



First Nations Health Authority
Health through wellness

Basic Safety Training (BST)

Occupational Health & Safety

safetymatters@fnha.ca



Welcome to Basic Safety Training

This course is mandatory safety training for all workers as prescribed by the BC Occupational Health and Safety (OHS) Regulation.

There are two parts to the module: this presentation pdf file and a quiz to evaluate your learning. We suggest you have both documents open and answer the quiz questions as you go through the course.

The questions have been designed to:

- Ensure you know the location of safety information and resources
- Help you identify risks in your area
- Provide your input on appropriate safety measures

This course can be completed over several sessions, so make sure you regularly save your Quiz PDF and do not lose any work you have done on it. Unfortunately this file does not automatically track how far along you are in the process, so if you shut down your computer you will have to remember how far you are when you re-open it and renew your studies. If you have any questions about the content or process please email our safety team at safetymatters@fnha.ca and we will reply within one business day.



Why do we do this training?

To meet regulatory requirements of Workers Compensation Act Part 3 & OHS Regulation Part 3: Young or New Workers

FNHA's commitment to worker safety actively practices the six shared values and meets the seven directives.

A safe and secure workspace supports worker's wellness; protects them against injury and improves the quality of services we are able to deliver to our clients.





Because **SafetyMatters!**



- Safety and health are essential for wellness
- Safety starts with each one of us; achieving and maintaining a safe and healthy environment is a shared responsibility
- A safe workplace supports quality client care
- Safety consists of preventive activities and responsive activities
- How will you contribute to FNHA's safety culture?
- You can email safetymatters@fnha.ca with safety concerns



Learning Outcomes

- Increase familiarity with the Workers Compensation Act and OHS Regulations
- Understand the organization's safety policy and executive directives
- Explain the importance of hazard recognition and regular workplace inspections
- Identify the risks posed by FNHA's top safety hazards and the main procedures used to prevent injury
- Describe and summarize the difference between Workplace Violence/Aggression and Workplace Bullying and Harassment
- List fleet vehicle use requirements and describe distracted driving hazards
- Identify what incidents to report, how to report and follow-up




Occupational Health & Safety (OHS) policy documents

The purpose of the OHS policy is to minimize and/or prevent injuries and to foster the safety and security of First Nation Health Authority (FNHA) workers, visitors, and contractors

This policy is applicable to all FNHA workers and all FNHA workplaces


ACTIVITY: Find and bookmark the OHS policy documents under [Resources & Tools](#) - Safety & Security - Corporate Policy



First Nations Health Authority
Health through wellness

First Nations Health Authority
Board Policy

Name	Occupational Health and Safety Policy	
Category	Safety and Security	
Type	Corporate	

For Board Secretariat (do not fill this in)		
Document #	Effective	
SAS-18-002-004	November 1, 2018	
Board Approved Date	Verified By	Authorization (BoD Motion #)
November 1, 2018		MOTION 1118-BOD-01J

1.0 Purpose

- 1.1 The purpose of this policy is to establish principles and guidance for occupational health and safety at First Nations Health Authority (FNHA).
- 1.2 This policy supports all 7 Directives and the Shared Values.

2.0 Scope

- 2.1 This policy applies to Workers and the Board of Directors (Board).
- 2.2 This policy applies to all Workplaces.
- 2.3 Provisions for Workers who occupy positions subject to a collective agreement will be administered in accordance with the applicable collective agreement. In the event that the relevant collective agreement is not applicable, then the provisions of this policy will apply.

3.0 Policy Statements

- 3.1 FNHA is committed to establishing and maintaining a work environment that promotes the health, safety, and wellness of Workers.
- 3.2 FNHA will comply with the *Workers Compensation Act* and *Occupational Health and Safety Regulation*.
- 3.3 Cultural Safety and Cultural Humility will guide occupational health and safety practices.
- 3.4 FNHA will establish measures to identify, control, investigate, and monitor Workplace Hazards, Safety Incidents, and Near Misses.
- 3.5 In addition to general management of safety risks, FNHA will develop safety programs in the following priority areas:
 - (a) Violence/psychological harm,

Occupational Health and Safety Policy Page 1 of 6



Employer Responsibilities

The Workers Compensation Act outlines key responsibilities for Employers, Managers/Supervisors and Employees.

