program as promoted by the WSIB.
- Firmly believes that the incorporation and implementation of proven health and safety principles and practices are an effective way of providing responsible management.

Signature
TCE Executive Director

Date

Signature
TCE Board Representative

Date

C.1.1 HEALTH AND SAFETY DUTIES AND RESONSIBILITIES

PROGRAM SUPERVISORS

The Program Supervisors of **Total Communication Environment (TCE)** are responsible for:

- Ensuring that workers work in a manner and with the protective devices, measures and procedures required by the Ontario Occupational Health and Safety Act (R.S.O. 1990 C.0.1) and associated regulations.
- Ensuring that workers wear and use protective equipment, devices and/or clothing as required.
- Advise workers of the existence or any potential or actual danger to the health and safety of the worker of which the Program Supervisor is aware.
- Where required, provide a worker with written instructions as to the measures and procedures to be taken for the protection of the worker.
- Take every precaution reasonable in the circumstances for the protection of the worker.
- Ensuring that the health and safety policies and procedures are communicated to employees during their orientation.
- Ensuring that employees work in a safe and healthy manner using the prescribed measures and procedures, and protective devices and that the necessary equipment, materials and protective devices required will be provided and maintained in good condition.
- Ensuring that the continuous improvement in health and safety is the highest priority.
- Ensure that yearly evaluations will be completed to measure workers knowledge of health and safety performance specific to work practice and procedures.
- Ensuring family, volunteers, students, visitors and general public are informed of the necessary health and safety policy and procedures and expected to comply as required.

EMPLOYEES

Employees of **Total Communication Environment (TCE)** are responsible for:

- Working in compliance with the Ontario Occupational Health and Safety Act (R.S.O. 1990 c.0.1) and associated regulations.
- Use and wear the protective equipment devices that is required to be worn.
- Report to the employer or supervisor the absence or defect in any equipment or protective device of which the worker is aware and which may endanger himself/herself or any other worker.
- Report to the supervisor any contravention of the Ontario Occupational Health and Safety Act (R.S.O. 1990 c.0.1) and associated regulations or the existence of any hazard of which he/she is aware.
- Actively participating in the identification of workplace hazards with the aim of continuously improving the work environment.
- Ensuring their familiarity with the health and safety program.
- Participate in yearly evaluations to review the knowledge of health and safety policies and procedures and to specific work practices and procedures.
- To orient new employees with current health and safety practices and home specific procedures.
- To inform the family, volunteers, students, visitors and the general public, of TCE health and safety policy and their expected compliance while on the TCE property.

In addition, no worker shall

- Remove or make ineffective any protective device required by the regulations or by the employer, without providing an adequate temporary protective device and when the need for removing the protective device has ceased, the protective device shall be replaced immediately.
- Use or operate any equipment, machine, device or work in a manner that may endanger himself/herself or any other worker.
- Engage in any prank, contest, feat of strength etc. unnecessary running or rough and boisterous conduct.

FAMILY, VOLUNTEERS/STUDENTS, VISITORS & GENERAL PUBLIC

- Family, Volunteers/Students, Visitors and the General public, when on TCE premises, will be informed of the necessary health and safety policies and expected to behave in a manner consistent with TCE policy and procedures as required.

ACCOUNTABILITY

- Any persons who, in their relationship with TCE, do not conduct themselves in accordance with T.C. E. Safety Policy and Procedures and all applicable legislation will be subject to disciplinary actions and / or asked to leave the premises.

CONTRACTORS/SUB CONTRACTORS OF TCE ARE RESPONSIBLE FOR

- Working in compliance with the Occupational Health and Safety Act and associated regulations covered on the project.
- Use and wear protective equipment and devices or clothing that is required to be worn for the job.
- Report to the Program Supervisor the absence or defects of any equipment or protective devices owned by TCE which the contractor is aware and which may endanger himself/herself.

In addition:

- A constructor shall ensure, on a project undertaken by the constructor that:
- Every employer and every worker performing work on the project complies with the Occupational Health and Safety Act and Regulations.
- A constructor shall ensure, on a project undertaken by the constructor that the Health and Safety of workers on the project is protected.

C.2 JOINT HEALTH & SAFETY COMMITTEE/HEALTH & SAFETY

C.2.1 JOINT HEALTH & SAFETY COMMITTEE

In the event that T.C.E staff exceeds twenty employees, a joint health and safety committee will be formed.

The committee will be composed of 4 members; 2 representing employees and 2 representing management. One representative from employees and management must be certified under Ontario Occupational Health and Safety Act (R.S.O. 1990 c.0.1) and associated regulations.

C.2.2 HEALTH & SAFETY REPRESENTATIVE

Each program location will have one Health and Safety Representative appointed by the Union from other than supervisory staff.

The duties of the Health and Safety Representative will be as follows:

- (1) To carry out a monthly inspection of premises in which the representative works, and report all situations which may be a source of danger or hazard to employees' health, to the Joint Health and Safety Committee;
- (2) To bring to the immediate attention of the Employer and if necessary, the Joint Health and Safety Committee, any incidents or situations occurring between monthly inspections which may be a source of danger or a hazard to the health and safety of employees;
- (3) Inspect all facilities every six (6) months to ensure all applicable federal, provincial and municipal Health and Safety Regulations are complied with and to ensure all reasonable precautions are being taken to protect the Health and Safety of employees;
- (4) Minutes shall be taken of all meeting and copies provided to the Employer and the Union;
- (5) Promote safety and sanitary practices;
- (6) Review safety matters and investigate all accidents.

C.2.3 JOINT HEALTH AND SAFETY COMMITTEE TERMS OF REFERENCE

JHSC terms of reference and Policy

It is the policy of TCE that a Joint Health and Safety Committee will be maintained at all times, consistent with the requirements of the Ontario Occupational Health and Safety Act. This committee exists for the purpose of identifying potential dangers and hazards in the workplace, to recommend a means of improving health and safety programs and practices within the organization and to be an advisory body that helps to stimulate awareness of safety issues and workplace risks.

Terms of Reference

1.0 Composition

1.1 The Committee shall be comprised of no fewer than four members. One-half (1/2) of the committee shall be composed of union members, and one-half (1/2) shall be composed of non-union members. Together they are all committed to improving the health and safety conditions for everyone in the workplace.

1.2 Union members shall be selected by the membership of CUPE Local 2605 in accordance with the bylaws of the Union. Non-union members shall be selected by the Executive Director, or her designate.

1.3 At least one Union member and at least one Non-union member shall be certified in accordance with the provisions of the Occupational Health & Safety Act.

1.4 The Committee shall be co-chaired by one Union member and one Non-union member. Without restricting the right of the parties to replace members as necessary, the terms of office of the co-chairs shall normally correspond to the term of the Collective Agreement.

1.5 A Co-chair may, with the consent of his/her counterpart, invite additional person(s) to a meeting to assist the Committee with its deliberations by providing additional information and comment.

2.0 Functions of the Committee

2.1 To identify environmental conditions that may be a source of danger or hazard to service users and workers.

2.2 To make recommendations to the Employer, for the improvement of environmental conditions or practices affecting the health and safety of workers and service users.

2.3 To recommend to the Employer the establishment, maintenance and monitoring of programs, measures and procedures respecting the health and safety of workers and service users.

2.4 To obtain from the Employer information regarding:

- a) the identification of potential or existing hazards of material, processes or equipment;
- b) health and safety experiences, work practices and standards in other agencies of similar

nature; and

c) any workplace testing being carried out for health and safety purposes.

2.5 To designate a Health and Safety representative or a worker member of the Joint Health and Safety Committee to inspect the physical condition of environments under the direct control of the TCE. The frequency of such inspections shall be as provided as a minimum in the Occupational Health and Safety Act. But in striving for best practise the employer requests monthly inspections.

2.6 In the case of a worker or service user being critically injured or killed, to designate a member or members to investigate and report back to the committee and the Executive Director.

2.7 To comply with the provisions of the Occupational Health and Safety Act (Ontario) and its Regulations.

2.8 The Committee shall designate two members (and alternates) to accompany a Labour Ministry Inspector making any visit to the workplace, including inspections. If we are aware of their visit.

2.9 The Joint Committee shall review the nature and number of accident-related incidents at each quarterly meeting; such information in summary form will be presented by the non-union Co-Chair. The committee shall prepare an annual summary statement and forward it to the Executive Director.

