

KINGSTON GENERAL HOSPITAL

ADMINISTRATIVE POLICY MANUAL

Subject: Health & Safety Training for Employees and Affiliates

Number: 02-196

Prepared by: Occupational Health, Safety & Wellness, PSOE

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Preamble

Kingston General Hospital (KGH) is committed to the health and safety of all individuals working on the hospital premises and insists on adherence to safe work practices by all. Training and orientation is a key component to ensuring a safe environment and adherence to safety 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. 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. The purpose of this policy is to outline the processes in place to ensure all employees and affiliates 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.

In addition to health and safety training described herein, the hospital will ensure processes are in place to ensure required certifications, licenses, and/or registrations are current where required for a position and/or specific job task or function. People Services & Organizational Effectiveness (PSOE) will verify that any necessary certifications, licenses and/or registrations are in place and up-to-date as part of the hiring process; thereafter, it will be the responsibility of the Manager/Supervisor to ensure they remain current.

Applicability

This policy applies to all employees and affiliates, where affiliates include all individuals not employed by the hospital who perform specific tasks at the hospital. This includes contractors, supplied labour/temp agency staff, vendors, consultants, working visitors, learners, volunteers, and other persons carrying on work, research or education activities at KGH.

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 KGH and non-KGH employees who function in a 'supervisory' capacity under the *Occupational Health & Safety Act*.

Note- this policy does not apply to construction contractors and those contractors involved in maintenance/facilities related activities who's health & safety training requirements are specifically addressed in Administrative Policy #02-195 "Contractor Health & Safety Program."

Policy

ALL EMPLOYEES:

A) New Employee Orientation Program

1. All new employees will attend general hospital orientation.

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2. New employee orientation is sponsored monthly by People Services & Organizational Effectiveness (PSOE).
3. Attendees will sign into hospital Orientation and training records will be maintained centrally by PSOE.
4. Employees are required to attend the first orientation session that is scheduled after their date of hire. *Exception:* Medical Residents receive a specific health & safety orientation separate from general hospital orientation.
5. General hospital Orientation will include a health and safety component and the hospital will appoint a competent person with knowledge, training and experience to conduct training.
6. This health & safety training will be developed in consultation with the Joint Health and Safety Committee (JHSC) and will be evaluated and reviewed on an annual basis at a minimum.
7. The Health & Safety orientation training will include, but is not limited to, the following:
 - 7.1 the hospital's Health and Safety Policy
 - 7.2 rights and responsibilities of workers
 - 7.3 Joint Health & Safety Committee (JHSC) and Health & Safety Representative- roles and responsibilities
 - 7.4 recognition and control of hazards in the workplace including hazard reporting procedures
 - 7.5 injury/illness reporting procedures
 - 7.6 first aid procedures
 - 7.7 emergency response protocols ('Know the Codes'), including fire safety
 - 7.8 refusal to work
 - 7.9 infection prevention and control procedures including the use of personal protective equipment and hand hygiene
 - 7.10 early and safe return to work and modified duties
 - 7.11 workplace violence prevention including the Behavioural Crisis Alert (BCA) program
8. Employees who may be required to use a tight fitting respirator as part of their job assignment will be required to undergo respirator training. This is normally part of the new hire pre-placement process. Training records will be tracked and maintained by the Occupational Health, Safety & Wellness Department. .
9. New employees will be required to complete additional mandatory Corporate Health & Safety training within 2 weeks of attending general employee orientation. As part of their orientation, the new hire will receive notification of what additional Corporate Health & Safety training is required (e.g. Musculoskeletal Injury Prevention, WHMIS, Workplace Violence & Harassment Prevention).
10. Training records for mandatory Corporate Health & Safety will be tracked and maintained by People Services & Organizational Effectiveness (PSOE).

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11. On a regular basis compliance reports for mandatory Corporate Health & Safety will be sent out to each Manager by PSOE for appropriate follow up.
12. Failure to complete mandatory training may result in disciplinary action.
13. Mandatory Corporate Health & Safety will be developed in consultation with the Joint Health and Safety Committee (JHSC) and evaluated and reviewed on an annual basis at a minimum.
14. Depending on the nature of the work, employees may also be required to attend additional orientation (e.g. clinical orientation).
15. Health and Safety training needs will be evaluated regularly, but at least yearly, 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.
16. The Health & Safety Training program will be evaluated and training will be modified by Occupational Health, Safety & Wellness based on attendee feedback and based on the outcome of the training needs review .
17. It will be the responsibility of the Department or Unit to deliver and track job/task specific training (see section B below).