- Employers must ensure that there is a structured safety program in place that:
 - Identifies potential risks facing workers
 - Puts adequate safety measures in place to protect workers against the risks
 - Trains workers on these safety measures
- Mandates that employers ensure safety documentation such as; safety training records, inspection reports, incident reports and incident investigations are completed and retained



Supervisor/manager responsibilities

- Managers/supervisors have the responsibility to ensure:
 - Workers reporting to them are aware of the hazards associated with their job and the control measures in place to protect them from injury are effective
 - Workers are following policies and procedures and taking safety training that is offered
 - Workers are wearing personal protective equipment provided for them
- Managers/supervisors are responsible to take the lead on investigations, in consultation with the OHS team, into incidents in which their workers are involved.



Worker Responsibilities

- Work in a safe manner
- Know hazards in your work area
- Follow safe work procedures
- Use safety equipment provided
- Participate in safety training
- Report hazards/practices/conditions in a timely manner
- No horseplay, bullying or harassment

Consider:

- a) Which safety hazards concern you most in your job?
- b) Have you had safety training for these concerns?
- c) What measures would you suggest to prevent injury from these concerns/hazards?



Worker Rights

All workers have the following rights under WorkSafeBC:

- **Right to know**
 - Be given the information, training and supervision you need to protect yourself
- **Right to participate**
 - Select or be a joint occupational health and safety committee member
 - Report unsafe conditions and practices
- **Right to refuse**
 - Refuse work that you believe to be dangerous to yourself or you coworkers by working with you manager and following the procedure laid out under 3.12 of the WorkSafeBC Occupational Health and Safety Regulation



Right to refuse unsafe work

Remember: Workers are protected from discriminatory action for raising/using their rights by part 3.13 of the OHSR.

(1) A worker must not be subject to discriminatory action as defined in [section 150 of Part 3 of the *Workers Compensation Act*](#) because the worker has acted in compliance with **section 3.12** or with an order made by an officer.

[Parts 3.12 and 3.13 of the OHSR](#) outline a respectful process for getting situations resolved.

1. Worker reports work refusal to supervisor
2. Supervisor investigates
3. Investigated in presence of another worker (JOHSC)
4. Consult with OH&S
5. Contact WSBC Prevention officer (last resort)



Right to refuse

Here are some examples of unsafe work that may require a change in schedule or a delay:

- A community engagement coordinator is scheduled to visit a community 90 km's away but a snow storm is coming in – the employee notifies their manager of the risk and reschedules the trip for a later date.
- An environmental health officer is visiting a remote community to do a building inspection; the community is only accessible via logging road. There was a windstorm the night before and trees have fallen on the road. The EHO delays the trip or reschedules it for another day, notifying the client and his/her supervisor.
- A nurse is called in to an after-hours emergency. She/he can tell from the call that the patient has been involved in a violent encounter and that the other party may also be present. The nurse delays attending to the nursing station until first responders or the RCMP can attend to ensure the safety of the worker and others.
- Maintenance technician is taking a water taxi into a community. The operator starts to pull away from the dock without giving him the safety orientation. The technician asks where the life vests are and the operator tells him there are none. The staff member refuses the trip until the operator can produce a life vest and postpones the trip if a life vest is not available.



Regulatory requirements

FNHA's Occupational Health and Safety program strives to be fully compliant with all of the regulatory requirements mandated by WorkSafeBC.

ACTIVITIES

Find the Workers Compensation Act [here](#). Part 3 addresses topics such as:

- General duties of employers, supervisors and workers
- Joint Occupational Health and Safety committees and worker representatives
- Accident reporting and investigation

Find the BC Occupational Health and Safety Regulation (OHSR) [here](#).