3.0 Meetings, Minutes and Agenda

3.1 The Committee shall meet at least once every three months, or more often at the discretion of, and with the agreement of the Co-chairs.

3.2 In order to proceed with the business of the Committee, a quorum of members must be present. A quorum shall be defined as at least 75% of the Committee including at least one of the Co-Chairs.

3.3 The Co-chairs shall share on an alternating basis the responsibility of chairing meetings of the Committee. A Recorder shall be selected by the members to take the minutes.

3.4 The Minutes of all meetings shall be stored at head Office and posted at all worksites, and made available to representatives of the Ministry of Labour in accordance with the legislation.

3.5 As soon as possible after the last meeting, no later than 2 weeks, each member shall receive a copy of the Minutes of the last meeting. Minutes shall be sent to all locations for posting. The agenda of the next meeting shall be prepared by the Co-Chairs and available at least one week prior to meeting.

3.6 The Committee may accept as proper for discussion and resolution any item that pertains to

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worker health and safety as defined under the Act, except those that would alter in any way the terms of the Collective Agreement. Health and safety matters dealt with in Collective Bargaining or at the Labour-Management Committee may be discussed by the Health & Safety Committee, but the Committee may make recommendations only to the parties to such other discussions. Labour-Management issues other than health and safety issues shall not be discussed at Committee meetings.

3.7 All matters raised at Committee meetings shall be dealt with on the basis of consensus, if possible. If consensus on a particular issue cannot be achieved at a meeting, that issue shall be placed on the agenda of the next meeting, where it shall be discussed again. If still unresolved, the matter shall be referred to an ad-hoc committee comprised of the Director of Operations, the Union Local President, and the Co-chairs. This committee shall attempt to resolve the issue, and report in writing to the Health and Safety Committee no later than one week prior to its next regular meeting.

3.8 The Executive Director (or designate) shall communicate in writing, within 21 calendar days, to the Co-Chairs with regard to recommendations of the Committee. Such communication shall give an assessment of the problem, outline who is responsible for resolving the matter, and provide a timetable for implementing those recommendations with which the Employer agrees. Reasons for disagreement, if any, with Committee recommendations shall be stated.

4.0 General

4.1 Any personal, medical or other confidential information gained by the Committee related to its deliberations shall be kept in the strictest confidence by Committee members. Meeting Minutes shall not contain the names of any person employed or supported by TCE, and specific job sites shall be referred to by Division only (e.g., Residential Services or LTC, day services).

4.2 Any recommendations for alterations to, deletions from or additions to these Terms of Reference may be made by consensus of the Committee.

4.3 Time spent in meetings or other legitimate Committee-related activities shall be considered as time worked, and shall be compensated by the Employer at the regular straight time hourly rate; such time shall include preparation time of one (1) hour for Committee meetings.

C.2.4 JOINT HEALTH AND SAFETY COMMITTEE RECOMMENDATIONS

I. Policy

One of the mandates of the Joint Health and Safety Committee (JHSC) is to evaluate H& S concerns and make recommendations to minimize the risk of injury or occupational exposure. The committee will make recommendations to address safety concerns which have come to their attention.

II. Documentation

Committee recommendations will be presented using the TCE Joint Occupational Health and Safety Committee's Recommendations form.

III. Procedure

- The committee will jointly discuss and recommend an action to be taken to address a safety concern which has come to the committee's attention.
- This will be documented on the recommendation form.
- The recommendation will be forwarded to the Director of Operations to implement recommendation.
- The Director of Operations will have 21 days to respond in writing. The response will outline the action taken or be taken. For actions to be taken, a time frame for the action should be included.
- The Director of Operations will forward the completed recommendation form to the Management and worker certified representatives. The worker certified representative will distribute the response to the recommendation to committee members at least one week prior to the next scheduled committee meeting.
- The worker certified representative will, if applicable, advise the staff member or party from which the concern arose.

C.2.5 SAFETY INSPECTIONS

Planned Monthly Inspections

- Inspections are to be conducted on a monthly schedule by the designated Health and safety representative (or committee member representing workers) using a prescribed checklist. The inspections are to combine observation, documentation and employee interviews with the objective of identifying hazardous and unsafe conditions in the workplace.
- The findings are to be recorded and reported. Copies will be kept on file for a minimum 1 year following the date of the inspection.

- Any significant findings and recommendations as a result of safety inspections shall be presented to management.

Unplanned Inspections

- In addition to planned inspections, the management, Health and Safety Representative\Joint Health and Safety Committee are delegated the authority to conduct unplanned inspections as they see fit.

Pre-Start - Up Inspections

- Prior to the beginning of each work shift and/or each work task, TCE employees are expected to ensure that any equipment, material or device to be used is in proper working order. Any deficiencies or malfunctions of equipment, material etc. are to be reported immediately to the Program Supervisor.
- Upon the purchase and installation of new equipment or appliances, the item shall be inspected and the operating manual to be placed in a manual binder with acknowledgment sheets for all staff to read, understand, review and sign so that any potential hazardous conditions can be identified. The inspection will be conducted by the Program Supervisor of the program and findings will be recorded and presented to the Joint Health & Safety Committee.

Workplace Inspections / Hazard Assessment

Refer to TCE's Website for the most current, up to date Hazard Assessment form, which, due to evolving updated content, is intermittently adjusted by the JHSC.

C.3 WHMIS POLICY

Under the Occupational Health and Safety Act your employer is to take all reasonable precautions to protect your health and safety. Thus Total Communication Environment commits itself to the reduction/elimination of incidence of injury and illnesses resulting from the use of hazardous and consumer products in the workplace.

This is achieved by providing people with the right information to make reasonable and rational decisions regarding the handling, storage and use of these materials and items. TCE recognizes this and is committed to providing training, personal protective equipment and accountability for use of hazardous materials and consumer products.

It is the workers responsibility to use the training and information provided by Total Communication Environment to work safely.

By doing so you will help create and provide a safe workplace.

November ,2000

C.3.1 WHMIS TRAINING AND EDUCATION

Training will occur annually for refresher courses and on an as needed basis for new employees. The procedure for testing knowledge of employees may be in the form of a mail out quiz or a video and test session, for refreshers.

The training will cover information of labels, hazard identification, MSDS , any WHMIS program or policy related issue deemed to be worthy of coverage, by the employer in consultation with the JHSC.

Course material will be reviewed by the Employer in consultation with the JHSC for its effectiveness.

Human Resources will be responsible for maintaining copies of master lists of people who complete the annual testing / refreshers. As well, Human Resources will be responsible for providing tests at training courses.

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C.3.2 WHMIS RESPONSIBILITIES

C.3.2.1 EMPLOYER RESPONSIBILITIES

The Employer shall:

1. Assess health hazards of products in the workplace and provide information in emergency situations.
2. Ensure current MSDS's are readily available for workers (in English).
3. Consult with Joint Health and Safety Committee(JHSC)
4. Establish education/training program for workers. Review this training program at least annually or on an as needed basis. Evaluate its effectiveness and where needed, revise programs. This will be done in consultation with JHSC, and recorded in their minutes.
5. The Employer will maintain systems that:
 - A. Ensure a safe and Healthy workplace
 - B. Promote Health and Safety
 - C. Monitor policies and procedures for H&S.
 - D. Ensure all practical steps are taken to minimize the risk of workplace injuries and illnesses.
6. Ensure that all workers who have a potential to come into contact with consumer products, receive training on how to:
 - A. Read consumer labels.
 - B. Recognize consumer product symbols.
 - C. properly use, handle, store and dispose of products.
7. Provide Personal Protective Equipment.

November,2000

C.3.2.2 EMPLOYEE RESPONSIBILITIES

Employees must:

1. Use personal protective equipment as provided by the Employer.
2. Participate in WHMIS training as outlined by your Employer.
3. Ensure they are aware of the fire evacuation procedure in the program and participate in monthly fire drills with residents.
4. Ensure that labels are not defaced, removed or altered. If they are, notify Program Supervisor immediately. If Program Supervisor or designate is not on the shift, remove the product and place in a safe area with a "DO NOT USE" sign attached. Leave your colleagues a note in the communication book, indicating the removal of the product.
5. Be aware of MSDS binder and notify Program Supervisor if an MSDS is missing or outdated. Contact Program Supervisor if they do not have the required info for a hazardous material. If it is a consumer product place in a locked cupboard marked A DO NOT USE." Use an alternative in interim until Program Supervisor is available to provide necessary information. Notify your colleagues via note in communication book ensuring they are aware said product has been removed until MSDS or other required information for that product is available.
6. Use information from the training program to protect their own health and safety and that of their co-workers.