B) Department/Unit Training

In addition to corporate health & safety training, workers will require additional dept/unit specific training. This training will vary depending on the nature of the job and the job-related hazards.

1. This training should be provided to:
 - 1.1 new employees
 - 1.2 employees who transfer into the department/unit and/or who've not performed the task as part of their previous position at KGH
 - 1.3 employees who have been off work for an extended period of time of 6 months or longer (e.g. sick leave, leave of absences, etc)
2. Dept/unit/job specific training should include, but is not limited to:
 - 2.1 Emergency response procedures including designated evacuation area in the event of fire
 - 2.2 first aid station location & procedures
 - 2.3 job/task/equipment specific training including safe work practices and standard operating procedures (SOP's)
 - 2.4 use of personal protective equipment and where it is located
 - 2.5 controls in place for job specific hazards
 - 2.6 safe handling of chemical hazards that are specific to the dept/unit, spill kit location if applicable
 - 2.7 ergonomic/musculoskeletal injury prevention (e.g. assistive devices for lifting, pushing/pulling)

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2.8 safety communication (ie. location and intent of *Staff Health & Safety Binder*, *Safety Talks Bulletins*, and the *Staff Health, Safety & Wellness Boards*)

2.9 tour of the dept/unit to orient to equipment and other dept procedures (e.g. location of eyewash stations).

3. Dept/unit/job specific training must be documented and maintained by the department/unit on the Department/Unit Safety Training Checklist (Appendix A).
4. Additionally required task specific training along with the frequency of refresher training should be identified on the dept/unit's training matrix. This could include training such as: Lockout/Tag out, Restricted/Confined Space, Lift Truck training, Electrical Safety, Designated Substances (e.g. Asbestos), Transportation of Dangerous Goods (TDG), etc.
5. The need for refresher training will be determined by the Supervisor/Manager. Training records for refresher training/recertification should be maintained by the department/unit. The need for Refresher training should consider such factors as:
 - degree of risk associated with the task/equipment
 - whether there have been incidents/injuries associated with the task
 - frequency of performing the task- are staff familiar with it?
 - whether the task requires regular re-certification
 - whether equipment or procedure has been changed
6. Dept/unit/job specific training needs will be evaluated regularly by the Manager/Supervisor, but at least annually, with consideration to such factors as changes in legislation, whether there has been new or modified equipment or procedures, whether there have been changes in hospital policy, corporate focus/priorities, injury data in the dept/unit and identified knowledge/skill deficiencies among employees.
7. The effectiveness of Dept/unit/job specific training will be evaluated and training will be modified based on findings.

ALL MANAGERS/SUPERVISORS:

1. In addition to the above training requirements identified for all employees, Managers/Supervisors will receive additional training to assist them in carrying out their responsibilities under the Occupational Health & Safety Act and KGH policy.
2. This training will be required for New Managers/Supervisors to the hospital and for those employees who are promoted to Manager/Supervisor level.
3. Training will include:
 - Information pertaining to roles and responsibility as a Supervisor (Supervisor Competency) including general orientation to KGH Health & Safety policies and processes.
 - Principles of hazard recognition and control including application of a hazard risk rating
 - Conducting workplace inspections
 - Conducting Incident Investigations

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4. Training will be arranged by Occupational Health, Safety & Wellness and will be provided by external trainers and/or by the Occupational Health, Safety & Wellness department. Records for such training will be maintained by Occupational Health, Safety & Wellness.
5. Formal training will be supplemented with other training/communication via the following:
 - Leadership Exchanges sessions led by HR Advisors
 - Leadership Exchange Newsletter
 - Safety Talks Bulletins
 - Health & Safety updates at Leadership Forum
6. Records of this additional training/communication will be maintained by those who sponsor the session or send out the information.
7. Training needs will be regularly assessed with consideration to such factors as: legislative changes, the priorities of the organization, changes in hospital policy, and knowledge/skill needs of KGH Managers/Supervisors.

