

Kingston Health Sciences Centre

CORPORATE POLICY MANUAL

Subject: Health & Safety Training for Employees and Affiliates

Number: 02-196

Page: 1 of 6

Original Issue: 2024-10

Revised: NEW

Issued by: President and Chief Executive Officer

Introduction

Kingston Health Sciences Centre (KHSC) is committed to the health and safety of all workers and requires adherence to safe work practices by all. Training and orientation is a key component to ensure a safe environment and adherence to establish safety work procedures. In accordance with the *Occupational Health & Safety Act*, the *Health Care and Residential Facilities Regulation* (69/93), and other Regulations under the *Act*, Employers are obligated to provide training to the workers they employ and to ensure processes are in place to ensure necessary health and safety information is provided for others working or learning on KHSC premises. Training helps to ensure that workers are working in a safe manner and reduces the risk of them or another person sustaining a workplace injury or illness.

Policy

All employees and affiliates will complete training so that they have the information they need to work safely in accordance with the *Occupational Health & Safety Act*, applicable Regulations, and the hospital's policies and procedures.

Accountability structures are in place to ensure that staff and affiliates complete mandatory training.

This policy applies to all staff including KHSC employees, credentialed and appointed staff, and affiliates (e.g. volunteers, learners, contractors, etc.). "Hospital premises" includes all KHSC property including all off site and satellite locations.

Where Manager/Supervisor is referenced, this includes all those who have charge of a workplace/work area in the hospital, or authority over a worker. This includes both KHSC and non-KHSC employees who function in a 'supervisory' capacity under the *Occupational Health & Safety Act*.

For additional information related to contractors involved in maintenance/facilities related activities please review Administrative Policy #02-195 - Contractor Health & Safety Program.

Procedure

All Employees:

1. Corporate and Departmental Orientation for New Employees

1.1. All new employees will attend general hospital orientation. *Exception:* Medical Residents receive a specific health & safety orientation separate from general hospital orientation.

1.1.1. Training records will be maintained by Leadership and Talent Development.

1.1.2. Employees start dates are set to allow them to attend an orientation session at the start of their employment. They are also required to complete specific e-learning modules related to Health and Safety on the same day.

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In occasional circumstances, an employee may need to start in advance of a scheduled orientation session. In those circumstances it is the responsibility of the hiring manager to ensure that the employee has the appropriate safety training/awareness to work safely until they attend orientation.

- 1.1.3. General hospital Orientation will include an overview of health and safety programs and requirements that apply to the whole organization.
- 1.1.4. Health & Safety orientation training for new hires will be developed in consultation with the Joint Health and Safety Committees (JHSC).
- 1.1.5. The Health & Safety orientation training will include, but is not limited to, the following:
 - 1.1.5.1. the hospital's Health and Safety Policy
 - 1.1.5.2. rights and responsibilities of workers, supervisors and the hospital
 - 1.1.5.3. Joint Health & Safety Committee (JHSC) and Health & Safety Representative- roles and responsibilities
 - 1.1.5.4. recognition and control of key hazards in health care and hazard reporting procedures
 - 1.1.5.5. injury/illness reporting procedures
 - 1.1.5.6. first aid procedures
 - 1.1.5.7. emergency response protocols ('Know the Codes')
 - 1.1.5.8. infection prevention and control procedures including the use of personal protective equipment and hand hygiene
 - 1.1.5.9. early and safe return to work program and modified duties
 - 1.1.5.10. employee support programs, and health and safety resources at KHSC
- 1.1.6. Employees who have been off work on extended leaves may also be required to attend corporate orientation
- 1.1.7. New employees will be required to complete additional mandatory corporate Health & Safety e-learning. New hires will receive notification of what additional corporate Health & Safety training is required (e.g. Musculoskeletal Injury Prevention, WHMIS, and Workplace Violence & Harassment Prevention.)
- 1.1.8. New employees may also be required to attend additional orientation sessions (e.g. clinical orientation, departmental orientation or training {e.g. NVC, GPA}) depending on the nature of their position and health and safety risks.

- 1.2. Employees will also receive departmental/unit/job specific orientation as a new hire, a new transfer or after returning from an extended absence. Staff who float to a different unit should see section 1.3 below.