November 2000

C.3.2.3 PROGRAM SUPERVISOR RESPONSIBILITIES

Program Supervisors will:

1. Ensure all products are labelled properly.
 - i. Original containers will have supplier labels. (Appendix A.)
 - ii. Decanted products will have TCE workplace labels. (Appendix B)

Maintain current hazard material inventory and ensure all Material Safety Data Sheets for all products in their location are up to date. The inventory will be reviewed every 3 years or on as needed basis.

Maintain list of inventory dated on the bottom. Include any updating dates.

4. Work in accordance with the regulations of the WHMIS program.
5. Ensure all personal protective equipment is properly maintained and used.
6. Provide copies of MSDS to JHSC representative upon request.

Provide house JHSC representative with training certificates for posting on health and Safety Boards within the homes.

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C.3.2.4 RESPONSIBILITIES OF JHSC

See Terms of Reference of JHSC.

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C.3.2.5 *RESPONSIBILITY OF VOLUNTEERS*

All volunteers within TCE will abide by the rules and regulations regarding the Health and Safety of the agency.

In certain circumstances this may require particular training or instruction from a WHMIS instructor or Health and Safety Management Certified Representative.

December 2000

C.3.3 REPORTING WORKPLACE ILLNESS OR INJURY

PLEASE REVIEW TOTAL COMMUNICATION ENVIRONMENT'S SAFE AND EARLY RETURN TO WORK POLICY.

The return to work kits, which are utilized for injuries which require medical attention, gives a detailed outline of the process for reporting workplace injuries.

All required forms are contained in your Return to Work Kit.

Workplace parties have a shared responsibility to:

- A) Get and stay in contact with each other as soon as possible following a workplace accident.
- B) Discuss, plan and actively work toward an early and safe return to work.

Share information with WSIB about the injury, recovery or other related matters.

Workplace parties will keep in touch during an injury resulting in loss time at work.

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C.3.4 PROCESS FOR REPORTING CONCERNS REGARDING WHMIS PROCEDURES

When a staff deems it necessary to report an employee who is not following Health and Safety procedures and may potentially be putting himself or others at risk, the staff with the concern will report this incident to the Program Supervisor, if during their working hours. If Program Supervisor is not on shift the on-call Supervisor will be notified.

The staff must complete an incident report and include the time of the incident, date of incident and actual perceived concern and any risk factors they had witnessed.

When the Program Supervisor returns to work the On-Call Supervisor will contact the Program Supervisor and forward the pertinent information.

If it is deemed a continuous health risk to others the On-Call Supervisor will judge accordingly as to what action will be taken to ensure the health and safety of those within the home.

If this procedural violation puts someone at risk of exposure to a hazardous material please remember **NEVER DISCARD THE CONTAINER.** If medical attention is required take the container with you to the hospital.

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C.3.5 EQUIPMENT MAINTENANCE

Total Communication Environment will maintain a master list of items used in the workplace pertaining to Health and Safety of its workers. For the purpose of WHMIS materials all MSDS will be made readily available.

All equipment should be visually inspected prior to each use.

Any equipment required for lifts and/or transfers will be maintained in proper working order. If at any point a piece of equipment requires repairs or simply does not seem to be at optimum working capacity the Program Supervisor is to be notified ASAP and a “**do not use**” sign is to be placed on that piece of equipment.

All equipment should be serviced on an annual or as needed basis.

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C.3.6 INVENTORY OF CONSUMER PRODUCTS

Total Communication Environment will maintain a master list of items used in the workplace pertaining to consumer products and WHMIS. For the purpose of WHMIS materials all MSDS will be made available.

If staff are concerned about the safety of any product they are to remove the item and place it in a locked area away from the products to remain in use.

A note indicating staff concern will be left in the communication book for staff and Program Supervisor.

Another item from the inventory of consumer products, with accompanying MSDS can be used in the interim.

This relates to consumer products for home use and therefore item can be put aside until Program Supervisor has opportunity to review the staff's concerns.

Please place a 'do not use' sign on the product in question.

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C.3.7 INTRODUCTION OF NEW CONSUMER PRODUCT

When a staff feels it is necessary to introduce a new consumer product they will speak to the Program Supervisor of the program and bring their request forward. No product will be introduced unless approved by Program Supervisor on behalf of the Employer.

The Health and Safety Representative will be responsible for getting an MSDS form and reviewing to ensure that this is a safe product for the home and that we have the required equipment to use in conjunction with product utilization.

The Program Supervisor will be responsible for speaking with H&S management representative to ensure the Joint Health And Safety Committee is aware of the introduction of a new product. The Program Supervisor will give written notice to the JHSC that this product is to be added to the master lists of MSDS forms.

This product will then be added to the home inventory of MSDS forms.

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C.3.8 DISPOSAL OF PRODUCT NO LONGER IN USE

Ottawa-Carleton area has a household special waste depot. Currently located off Moodie Dr. in Nepean (11 km's South of Bell's Corners) Called Trail Road Waste Facility.

Hours of operation are subject to change so we are to call ahead to ensure the facility is open at the time of the planned drop off.

The following items are a partial list of what will be accepted at this site.

Leftover paints, batteries, aerosol containers, insecticides, fungicides, stains, wood preservatives, furniture stripper, oven cleaner, window cleaner, and disinfectants.

Ottawa-Carleton also offers Special one-day depots, please call 560-1335 to request information on the dates and locations.

C.4 FIRST AID

In accordance with the Workplace Safety and Insurance Act First Aid Regulation 1101, Total Communication Environment will ensure that:

- A. All First Aid kits will contain all items required by manufacturing standards, easily accessible and labelled 'First Aid Kit'.
- B. the WSIB "In Case of Injury Poster" (Form 82) will be posted.
- C. The first aid kit is inspected at not less than quarterly intervals. The inspection will be done by the Health and Safety Representative while on duty and the First Aid inspection checklist is signed off and dated.

C.4.1 RECORDS

All first aid treatment, including the date and time of the occurrence, the names of witnesses, the nature and exact location of the injury, and the date, time and nature of the first aid administered will be kept. (This information to be covered on the Employee Incident Report).

C.4.2 TRANSPORTATION

- D. Total Communication Environment will provide for the immediate transportation to a hospital, doctor's office, or the worker's home if necessary.

C.4.3 TRAINING

- E. All staff will commence employment with TCE certified in First Aid and C.P.R.
- F. The cost of re-certification of first aid will be covered by TCE according to the training policy.

C.4.4 FIRST AID REQUIREMENTS

Regulation 1101 under the Workplace Safety and Insurance Act

- 1. 1.a A first aid station shall contain
 - I) A first aid box containing the items required by Regulation; and
 - II) A notice board displaying:
 - The Board's Poster known as form 82
 - The valid first aid certificates of qualification of the trained workers on duty, and
 - An inspection card with spaces for recording the date of the most recent

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inspection of the first aid box and the signature of the person making the inspection.

2. A first aid station shall be in the charge of a worker who works in the immediate vicinity of the first aid station and who is qualified in first aid standards required by this Regulation.
3. First aid stations shall be located as to be easily accessible for the prompt treatment of any worker at all times when work is in progress.
2. (1) A first aid box shall contain as a minimum the first aid items required by this Regulation and all items maintained in good condition at all times.
(2) The box shall be large enough so that each item is in plain view and easily accessible.
3. Expense of stocking and restocking first aid appliances and services shall be the responsibility of the employer.
4. The Board or appointees may make inspections of the first aid stations, appliances, services and records.
5. Every employer employing not more than 5 workers in any one shift at a place of employment shall provide and maintain at the place of employment a first aid station with a first aid box containing items listed in Appendix A.