AFFILIATES:

*Note- All KGH Affiliates required hospital ID (either Photo ID or Temporary ID).
For KGH satellite locations, procedures will be modified.*

A) Construction and Maintenance-related Contractors:

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

B) Learners

Health and Safety Orientation material will be provided to learners who are undertaking a placement at the hospital to provide information on hospital expectations pertaining to health and safety and to ensure their learning experience is a safe one.

C) Volunteers

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

D) All Other Affiliates

The health and safety training required for affiliates will vary depending on whether the Affiliate is considered to be short term or long term.

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Short-Term Affiliate: affiliate (e.g. vendor, service contractor, consultant, working visitor, etc) who works on hospital premises periodically or for less than 30 consecutive days.

1. All short-term affiliates must obtain a hospital ID Badge upon arrival at the hospital. Whether the affiliate obtains a Temporary ID badge or Photo ID badge depends on how long they will be on site.
 - < 1 week - Temporary ID badge (Security Control Centre- Davies 1).
 - > 1 week or repeated visits- Photo ID badge (Security Office -Dietary 1).
2. Prior to receiving the ID Badge, the affiliate will be required to review and sign off on the 'Hospital Health & Safety Requirements for Affiliates' (Appendix B) which will be available at both Security locations (Davies 1 Control Centre and Dietary 1).
3. The Hospital Health & Safety Requirements for Affiliates (Appendix B) is accessible from the KGH Internet and Intranet and can be emailed to the affiliate in advance for review is so desired, however the sign off must occur at Security on the KGH Sign In/Sign Out Log (Appendix C).
4. For those affiliates who are on a service agreement for a set period of time and periodically come into the hospital, the Hospital Health & Safety Requirements for Affiliates (Appendix B) will initially reviewed and signed off on, and will be reviewed and re-signed on an annual basis thereafter and whenever their hospital ID badge is re-issued.
5. The Emergency Management, Security and Life Safety Department will maintain the KGH Sign In/Sign Out Log (Appendix C) with all affiliate sign offs of the "Hospital Health & Safety Requirements for Affiliates."
6. For affiliates working off site at one of KGH'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 will be maintained by that facility.
7. Supplied labour/temp agency staff- specific orientation to the dept/unit where they are working will be also be required (see Department/Unit Safety Training Checklist- Appendix A). The completed form should be forwarded to Recruitment Services in People Services & Organizational Effectiveness (PSOE). For supplied labour/temp agency staff working off site at one of KGH's satellite facilities, the form should be maintained by that facility.

Long Term Affiliate: affiliate, (e.g. Corporate Consultant, Contracted Security staff, Community Care Access Centre staff, Researchers/Research Staff) who works on hospital premises for greater than 30 consecutive days.

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1. All long term affiliates must obtain a hospital ID Badge upon arrival at the hospital. A Photo ID badge should be obtained from the Security Office in Dietary 1.
 2. Long term affiliates are required to complete "Health & Safety Orientation for KGH Affiliates." This training is accessible from the KGH Internet and Intranet but will also be attached to any agreement that is formulated between the hospital and the Affiliate/Employer.
 3. Records of this training should be maintained by the affiliate's Employer.
 4. This training will include a review of:
 - a. The hospital's Health and Safety Policy
 - b. Rights & Responsibilities of workers
 - c. Recognition and control of hazards including hazard reporting procedures
 - d. Injury/Illness reporting procedures
 - e. First aid procedures
 - f. Emergency Response protocols ('Know the Codes') including fire safety
 - g. Infection prevention and control procedures including the use of personal protective equipment and hand washing expectations
 - h. Workplace Violence
 - i. WHMIS awareness including accessing MSDS's.
 5. Dept/unit/job specific training may also be necessary to ensure the affiliate is oriented to any specific safety procedures and policies. Such training must be documented and maintained by the department/unit on the Department/Unit Safety Training Checklist (Appendix A).
 6. Random audits will be conducted by the hospital to verify completion of required training.

References

Occupational Health & Safety Act (R.S.O. 1990), Health Care Regulations (O. Reg 67/93), Hospital Identification, Policy #02-010 (2011.08). KGH Administrative Policy Manual,

Authorizing Signature

Leslee Thompson
President and Chief Executive Officer