- 1.2.1. Dept/unit/job specific training should include, but is not limited to:

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- 1.2.1.1. Emergency response procedures including designated evacuation area
 - 1.2.1.2. job/task/equipment specific training including safe work practices and standard operating procedures (SOP's)
 - 1.2.1.3. use of personal protective equipment and where it is located
 - 1.2.1.4. controls in place for job specific hazards in that dept/unit
 - 1.2.1.5. safe handling of chemical hazards that are specific to the dept/unit, spill kit location if applicable
 - 1.2.1.6. ergonomic/musculoskeletal injury prevention (e.g. assistive devices for lifting, pushing/pulling, material handling)
 - 1.2.1.7. tour of the dept/unit to orient to equipment and other dept procedures (e.g. location of eyewash stations).
 - 1.2.2. It will be the responsibility of the department/unit to identify, create and deliver departmental specific training. Training should exist for departmental specific practices that are not standard to other units.
 - 1.2.3. Refresher training for any department/unit/job specific information is identified by the department/manager.
 - 1.2.4. Dept/unit/job specific training must be documented and maintained by the department/unit on the Department/Unit Safety Training Checklist ([Appendix A](#)) or other documentation means.
 - 1.2.5. This training should be covered by the MRP for onboarding (e.g. Program Manager, Supervisor, Clinical Learning Specialist).
 - 1.2.6. The need for refresher training should consider such factors as:
 - 1.2.6.1. Degree of risk associated with the task/equipment
 - 1.2.6.2. Whether there have been incidents/injuries associated with the task
 - 1.2.6.3. Frequency of performing the task- are staff familiar with it?
 - 1.2.6.4. Whether the task requires regular re-certification (e.g. Non-Violent Crisis Intervention)
 - 1.2.6.5. Whether equipment or procedure has been changed
 - 1.3. Staff who are reassigned temporarily to another unit (i.e. floating) should review the KHSC Reassignment Guidelines and ensure that they are aware of the specific health and safety information required to be working on the particular unit.
2. Mandatory Training
- 2.1. Training records for mandatory Corporate Health & Safety courses will be tracked and maintained by Leadership and Talent Development.
 - 2.2. On a regular basis, compliance reports for mandatory training will be sent out to each Leader by Leadership and Talent Development for appropriate management follow up.
 - 2.3. Failure to complete mandatory training may result in disciplinary action.
 - 2.4. Mandatory Corporate Health & Safety will be developed in consultation with the Joint Health and Safety Committee (JHSC).

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- 2.5. Employees who may be required to use a tight fitting respirator as part of their duties will be included in the respirator protection program and will be required to undergo in-person N95 respirator user training. Training records will be maintained by the Occupational Health, Safety & Wellness Department. See Administrative Policy #02-091 Respiratory Protection Program.
- 2.6. Health and Safety training needs will be evaluated regularly by Occupational Health, Safety & Wellness with consideration to such factors as changes in legislation, changes in hospital policy, corporate focus/priorities, injury data, and identified knowledge/skill deficiencies.
- 2.7. The Health & Safety Training program will be evaluated and training will be modified based on attendee feedback and based on the outcome of the training needs review.

3. Leaders:

- 3.1. In addition to following the above training requirements identified for all employees, Managers/Supervisors will receive additional Health and Safety training to assist them in carrying out their responsibilities as Supervisors under the Occupational Health & Safety Act and KHSC policy.
- 3.2. This training will be required for new Leaders to the hospital.
- 3.3. Training will include:
 - 3.3.1. Information pertaining to roles and responsibility as a Supervisor (Supervisor Competency) including general orientation to KHSC Health & Safety policies and processes, hazard recognition and control, etc.
 - 3.3.2. How to conduct workplace inspections
 - 3.3.3. How to conduct Incident Reviews
- 3.4. In person training will be arranged by Occupational Health, Safety & Wellness. E-learning records will be maintained by Leadership and Talent Development.
- 3.5. Formal training will be supplemented with other training/communication via the following:
 - 3.4.1. Leadership Exchanges sessions
 - 3.4.2. Leadership Exchange Newsletter
 - 3.4.3. Safety Talk Bulletins
 - 3.4.4. Leadership memos and
 - 3.4.5. Leaders Forum
- 3.5. Records of this additional training/communication will be maintained by those who sponsor the session or send out the information. Where possible, records will be centralized to support maintenance of this information.
- 3.6. Training needs will be regularly assessed with consideration to such factors as: legislative changes, the priorities of the organization, changes in KHSC policy, and knowledge/skill needs of KHSC Leaders.

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Affiliates

4. Mandatory Training:

4.1. Contractors (Construction, Renovations and Maintenance/Facility Related):

Orientation and training for Contractors involved in Construction and Maintenance/Facilities related activities are addressed in Administrative Policy #02-195 "Contractor Health & Safety Program."