TOTAL COMMUNICATION ENVIRONMENT FIRST AID POLICY APPENDIX A

FIRST AID REQUIREMENTS

REGULATION 1101 SECTION 8 (1) and 8 (2)

Every employer employing not more than 5 workers on any one shift at a place of employment shall provide and maintain at the place of employment a first aid station with a first aid box containing as a minimum,

- a) A current edition of a standard St. John Ambulance First Aid Manual:
- b) 1 card of safety pins: and
- c) dressings consisting of:
 - (I) 12 adhesive dressings individually wrapped
 - (II) 4 sterile gauze pads, 3 inches square
 - (III) 2 rolls of gauze bandage, 2 inches wide,
 - (IV) 2 field dressings, 4 inches square or 2 four-inch sterile bandage compresses; and
 - (V) 1 triangular bandage

As well TCE deems it appropriate to stock all kits with face shields.

- (2) The employer shall ensure that the first aid station is at all times in the charge of a worker who,
 - (A) is the holder of a valid St. John Ambulance Emergency First Aid Certificate or its equivalent; and
 - (B) works in the immediate vicinity of the station.

C.5 LIFTS AND TRANSFERS POLICY

C.5.1 POLICY

TCE is committed to providing a safe environment for all staff and individuals in our care. TCE is committed to providing the necessary training, education, and financial resources to encourage safe working practices during Lifts or Transfers. TCE values its staff and will make every effort to prevent injuries relating to any lift or transfer with individuals in our care.

C.5.2 ROLES AND RESPONSIBILITIES

C.5.2.1 Employer:

TCE will ensure that the risk of injury to employees during any lift or transfer is minimized by implementing the following procedures:

- a) All employees will be trained in the area of lifts and transfers by a certified Trainer (for example: CCAC nurse, Occupational Therapist, Physiotherapist).
- b) All equipment used by employees in any lift or transfer is regularly inspected and maintained.
- c) All employees will be trained in the area of back care in relation to the practice of using proper body mechanics in everyday tasks at TCE.

C.5.2.2 Program Supervisors:

Program Supervisors will ensure that the risk of injury to employees during any lift or transfer is minimized by implementing the following procedures:

- a) Program Supervisors will ensure that all staff will be trained in the use of assistive devices.
- b) Program Supervisors will ensure that all equipment is inspected annually.
- c) Program Supervisors will ensure that any equipment breakdown is fixed immediately or else taken out of service.
- d) Program Supervisors will ensure that staff are fully trained on any new techniques or devices that are introduced into the workplace.

C.5.2.3 Staff:

Staff will ensure that they reduce or eliminate to risk or injury to themselves by implementing the following work habits:

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- a) All staff will use the proper lifting and transferring techniques when working with individuals in our care.
- b) All concerns relating to lifts and transfers must be brought to the attention of the Program Supervisor.
- c) Staff will use proper body mechanics when completing everyday work tasks at TCE

C.5.2.4 Employer/Employee:

- a) It is both the employee and employer's responsibility to make sure annual re-certification of lifts and transfers occurs.

C.6 ADDENDUMS TO ACCIDENT REPORTING

From WSIB Policy Report Vol. 13. No. 1. February 2000

FOLLOWING AN EXTENSIVE REVIEW, THE WSIB HAS REVISED ITS ACCIDENT REPORTING POLICY:

Accidents occurring on or after March 1, 2000

New Definitions:

Chief among the changes is the distinction, made for the first time, between first aid and health care.

First aid is a one-time treatment given to a worker. It can include:

- the cleaning of minor cuts, scrapes, or scratches
- the treatment of minor burns
- the application of bandages, dressings, splints, etc., and
- any follow-up visit made for *observation purposes* only.

Health care includes:

- services requiring the professional skills of a health care practitioner
- services provided by or at hospitals or health facilities
- prescription drugs.

An employer should not report an accident if

- the worker was treated by a co-worker or a manager, or
- the worker was treated by a health care practitioner, but was given *only* first aid,

because, simply, there is no point in reporting an accident after which no time is lost or no health care is given.

An employer *must* report if the worker received health care, regardless of whether the treating practitioner works for the employer or the worker is treated at work.

Modified Work

Under the new policy, an employer does not have to report an accident if the worker performs modified duty at regular pay for seven calendar days, or less, following the date of the accident. (Provided the worker doesn't require health care).

An employer now reports an accident *only* if the worker requires health care and/or:

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- is absent from regular work, or earns less than regular pay for regular work (e.g. part-time hours)
- requires modified work at *less* than regular pay
- requires modified work at *regular pay* after the seventh calendar day, or on the next scheduled shift after the seventh calendar day, following the date of the accident.

RESPONSIBILITIES

- All Total Communication Environment employees have the responsibility to report occupational accidents, illnesses, hazardous conditions, near misses, and non-injury property damage.
- The implementation of the reporting system will be the joint responsibility of the Director of Operations and the Safety Representative / Joint Health and Safety Committee. Duties will include reviewing reports, recommendations of preventative and corrective actions, and the maintenance of records.
- The Director of Operations is responsible for completing the appropriate forms and distributing them to the designated parties, in a punctual manner and consistent with legislative requirements.
- All Total Communication Environment employees are to be familiar with the procedures for reporting occupational accidents, illnesses, incidents, hazardous conditions and near misses. All employees have the responsibility to initiate the incident reporting sequence by informing their Program Supervisor in the event of an actual or potential injury or illness as soon as possible after the incident has occurred, (ensuring that the Program Supervisor signs off the accident incident report) and submitting the accident incident report within 48 hours to the Director of Operations.

REPORTING PROCEDURES

Definitions

- An injury that does require professional medical treatment or lost time from work will be classified as an *accident*.
- An injury or illness that does not require professional medical treatment or lost time from work will be classified as an *incident*.
- A situation, which could have potentially resulted in an accident or incident but did not, will be classified as a *near miss*.
- A situation that is identified as having the potential to cause an accident, incident or near miss will be considered a *hazardous condition*.

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- An *illness* will be defined as any disease resulting from exposure to a substance relating to a particular process, trade or occupation or a disease characteristic of a particular process, trade or occupation.
- All injuries, which require first aid treatment only, must be recorded in the first aid reporting form. This book will be kept with first aid kit.
- Non-injury property damage is defined as any damage to Total Communication Environment property and equipment.

Employees

Employees who experience a work related injury or illness should seek immediate medical attention and promptly report to their Program Supervisor. If transportation to a hospital doctor's office or an employee's home is necessary, it will be arranged for by Total Communication Environment.

All accidents, illnesses and incidents, near misses, and hazardous conditions no matter how slight must be reported to Program Supervisor.

Program Supervisors

Upon notification of the accident, illness, or incident, the Program Supervisor must ensure that the employee completes an incident report form and submits it to the Director of Operations. The Director of Operations will notify the Health and Safety Representative / Joint Health and Safety Committee. If the accident, illness, or incident necessitates health care or results in the worker not being able to earn full wages, the Director of Operations will notify the WSIB within three days using the Board approved Form 7. The worker and JHSC will also receive a copy of this form.

RECORDS

Incident reports will be kept on record and reviewed by the Health and Safety Representative / Joint Health and Safety Committee as needed and/or reported annually.

ACCIDENT INVESTIGATION

If a person is killed or critically injured, or an accident, explosion or fire causes injury to a person whereby the person is disabled from performing his or her usual work or requires medical attention, a formal accident investigation will be held.

- In the case of death or critical injury, immediate notice is to be given to a Ministry of Labour Inspector, the Joint Health and Safety Committee, and / or the Health and Safety Representative. An investigation is to be conducted immediately and a written report is to be presented to a Ministry of Labour Director within 48 hours.
- Where an accident or explosion or fire causes injury to a person, whereby the person is disabled from performing his/her usual work or requires medical attention, an investigation is to be conducted within 48 hours and the employer shall give notice in writing to a Ministry of Labour Director, Joint Health and Safety Committee or Health and Safety Representative within 4 days of the occurrence.
- It will be the responsibility of the injured employee's Program Supervisor to set up the accident investigation meeting. Those required to attend an investigation are the injured employee (where capable), the employee's Program Supervisor and the Health and Safety Representative or member from the Joint Health and Safety Committee and Ministry of Labour Inspector (when required).
- It will be the option of the investigating committee to have any other personnel who may contribute to the investigation, (e.g., co-workers, residents) to attend the formal investigation. The Health and Safety Representative and Program Supervisor will co-chair the investigation and report the results. The injured employee's Program Supervisor will be responsible for the completion of any recommendations resulting from the accident.

INVESTIGATION PROCEDURE

- In the event of an accident, no person shall interfere with, disturb, alter or carry away any wreckage, article or thing at the scene of or connected with the occurrence until permission to do so has been given by the investigation team. The only exceptions are to save a life or relieve human suffering, maintaining an essential public utility service or transportation system, or preventing unnecessary damage to equipment and other properties.
- All accident/incident/hazard investigations should commence immediately and be completed within 24 hours. In exceptional circumstances, 48 hours is acceptable. A statement from the injured person may be collected at a later date if necessary.
- All relevant points brought out during the investigation must be accurately recorded.
- The investigation team must identify all the contributing factors including hazardous

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conditions, unsafe actions and root causes so that a decision can be made on which conditions and circumstances contributed to the accident.

- Identifying the contributing factors will include direct observations and interviews with both the employee and any witnesses.
- The Program Supervisor and JHSC Member shall summarize the information gathered, propose and action plan and provide copies to the employees, Executive Director, co-chairs of the Health and Safety Committee and/or designated Health and Safety Representative.
- The Program Supervisor must ensure the proposed action is implemented to prevent further accidents. If the solution is beyond the authority or resources of the Program Supervisor, they must make the Executive Director aware of the problem and put interim procedures in place. The hazards identified in the investigation process must not be allowed to remain without attention while proposed action is pending.
- The Joint Health and Safety Committee and/or the Health and Safety Representative will review data from Accident/Incident Report and Investigation forms, monitor trends and make recommendations to the employees and Executive Director on appropriate preventative strategies and priorities in health and safety.
- The Executive Director will review Accident/ Incident Report and investigation forms and ensure appropriate action has been taken.

RECORDS

Copies of the Accident/Incident Report and Investigation forms will be kept on file for a period of 5 years following the occurrence.

WORK REFUSAL

An employee of Total Communication Environment has the right to refuse work or do particular work he or she has reason to believe that:

- Any equipment, machine, device or thing the worker is to use or operate is likely to endanger himself, herself or another employee.
- The physical condition of the workplace or part thereof in which he/she works or is to work is likely to endanger himself/herself.
- Any equipment, machine, device or thing he/she is to use or operate or the physical condition of the workplace or part thereof in which he/she works or is to work is in contravention of the Occupational Health and Safety Act and associated regulations and such contravention is likely to endanger himself/herself, or another employee.
- But, not for normal roles and responsibilities with client care. I.E. Same responsibilities as a

fireman or police officer to provide essential services.

Upon refusal, the employee will report to his/her Program Supervisor who will immediately investigate the report in the presence of the Health and Safety Representative/ worker representative of the Joint Health and Safety Committee or, in the event that they are not available, a fellow employee.

The employee will remain at a safe distance near his/her workstation until the investigation is completed.

If, following the investigation and corrective actions, the employee still has reasonable grounds to believe that the situation remains dangerous, the employee has the right to refuse to work or do particular work and Total Communication Environment, the employee, or a person on behalf of Total Communication Environment or employee, will notify a Ministry of Labour Inspector.

NOTES:

Throughout the process of refusal, the worker is to remain at a safe place in another work environment, unless the employer, subject to the provisions of the collective agreement,

- Assigns the worker to alternative work
- Gives other directions to the worker

Pending the investigation and decision by the inspector, no worker is to be assigned to put themselves in the dangerous situation unless, in the presence of:

- A JHSC member who represents workers, and if possible, is a certified member
- A Health and Safety Representative
- A worker who because of knowledge training and experience is selected by a trade union to represent workers, or if there is no trade union, is selected by workers to represent them

the worker has been advised of the other worker's refusal and reasons for their refusal.

- The individuals referred to in step 3 shall be deemed to be at work while carrying out their duties during the work refusal and are entitled to be paid.

WORK REFUSAL Contd

Step 1
Worker believes a situation is likely to endanger themselves or another worker

Step 2
Worker reports situation to employer/Program Supervisor

Step 3
Notification of:

- JHSC member who represents worker
- A Health & Safety representative
- A worker who because of knowledge training and experience is selected by a trade union to represent workers, or if there is no trade union is selected by workers by workers to represent them

Step 4
Program Supervisor conducts investigation in the presence of the worker and third party mentioned to step 3

Step 5
Corrective Action

YES

NO

Step 6A
If worker is satisfied with corrective action and no longer believes they or other workers are in danger, work can resume.

Step 7
Notify a Ministry of Labour Inspector

Step 6B
If the worker is not satisfied, and still believes the situation is dangerous for themselves or other workers.

Step 8
MoL Inspector Investigates the situation in the presence of:

- Employer or person representing the Employer
- The Worker
- Individuals referred to in step 3

Step 9
MoL Inspector will give their decision in writing as soon as practicable to:

- Employer or person representing the Employer
- The Worker
- Individuals referred in step 3

C.7 EARLY AND SAFE RETURN TO WORK

C.7.1 POLICY

Consistent with the requirements of the Workplace Safety and Insurance Act, TCE is committed to working in collaboration with CUPE Local 2605 and the JHSC to make every reasonable effort to ensure that all employees who are permanently or temporarily disabled as the result of a work-related injury are provided with meaningful employment through TCE's Early and Safe Return to Work program. It is the policy of TCE to provide an atmosphere of cooperation in achieving return to work as soon as possible following a work-related injury. In attempting to provide modified work for injured employees, TCE will consider a broad range of accommodation possibilities. As the employer, in considering modified work assignments, TCE will rule out only those options that would result in undue hardship for the organization.

In accordance with this policy, TCE will work towards the achievement of the following program objectives:

- Increased awareness of disability issues for all employees;
- Reduction of the number of days lost due to absences from injuries and illnesses and reduction in worker's compensation costs;
- Implementation of a fair and consistent process for employees to return to work;
- Enabling employees to maintain their dignity, self-worth, respect and standard of living as valued employees by providing meaningful and productive employment;
- Compliance with the current legislative requirements;

C.7.2 TERMS OF REFERENCE

1. The Program Supervisors under the direction of the Director of Operations administers TCE's Early and Safe Return to Work program. The Director of Operations and the Program Supervisor will be the main contacts for all injured employees. On Call Supervisor to be utilized at nonworking hours of Program Supervisor
2. Modified work is a means of accommodating an employee's work restrictions. For the purpose of this policy, a broad approach to accommodation will be adopted, recognizing that unique circumstances may apply in each case. Accommodation may include (but not limited to) any of the following:
 - i. Scheduling of more frequent rest breaks
 - ii. Obtaining assistance from a co-worker for more difficult tasks

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- iii. Sharing of job duties
- iv. Physical changes to the work environment
- v. The use of assistive devices
- vi. Assignment to a different location
- vii. Changing of Work schedules

3. Summary of Staff Responsibilities

The Employee shall:

- Co-operate with the employer in an Early and Safe Return To Work Plan;
- Immediately report all accidents and obtain necessary medical attention;
- Sign TCE'S Health Professional's Report of Employee's Capabilities form and take it, along with the Letter To Treating Health Care Professional, and return it to the Director Of Operations once completed by the treating physician;
- Notify the On- call Supervisor and Director of Operations of any changes in medical condition;
- Assist TCE in identifying suitable employment consistent with functional abilities;
- Communicate any difficulties or concerns to Program Supervisor or On-Call Supervisor, who will in turn notify the Director of Operations.
- Complete daily work logs and submit on Friday of work week to Program Supervisor

The Program Supervisor shall:

- Work with the Director Of Operations and other Managerial staff and the employee to develop an Early and Safe Return To Work Plan;
- Assist as required in the collection of medical information, job information for task analysis and the development of workplace modifications;
- Monitor the progress of the employee and complete the required forms documenting progress and any required changes to the plan over time;

The Employer Shall:

- Keep WSIB informed of the availability and implementation of an Early and Safe Return To Work Plan and of the employee's progress during the rehabilitation process;
 - Work with the employee and the Program Supervisor immediately from the date of injury to develop an Early and Safe Return To Work Plan;
 - Ensure all forms are signed and files kept up-to-date in compliance with WSIB requirements
4. The Early and Safe Return to Work Plan is usually designed to be temporary in nature. While actual time frames will be established for each case, the Director of Operations in consultation with the Program supervisor will review all modified work assignments on a weekly basis.