4.2. Learners

Students/Learners are considered workers under the Occupational Health and Safety Act and during placement have the same rights and responsibilities as workers paid by KHSC. Health and Safety Orientation material will be provided to learners (directly by KHSC or via the learner's school) who are undertaking a placement at KHSC to provide information pertaining to health and safety and to ensure their learning experience is a safe one. Processes will be in place with the schools to ensure the training requirements are met prior to placement start. Generally, schools will be responsible for ensuring that students have completed the necessary training and will submit records of the training to those coordinating student activities at KHSC.

4.3. Volunteers

Prior to commencing any volunteer activities all volunteers must undergo a hospital orientation which includes a health and safety component. This includes, for example, a review of the "Codes," Hand Hygiene and use of PPE, WHMIS awareness, Safe Footwear, Scent Sensitive, Hazard Reporting, Workplace Violence, and indications for excluding self from work when ill.

4.4. Vendors and Service Contractors

Vendors and Service Contractors require health and safety training when they are present at KHSC. This training may be included in their contract documentation or via Vendor Credentialing (Corporate Policy 02-012). In order to get hospital ID, working with Protection Services, the vendor/service contractor would document their training via the credentialing portal or sign off on the KHSC Sign In/Out record (Appendix C). For supplied labour/temp agency staff, processes will be established by the MRP to ensure completion of appropriate training. Long term agency resources will complete training as per standard employee practices. Short term agency resources may be exempt from some training on an *ad hoc* basis. MRPs can consult with OHSW and with Leadership and Talent Development as needed.

4.5. All Other Affiliates

Other Affiliates (e.g. consultant, working visitor, government officials etc.) will be required to review key health and safety information when they present to KHSC and:

- 4.5.1. must sign in upon arrival to KHSC with Protection Services (Davies 1, Jean Mance 1 or Dietary 1) and indicate that they've reviewed Appendix B of this policy (Note: Appendix B can be sent to the affiliate prior to arrival to expedite review).

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4.5.2. obtain short term hospital ID from Protection Services

4.5.3. for affiliates working off site at one of KHSC's satellite facilities, the affiliate will review and sign off on the 'Hospital Health & Safety Requirements for Affiliates' (Appendix B) prior to starting work at the location. The signed form (Appendix C) will be maintained by that facility.

References

Occupational Health & Safety Act (R.S.O. 1990),
Health Care and Residential Facilities Regulation (O. Reg 67/93),

Related Documents

Hospital Identification, Policy #02-010 - KHSC Corporate Policy Manual,
Vendor Monitoring System, Policy #02-012 – KHSC Corporate Policy Manual

Authorizing Signature



Dr. David Pichora
President and Chief Executive Officer

Department/Unit Safety Training Checklist

Employee/Affiliate Name: _____ Employee #: _____

Dept/Unit: _____ Manager/Supervisor: _____

Safety Topic	Date	Signature	
		Worker	Supervisor
Fire Safety <input type="checkbox"/> Procedures for Code Red including: <input type="checkbox"/> Nearest emergency egress <input type="checkbox"/> Location of fire extinguishers <input type="checkbox"/> Evacuation location			
Emergency Response & Workplace Violence <input type="checkbox"/> Strategies and safe practices related to working safely including procedures related to working alone, and getting assistance. <input type="checkbox"/> Department/Unit procedures for responding to Emergency Codes or getting Emergency Assistance <input type="checkbox"/> Potential violence hazards associated with the role or location <input type="checkbox"/> Practices for violence prevention (AOB alerts, Violence Prevention Plans (IPOCs), Communication Tools, Departmental specific practices) <input type="checkbox"/> Review of any safety related equipment (e.g. vocera, duress button, points of egress, access control, pinels)			
Workplace Injury <input type="checkbox"/> Reporting Workplace injury/illness/exposures <input type="checkbox"/> First aid station location/procedures			
Hazards Specific to this Department/Unit <input type="checkbox"/> Review of unique hazards in this department/unit <input type="checkbox"/> Review of safe work practices/procedures for the above-noted hazards			
Chemical hazards <input type="checkbox"/> Review of hazardous products used in the dept/unit <input type="checkbox"/> Review of safe work practices & special handling and disposal instructions <input type="checkbox"/> Use of PPE and where it is accessed <input type="checkbox"/> Location/access to safety data sheets <input type="checkbox"/> Location and contents of Spill Kit(s) <input type="checkbox"/> Code Brown procedure reviewed			