C.7.3 PROCEDURES & PRACTICES

1. An employee who suffers a work-related injury that requires medical treatment must take the following information to his/her physician or hospital:

The complete RTW package: This includes

- a) PROCEDURE FOR REPORTING INJURY AND ILLNESS AT TCE
- b) EMPLOYEE INCIDENT REPORT - Employee must complete the incident report and leave at the program for the Program Supervisor.
- c) F8 FORM – authorizes the health professional to provide the employer with information about the injury designed to enable the employer to develop an Early and Safe Return to Work Plan with the employee.
- d) LETTER OF COMMITMENT FROM TCE
- e) LETTER FOR TREATING PHYSICIAN, INDICATING TCE OFFERS MODIFIED WORK - this letter provides the physician with valuable information about TCE'S Early and Safe Return to Work program.
- f) EMPLOYEE DAILY LOG RECORDS FOR MODIFIED WORK
- g) EARLY AND SAFE RETURN TO WORK POLICY AND PROCEDURE

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2. If the health professional recommends:

- (a) Immediate Return to Work – the employee must inform the Program Supervisor or On Call Supervisor and return for regular duties immediately, as scheduled.
- (b) Modified Duties – the employee must inform the Program Supervisor or on call Supervisor who in turns notifies the Director of Operations and the other Supervisors immediately of the restrictions and duration and bring in the Functional Abilities Form for Timely Return to Work to the head office attention Director of Operations.

At this point, the employee, Program Supervisor or on call Supervisor and Director of Operations will develop an Early and Safe Return to Work Plan. In developing this plan, the employer will consider the following:

- is the regular job suitable;
- can the regular job be modified temporarily; may include different location.
- If the first two options are not feasible, can a different job be provided that meets the restrictions;
- if none of these options are feasible, WSIB will be notified of this fact.

If a suitable accommodation assignment is identified, the Program Supervisor or On Call Supervisor will:

- notify employee;
- implement the Early and Safe Return to Work Plan;
- monitor and evaluate the injured employee's progress;
- make any necessary adjustments to the plan, as required.

The Director of Operations will provide the employee, Program Supervisor, on call Supervisor and WSIB with a copy of the written Early and Safe Return to Work Plan, which will include any restrictions, modifications and duties, as well as the plan outline/duration.

- (c) Remain off Work – employee must inform the Program Supervisor or On Call Supervisor immediately. A meeting may be set up to review the following information: Due to employee potentially not being able to drive etc this meeting may occur via phone.
 - Status of injury and name of physician;
 - date of visit and subsequent visits;
 - expected length of time off from work;
 - treatment;
 - the Health Professional's Report of Employee's Capabilities Form.

When an employee remains off work, these will be the follow-up procedures:

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- (i) the employee must contact the Director of Operations after each visit to the physician to discuss their condition and a new Health Professional's Report of Employee's Capabilities Form must be filled out at each visit and provided to the employer;
 - (ii) Clarification may be requested of the physician throughout the process with respect to whether the employee can return to regular or modified work. The physician will be provided with a plan of action and modified duties related to the employee's job.
 - (iii) Once the physician authorizes modified duties, an Early and Safe Return to Work Plan will be developed as described above.
3. In the event there is a dispute between the employee and the employer with respect to the Early and Safe Return To Work Plan, the following steps will be taken:
 - (a) The plan will be carefully reviewed by the parties and will be modified if necessary if the parties agree that is appropriate;
 - (b) If the dispute is related to functional abilities / suitability of work match, an updated Health Professional's Report of Employee's Capabilities Form should be sought and the availability of suitable work should be reviewed.
 - (c) Where a dispute cannot be resolved, the matter will be referred to WSIB for assistance from a RTW Mediator.

C.7.4 CESSATION OF PROGRAM

The ESRTW process ceases when an employee;

- has returned to original duties
- has returned to an alternative position within Total Communication Environment
- refuses to participate, in which case the matter will be referred to the WSIB
- has been unsuccessfully rehabilitated after a reasonable time frame unless an extension is considered appropriate.

C.7.5 CONFIDENTIALITY AND RECORDS

The provision of a rehabilitation service for injured or disabled employees is to be approached in a professional and ethical manner and in this regard, employees using the service must be able to participate in the program with their rights to confidentiality assured and protected. A separate RTW case file will be kept independently of personnel records. All records and documents, relating to an employee's involvement in the ESRTW program will be available to the case team. Information obtained in the ESRTW program will not be released to any other party without the written permission of the employee.

C.7.6 EVALUATION

The effectiveness of the ESRTW program will be regularly evaluated and reviewed to ensure ongoing development of the service and feedback to management. The JHSC may review the program at any time but not less than once annually.

C.8 PROCEDURE FOR SANDING AND SALTING

It is the responsibility of all staff to ensure walkways and ramps are sanded/salted, during the winter season.

C.8.1 PROCEDURE

Developed by JHSC:

Each winter season TCE hires external contractors to provide snow plowing and sanding salting procedures to our owned properties. Exceptions occur at programs that include Housing Corporations.

However it is impossible for them to visit our locations several times a day and therefore we must rely on staff to take an active role in ensuring safety on our walkways.

It is the responsibility of all staff to ensure walkways and ramps are sanded and salted, during the winter season.

Staff are to check walkways on half hour prior to shift changes to ensure they are clear of ice and snow. If there is ice on the walkway, staff will sand and salt the pathway to ensure safety for staff and residents leaving and arriving on shift.

In addition to this staff should be sanding the walkways during inclement weather, again to ensure safety for all.

C.9 FOOTWEAR POLICY

Commitment Statement

TCE recognizes the legislative requirements under the Health and Safety Act and regulations regarding personal protective equipment including footwear.

TCE remains committed to ensuring a safe working environment and supports providing knowledge and information regarding potential hazards within the work place.

Scope

This policy applies to all employees.

Preamble: Slips and falls being a leading cause of workplace injury requires Employee attention and awareness.

The Occupational Safety and Health Act requires that employers protect their employees from workplace hazards that can cause injury. Controlling a hazard at its source is the best way to protect employees. Depending on the hazard or workplace conditions, OSHA recommends the use of engineering or work practice controls to manage or eliminate hazards to the greatest extent possible. Personal protective equipment is equipment worn to minimize exposure to a variety of hazards.

Roles and Responsibilities of Workplace Parties

TCE recognizes Preventing Slips, Trips and Falls (STF) is the responsibility of everyone in the workplace

Employer

- Ensure the development and implementation of the footwear policy
- Enforce staff sign acknowledgement of recommendations
- Review and approval of this policy annually in consultation with the JHSC
- Take every reasonable precaution for the protection of the employee

Supervisors

- Participate in STF hazard recognition, and corrective actions
- Clearly communicate with employees on safe footwear
- Educate on the footwear policy and safe work practices through monitoring strategies such as management workplace inspections, employee safe practices
- Encourage employees to report hazards proactively; and to report accidents and incidents to the supervisor immediately
- Respond promptly to employee reports
- Take every reasonable precaution for the protection of the employee

Employees

- Comply with the footwear policy and safe work practices
- Report hazards, deficiencies, injuries or illness to their supervisor
- Individuals failing to follow policy may be asked to leave the premises to obtain the proper footwear on their own time and there after progressive discipline.

Definition of safe footwear:

- Closed toe and heel
- Low heel
- Slip-resistant sole
- Dry footwear worn in homes

Requirements:

Employees of TCE are responsible for wearing footwear appropriate to their job responsibilities.

Employees are **required** to wear footwear

- **In which the soles are slip-resistant for wet and potentially slippery surfaces.**
- **Low slip resistant heels**
- **Closed Toe and ankle supported footwear**

Communication and Training

All new and existing employees will be informed of the safe footwear policy.

Evaluation and Quality Improvement

The footwear policy will be reviewed annually by Management in consultation with the JHSC and the Director of Operations. Any recommendations for changes will be forwarded to the Board of Directors for review.

C.10 SLIPS, TRIPS AND FALLS PREVENTION

C.10.1 POLICY

Commitment Statement

Total Communication Environment is committed to providing a safe and healthy working environment for all employees, residents, visitors and others. Total Communication Environment recognizes the significant hazards related to slips, trips and falls (STF) risk factors in the workplace and the responsibility to take every precaution reasonable under the circumstance to protect employees and others outlined in the Occupational Health and Safety Act, and Regulations. Our organization will demonstrate its commitment by providing financial, physical and human resources for the development, implementation and maintenance of a sustainable STF prevention program that will ensure STF risk factors are recognized and effectively controlled.

TCE is committed to reviewing, evaluating and improving the program annually in consultation with the Joint Health and Safety Committee (JHSC).

All workplace parties are required to comply with the outlined policy and procedures. Non-compliance will be taken seriously and may result in progressive discipline as outlined by the organization's progressive discipline policy and procedure.

Goals

- Increase STF awareness
- Decrease the risk of workplace STF
- Promote and support the health and safety of all employees, residents and others visiting, working and volunteers in the organization
- Provide equipment, resources, effective training and maintain records

Objectives

- Educate all management and employees regarding STF hazards and prevention
- Promote and facilitate employee and management participation in STF prevention
- Recognize STF hazards both proactively and reactively
- Assess and prioritize STF hazards
- Evaluate the effectiveness of applied STF controls

Scope

The STF prevention program applies to all management, all employees, residents and others visiting, working and volunteers in the organization

Definitions

- Slip a loss of balance caused by too little friction or traction between the footwear and the walking surface.
- Trip a loss of balance caused by a collision of the foot/leg with an object.
- Fall to descend freely due to the force of gravity. It can occur at ground level or from a height (e.g. on a ladder or step-stool).
- Hazard a source of potential damage, harm or adverse health effects on something or someone under certain conditions at work.
- Risk The chance or probability that a person will be harmed or experience an adverse health effect if exposed to a hazard. It may also apply to a situation with property and equipment loss,

Roles and Responsibilities of Workplace Parties

Employer

- Provide resources to develop, implement, maintain and continually improve the STF prevention program
- Approve the policy and procedures, and annually review the program in consultation with the JHSC
- Provide employee related health and safety reports to JHSC
- Enforce the policy, procedures and program
- Provide resources for training, necessary equipment and other workplace interventions
- Ensure employees and management receive training and maintain records
- Take every reasonable precaution under the circumstances for the protection of employees
- Ensure contractors and other persons working are aware and compliant with Policies and Procedures
- Maintain training records with employee signatures

Supervisors

- Participate in STF hazard recognition, implementation of corrective actions,
- Enforce STF prevention policies and procedures including those related to safe footwear through regular monitoring strategies such as management workplace inspections, auditing of employee safe practices
- Encourage employees to report hazards and STF symptoms proactively and to report accidents and incidents to the supervisor immediately
- Respond promptly to employee reports

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- Conduct STF hazard, accident and incident investigations, and implement corrective actions
- Seek assistance and/or internal/external consultation when solutions and controls are not promptly identified
- Communicate solutions and controls to employees in a timely manner to workplace parties
- Provide employee related health and safety reports to JHSC
- Ensure all new and existing staff receive STF prevention training i.e. video
- Encourage employee participation in hazard identification and brainstorming control solutions
- Purchase appropriate and adequate amount of equipment considering safety and reduction of STF risk factors
- Maintain equipment purchased
- Ensure all students and volunteers are aware and in compliance with Policies and Procedures
- Take every reasonable precaution for the protection of the employee and resident

Employees

- Participate in STF hazard recognition
- Comply with the Occupational Health and Safety Act and Regulations pertaining to slips, trips and falls, and the organization's STF and footwear policy and procedures at all times
- Annual STF prevention training as established by the organization
- Use and care for equipment provided by the employer correctly
- Report any STF concerns, hazards, incidents or accidents to the supervisor immediately
- Cooperate with STF hazard, accident and incident investigations as required

Joint Health and Safety Committee

- Review incident/accident data related to STF
- Inspect the workplace for STF hazard as part of the monthly workplace inspection process
- Make recommendations in writing to management

C.10.2 PROCEDURES

Workplace Inspections

- Program Supervisors shall conduct proactive workplace inspections and incorporate the recognition of STF hazards in the workplace inspection process and checklists
- JHSC rep's shall conduct workplace inspections
- JHSC shall make recommendation to management as required
- Management will ensure corrective actions to eliminate or control identified hazards are implemented

Footwear

- The employer will establish a safe footwear policy, safe work practices, communicate and inform employees on safe footwear and enforce the policy
- Employees will comply with the footwear policy. Individuals failing to follow policy will be asked to leave the premises to obtain the proper footwear on their own time and there after progressive discipline.
- Water on floor from outdoor shoes/boots is a slip hazard ensure safe footwear

Definition of safe footwear:

- Closed toe and heel
- Low heel
- Slip-resistant sole
- Dry footwear worn in homes

Training

- Mandatory orientation training will be provided to all new employees
- Annual training for existing employees will be provided i.e. video
- Training matrix options include but not limited to:
- STF hazard awareness including definitions, STF hazard recognition
- Policies and procedures with emphasis on roles and responsibilities STF hazards, accident and incidents reporting; and footwear
- Records of training will be documented and maintained by Human Resources and/or supervisors

Reporting and Investigation of Hazards, Accident and incidents

- All employees are required to report STF hazards, accidents and incidents promptly to

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their supervisor for follow-up, investigation to determine root cause of the event, and for implementation of appropriate corrective actions.

- The hazard, accident or incident will be reported on the appropriate reporting and investigation forms.
- Supervisors will ensure that the reports and investigation documents are completed within the required reporting timelines and submitted to the appropriate internal authorities and if required external authorities
- Summary of STF hazards, accidents and incidents are to be provided to the JHSC

Preventive Maintenance

- Work surfaces shall be kept free of defects and be kept clear of refuse, snow or ice that may endanger employees, clients or others on the premises (see salting/sanding procedure)
- All equipment will be maintained in safe operating condition

Spills Clean-up

- Spills or wet floor surfaces must be cleaned up immediately
- Employees are empowered to immediately clean up small non-hazardous spills such as water, coffee, food etc.
- Where there is a delay in cleaning up spills or wet floor surfaces, a conspicuous hazard warning sign must be erected
- Where spills are very large and may require assistance in clean up. They must be reported to supervisor

General Measures

- Keep obstructions and trip hazards clear of work areas, hallways and walkways and store materials in appropriate areas
- Step stools and/or ladders are to be used as needed and employees are not permitted to stand on chairs or boxes and guidelines adhered to.
- Ladders shall be used *as per manufacture guidelines* and inspected before *use*
- Maintain a clear view of your path when walking or when pushing wheeled equipment
- Wet areas are to be assessed by supervisors to determine the appropriateness of implementing absorbent mats or drainage mats, slip resistant surfaces

Program Evaluation and Quality Improvement

- Hazard/incident/accident data, STF hazard inspections, STF assessments, STF training compliance and evaluations, employee survey etc.
- Recommendations for program enhancements if identified will be provided to

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management and JHSC for consideration

- Management will ensure implementation of approved program revisions
- Any changes to the program will be documented and communicated to workplace parties in a timely manner

Reviewed in consultation with:

Joint Health and Safety Committee

Director of Operations

Human Resources

C.11 INFECTION CONTROL POLICY

Total Communication Environment is committed to prevention, health promotion and the recognition, evaluation and control of health hazards in the agency. Infection control is both a public health and occupational health and safety issue.

Infection Control is a pro-active strategy which has the following components:

- 1. Risk Assessment**
- 2. Risk Control**
- 3. Training and Education**
- 4. Reporting**
- 5. Evaluation of the Infection Control Program.**

TCE will work in partnership with the Joint Occupational Health and Safety Committee to respond to recommendations and advocate for a safe workplace.

In addition, it is the policy of TCE to follow Routine Practices as described by Health Canada. Routine Practices is a term used by Health Canada to describe its system of infection prevention. These practices describe prevention strategies to be used with all residents during care.

C.11.1 Risk Assessment

- i) Staff members shall routinely assess the general health of residents entrusted to their care while on shift.
- ii) Should a resident exhibit signs of a new cough, fever, or intestinal symptoms (vomiting, diarrhea), the staff member shall ensure this is brought to the attention of colleagues and the program Supervisor (or On Call Supervisor) and that the resident's condition continue to be monitored closely.
- iii) Should the resident require immediate assistance, the staff member shall ensure that appropriate medical attention is sought on behalf of the resident.
- iv) If residents are coughing or sneezing and the staff member is within one meter of the client, the staff member is encouraged to wear a mask.