<p>Musculoskeletal Injury (MSI) Prevention</p> <ul style="list-style-type: none"> <input type="checkbox"/> Safe lifting including <ul style="list-style-type: none"> <input type="checkbox"/> Assistive devices and how to use them <input type="checkbox"/> Pre-use equipment checks <input type="checkbox"/> Seated & Standing workstation equipment & adjustment <input type="checkbox"/> Safe push/pull procedures <input type="checkbox"/> Safe patient handling (clinical staff) <ul style="list-style-type: none"> <input type="checkbox"/> Mobility Assessments/Checks <input type="checkbox"/> Use of assistive devices (transfer boards, lifts, etc) 			
<p>Personal Protective Equipment (PPE)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Review of PPE use <ul style="list-style-type: none"> <input type="checkbox"/> Eye protection (safety glasses, goggles, face shield) <input type="checkbox"/> Hand protection (type and limitations of gloves) <input type="checkbox"/> Respirators (N95) and procedure masks <input type="checkbox"/> Gowns, lab coats, aprons <input type="checkbox"/> Other _____ <input type="checkbox"/> Where PPE is stored/accessed <input type="checkbox"/> What procedures/job tasks require PPE 			
<p>Equipment</p> <ul style="list-style-type: none"> <input type="checkbox"/> Review of safe operating procedures on the following pieces of equipment/tools/machinery: <ul style="list-style-type: none"> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> Procedures for pre-use equipment inspections <input type="checkbox"/> Reporting defects and tagging out equipment 			
<p>Policies/Procedures</p> <ul style="list-style-type: none"> <input type="checkbox"/> Review of departmental policies and procedures including: <ul style="list-style-type: none"> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ 			

<p>Training Department/Unit Specific</p> <p><input type="checkbox"/> The employee has completed training on the following (if applicable):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Departmental Orientation <input type="checkbox"/> Workplace Violence Prevention <ul style="list-style-type: none"> <input type="checkbox"/> Non-violent Crisis Intervention <input type="checkbox"/> Violence Prevention Training <input type="checkbox"/> Gentle Persuasion Approach Training <input type="checkbox"/> Pinels <input type="checkbox"/> Working at Heights/Fall Protection <input type="checkbox"/> Respirator Fit Testing <input type="checkbox"/> CBRN (Chemical, Biological, Radiological, Nuclear) <input type="checkbox"/> Chemotherapy – Safe Practices <input type="checkbox"/> Radiation Safety <p>Other: Please specify below</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>			
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KHSC Health & Safety Requirements for Affiliates

**To be reviewed by all Vendors, Consultants, Working visitors, and
Non-Construction/Non-Maintenance Contractors prior to receiving ID Badge**

Welcome to Kingston Health Sciences Centre.

KHSC is committed to making your time at the hospital and safe and healthy one for you, our staff, and our patients. We require all those on the premises to engage in safe behaviour and adhere to safe practices and policies. The health and safety requirements listed below are for your protection and guidance when on KHSC premises. They are to be followed at all times and misconduct or contravention may lead to you being asked to leave the property or may result in termination of your contract.

1. As part of your work/visit to KHSC, you are required to sign in and out, obtain and return an ID badge, and review and sign off on KHSC's health and safety requirements (this Appendix).
2. ID Badges must be worn and be visible at all times when on KHSC property. ID Badges are not transferable and must be used only by the person to whom it was issued. Any lost or misplaced ID Badges MUST be reported immediately to Security at KGH extension x4142. Return your badge at the end of your work/visit.
3. Your KHSC contact will escort you to the location you will be working. Your access shall be limited to your assigned work area(s) and KHSC public areas.
4. All work performed within/on behalf of KHSC must be in accordance with all Legislation (e.g. Occupational Health and Safety Act and its Regulations, Building Code, Fire Code, etc.) and KHSC policy.
5. All accidents, incidents and injuries must be reported immediately to your KHSC contact.
6. KHSC is committed to providing a work environment that is safe, secure, and respectful for all persons. KHSC will not tolerate harassment or any form of violence including abuse, aggression, or threatening behaviour. Behaviour shall be professional and appropriate at all times and any case of inappropriate behaviour should be reported.
7. Dress code - Tank tops and cut off shorts are not acceptable. Footwear must have an enclosed toe and heel, be of a low height and be slip resistant when working or visiting a patient care area, clinic, laboratory, food handling area, and any area where wheeled equipment is in use. Running or walking shoes are examples of appropriate footwear. Crocs are only permitted in cases where they provide for a fully enclosed toe and heel/heel strap. Safety shoes are required in designated areas or as per the work being completed.
8. Appropriate personal protective equipment (PPE) must be used where indicated. This may include but is not limited to: hearing protection, safety glasses, gowns, masks, respirators, safety footwear, etc. If you are unsure about what PPE is required for your work, please speak to your KHSC contact.