C.11.2 Risk Control:

- a) Engineering Controls:
 - i) Adequate numbers of sinks, soap dispensers and/or waterless antiseptic hand rinses.
 - TCE shall ensure that sinks are kept in good working order.
 - Soap dispensers shall be provided in all bathrooms.

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- TCE shall maintain an inventory of supplies and ensure that supplies are ordered as required.
 - All front-line staff members shall be provided with waterless antiseptic hand rinses for use when out in the community.
- ii) Appropriate approved puncture proof containers for disposal of sharps where required
- TCE shall ensure that puncture proof containers are available from suppliers.
 - TCE shall ensure that these containers are disposed of when they are full.
- iii) Appropriately maintained refrigerators
- Frontline staff shall ensure that refrigerators are checked periodically and maintained with a temperature of 5% Celsius or less.
- iv) Waste management systems
- All locations shall be equipped with appropriate storage containers/locations for garbage/refuse/recycling.
 - Garbage and recycling shall be put out for pick-up according to the city's requirements.
 - Recycling shall be organized according to City/Township requirements.
- v) Appropriate cleaning and disinfection of bathrooms and kitchens
- Staff members shall ensure that bathrooms and kitchen are maintained and products are stocked for use.
- vi) Sufficient amount of disinfectant solutions for the homes
- All locations shall have cleaning solutions purchased with Grocery shopping for the cleaning of each residence
- b) Administrative Controls:
- 1) TCE shall ensure the following procedures are observed:
- i) Counselling of staff members and residents with symptoms
- Staff members who have symptoms of respiratory illness are encouraged to

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see their personal physician. Staff members should seek advice from their physician as to how the nature of their illness would affect colleagues and residents. Staff members with contagious respiratory ailments should not come to work.

- Staff members shall counsel residents about respiratory illness and on ways to avoid passing the illness to others (having an annual flu shot, staying home when ill, covering their mouths when they cough, washing hands with soap and warm water frequently) and ensuring they see their physician if their symptoms do not improve after 72 hours.
- ii) New staff members shall sign an affirmation confirming that they have either been immunized against Hepatitis B or choose not to be.
- iii) Management of staff members with specific health conditions that carry an increased risk of exposure.
- Staff members with open areas on their skin shall ensure that the area is properly covered prior to initiating resident contact.
 - Staff members who have an immunocompromised status are encouraged to refrain from face to face contact with residents exhibiting any signs of infection (i.e., cough, sneeze, fever, vomiting, diarrhoea)
 - Staff members shall be trained in the use of routine practices and participation in such training shall be documented on TCE's orientation checklist.
 - Staff members will receive fit testing and education.
- iv) Prevention of needle stick injuries
- Staff members providing injections to clients will utilize approved disposal containers on site.
 - Staff members shall not re-cap needles.
 - Training shall be provided to staff members who administer injections regarding safe disposal of needles.
 - The use of safer needle technology will be explored based on identified risks, as needed.
- v) Safer Work Practices are observed

Routine Practices describe prevention strategies to be used with all residents during resident care and include:

- Hand washing or cleansing with an alcohol-based sanitizer before and after any direct contact with a resident.

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- The use of additional barrier precautions to prevent staff member contact with a resident's blood and bodily fluids, non-intact skin or mucous membranes.
- The wearing of masks and eye protection or face shields where appropriate to protect the mucous membranes of the eyes, nose and mouth during procedures and resident care activities likely to generate splashes or sprays of blood, bodily fluids, secretions or excretions.
- Gloves are to be worn when there is a risk of body fluid contact with hands. Gloves should be used as an additional measure and not as a substitute for hand washing

vi) Additional General Precautions

- clean all potentially contaminated surfaces, such as floors, walls, beds and large equipment with a 1:9 solution of household bleach. Let solution stand for at least 10 minutes before wiping clean. Use disposable paper towels to wipe solution and dry these areas.
- always wash soiled sheets with bleach and hot water and do not mix with clothing.
- always disinfect the bathtub between each person's use.
- always disinfect toilet after use, particularly when there is a possibility of splashing on top surrounding surfaces.
- use rubber gloves for general household cleaning.
- use disposable latex gloves when cleaning bathroom area and remove gloves before moving onto another task in another area.
- use disposable latex gloves when handling articles soiled with feces, urine, semen, vaginal secretions, saliva and blood.
- use hot water in dishwasher cycles. When washing dishes by hand, use rubber gloves in hot water with soap and household bleach.
- always wash hands after using disposable latex gloves.
- have antibacterial hand soap available.
- disinfect the phone mouthpiece regularly and frequently.
- ensure clients wash their hands after bathroom use.
- keep toothbrushes, soaps, towels, razors and all other personal hygiene products separate
- from one another.

vii) Management of Staff Members Exposed to Infectious Disease

- TCE shall contact the Health Unit and Medical Officer of Health for the

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purpose of securing consultation services along with appropriate reference material.

- Re-introducing of EAP phone numbers and brochure will occur...
- See reporting guidelines. Appendix A.

viii) Outbreak Management of Exposures for Staff Members and Residents

- In situations where there is an outbreak of infectious disease, which is typically defined as a higher than expected incident rate of disease, or outside the norm, TCE shall follow the directives provided by the Health Unit, shall inform all Program Supervisors of precautions to implement and shall ensure that there is compliance.
- All other staff members will be made aware of precautions to be implemented as well.
- Incidences of non-compliance with Health & Safety Policy and Practice directives will be followed up by the appropriate Program Supervisor.
- Health Unit directives during an infectious disease outbreak will supersede the provisions of this policy.

ix) Adequate Supervision of Staff Members

- Supervisors shall address the performance of staff members related to health and safety practices through the performance appraisal process.
- Supervisors shall provide support as needed for staff members who require guidance regarding infection control.
- Director of Operations shall respond within 24 hours when infection control recommendations are brought to their attention by the Joint Occupational Health and Safety Committee. Supervisors shall promote an environment of support, open communication and collaboration to help prevent infectious diseases.

The following immunizations shall be recommended:

- i) Flu shots are recommended annually in the fall.
- ii) Staff members will be encouraged to receive their Hepatitis B immunization and will be reimbursed for the cost upon submission of a receipt. Staff members who choose not to be vaccinated against Hepatitis B will sign an affirmation to that effect.
- iii) Diphtheria, Pertussis, Tetanus, Poliomyelitis (DPTP), Measles, Mumps and Rubella (MMR)[childhood immunizations] immunizations should be encouraged at the beginning of a person's employment with the organization.

c) Personal Protective Equipment:

Personal Protective Equipment (latex/nitrile gloves, masks, antiseptic hand wash, shall be made available to all staff members as per policy and will be evaluated within the team as to what is necessary at their location.

C.11.3 Training and Education of Staff Members

- a) Training in Infection Control shall be mandatory for all front-line and supervisory staff members as part of orientation process.
- b) Routine Practices training shall be offered as part of orientation process prior to beginning work with clients.
- c) The training should be hands-on and involve dispersion of fact sheets regarding hand washing, safe application and removal of personal protective equipment.
- d) Staff members should also be trained in appropriate cleaning and disinfection of surfaces and supplies.
- e) Training might include information provided by the Joint Occupational Health and Safety Committee.
- f) TCE shall be responsible for ensuring that training opportunities are available for all staff members.
- g) All relevant training received by staff members will be documented

C.11.4 Reporting

- a) Staff members are required to contact their immediate supervisor following the criteria for febrile respiratory infection. The criteria for Febrile Respiratory Illness (FRI) is a fever greater than 38 degrees Celsius and a new or worsening cough or shortening of breath not otherwise explained.
- b) Staff members shall complete an Incident Report for any situations of exposure to communicable diseases and for needle stick injuries. These shall be submitted through regular channels and will be forwarded by Program Supervisor to the Co-Chairs of the Health and Safety Committee for review and recommendations.
- c) Fitness to work certificates shall be submitted to the immediate supervisor on return to work after an outbreak. The staff shall forward such a certificate to the Director of Operations
- d) TCE shall notify the Health Unit in the event of an infectious disease outbreak and will cooperate with the Health Unit to prevent/contain/ manage community spread.
- e) If a staff member has a probable or confirmed occupational infection, the Ministry of Labour will be notified in accordance with existing occupational health and safety legislation.

C.11.5 Evaluation of the Infection Control Program

The Joint Health and Safety Committee will annually, or on as needed basis, review the current program and make recommendations.

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