9. Hand Hygiene is important to the wellbeing of patients and staff; use the hand sanitizers upon entering the hospital and regularly thereafter depending on the nature of your work. At a minimum, hand hygiene is required prior to entering a patient room, prior to leaving the room, and whenever the hands are visibly soiled.
10. Equipment - Do not operate any equipment without being given proper instructions and do not use hospital equipment unless authorized to do so.
11. All equipment used must be in safe operating condition and pre-use inspections must be completed as required. Tools and dangerous objects must not be left unattended.
12. Safety data sheets (SDS's) are required for any chemicals brought into the facility.
13. Good housekeeping practices must be maintained when on site; dispose of materials in a manner that will not endanger others.
14. Take care to avoid creating slip/trip hazards. Ensure cords and equipment are used in a manner that does not create risk to others.
15. Fire doors must not be wedged open. If repeated access is required, speak to Security or your KHSC contact. Maintain clear and safe emergency exit paths at all times.
16. Adhere to all Emergency Procedures and utilize the Hospital Emergency Phone x4444 for emergency assistance. For off-site KHSC locations, call 911 where emergency response by police, ambulance and/or fire is required.
17. Be aware of other Emergency Response Codes that may be called via the overhead paging system and follow the directions provided by your KHSC contact or other designated person. Those marked with asterisks are the most likely to have an impact on your work and you should be aware of necessary steps.

Code Red	= Fire
Code Green	= Evacuation Alert
Code Brown	= Unknown spill or Radioactive/Chemical/Biological Spill
Code Aqua	= Flood
Code Yellow	= Missing Patient
Code White	= Violent Episode
Code Blue	= Adult Cardiac Arrest
Code 99	= Medical Emergency
Code Pink	= Pediatric Cardiac Arrest
Code Orange	= Disaster External/Mass Casualty
Code Black	= Bomb Threat
Code Silver	= Active Shooter
Code Purple	= Hostage Situation
Code Grey	= External Air Exclusion
*Contingency Plans = Loss of Power, Water, Information Technology	

18. CODE RED-FIRE

In the event of smoke or fire, remember the R.E.A.C.T. formula:

R – Rescue anyone in immediate danger

E – Ensure doors and windows are closed wherever safe to do so

A – Activate the nearest pull station; pulling the pull station will activate the fire alarm system.

C – Call for Help (x4444 or 911): Provide

- Name & position
- Location
- Nature of the emergency

T – Try to extinguish the fire only if it safe to do so, do not attempt to extinguish a fire if by doing so will put yourself or others at risk

19. All food and drink must be confined to designated areas. Food and drink are not permitted in clinical and laboratory areas. Discuss with KHSC contact if needed.

20. Smoking is strictly forbidden in all areas of the Hospital and anywhere on hospital property.

21. Anyone under the influence of drugs or alcohol or having the same in their possession will be asked to leave and contract will be terminated (if applicable).

22. Horseplay of any kind will not be tolerated.

23. No defacing of Hospital property will be tolerated.

24. We depend on everyone to identify and report hazards. Please be aware of hazards and report them promptly to your KHSC contact or report by calling KHSC x 3333.

25. All persons on KHSC property are required to comply with the Hospital's Scent Sensitive Policy (#02-201). Refrain from wearing scented products (e.g. aftershave, cologne, perfume, etc.). In addition, all paints, adhesives, glues, and other materials must be low VOC and low/unscented.

Please sign in to the Affiliate Sign In/Out Log now to indicate you have read, understand, and agree to follow the health and safety requirements contained in this document.

Reminder: KHSC respects privacy as a fundamental human right that is central to the dignity of the individual, and therefore any information gained through your visit or work at the Hospital must be kept confidential.

Have a safe visit and thank you for your efforts in keeping the hospital safe.

KHSC Affiliate Sign In/Sign Out Log
For Vendors, Consultants, Working visitors, and Non-Construction/Non-Maintenance Contractors

By signing below you are agreeing that you have read, understand, and agree to follow the health & safety requirements outlined in the KHSC Health and Safety Requirements for Affiliates (Policy 02-196 Appendix B).

Date	Print Name	Signature	Work/Visit Area & KHSC Contact	Time in	Time Out