Follow these links or find them on the OHS Team Site on the Bighouse or simply contact safetymatters@fnha.ca.



Occupational Health and Safety team provides

- Safety education and training
- Advice to Joint OHS committees
- Assistance to managers to complete risk assessments
- Assistance to managers to complete incident investigations
- Policy and procedures development
- Program reporting to the Board and to senior executive
- Liaises with WorkSafeBC on behalf of FNHA

Contact us at safetymatters@fnha.ca



Where to find OH&S resources

1. The Safety Board located in your workplace contains OHS Policy and Directives, first aid instructions (if applicable), Joint OHS committee meeting minutes (last 3 months) and instructions for reporting incidents.

ACTIVITY: Where is the Information Safety Board in your work area, and is the information current?

2. Bighouse OH&S team site

ACTIVITY: Bookmark the [OH&S team site main page](#) and explore:

- Find the 'See what's new' topics
- Find the 'My Safety at work' list of topics and explore one that interests you
- Scroll down the page and find the section with OH&S Forms and Shared Documents. This is where you can find reporting forms, workplace inspection checklists and Safe Work Procedures.



Joint Occupational Health and Safety Committees

- Each workplace with 20 or more employees is required to have a joint occupational health and safety committee.
- Each workplace with 19 workers or less employees are required to have a designated safety representative.
- FNHA has the following safety committees in place:
 - Park Royal
 - Sinclair Centre
 - United Kingdom Building
 - 1166 Alberni
 - 1138 Melville
 - Interior Region
 - Vancouver Island Region
 - Northern Region
 - Fraser Salish Region
- Committee membership and meetings are structured to comply with the *Workers Compensation Act (WCA)*. The committee membership consists of both employer and worker representatives, each of which contributes a co-chair. The committee must be comprised of at least 50% worker representatives.



Joint OHS Committee responsibilities

- These committees must meet once a month to review safety measures in place and review any injuries that may have occurred in their work area.
- The last three months' meeting minutes must be posted on the information security boards so that all staff can see what is being discussed and acted upon.
- Member duties include:
 - Identify situations that are unsafe or unhealthy
 - Bring forward complaints from workers
 - Recommend training to the employer where gaps are identified
 - Advise employer on programs and policies
 - Ensure that incident investigations and regular inspections are carried out
 - Participate in inspections, investigations and inquiries

ACTIVITY: Can you name two worker reps on your joint occupational health and safety committee?



Hazard Identification / Workplace Inspections

- FNHA must ensure that regular inspections are made of all workplaces, including buildings, structures, grounds, tools, equipment, machinery and work methods, and practices, at intervals that will prevent the development of unsafe working conditions.
- At FNHA workplace inspections must be conducted monthly at every site. Visit the [OHS Workplace Inspection page](#) for more information on how to conduct a workplace inspection
- A workplace inspection is a search for hazards that may cause injury to workers so the hazard can be removed. If the hazard cannot be removed then adequate safety measures must be put in place to adequately protect employees from injury.
- It's easy to do! Download an Inspection checklists from the OHS team site (OHS Forms and Shared documents > Workplace Inspections). The checklists contain the instructions for carrying out and posting the inspection and following up on corrective actions.



Hazard Reporting – when to report and how

- If you come across a workplace hazard, remedy it (e.g., wipe up a spill or call housekeeping) or report it using the [Worker Hazard Report form](#) immediately with a copy to your manager. Do not wait for the next monthly inspection to address the issue.
- Examples of workplace safety hazards include:
 - empty cardboard boxes piled in a corner act as extra fuel in the event of a fire
 - a fire extinguisher that is past due for servicing
 - clutter on the floor in a storage room that impedes access to emergency equipment (e.g., first aid or emergency kits, high vis vests)
 - fall hazards from overflowing open shelves
 - book shelves not secured to the wall
 - unsecured oxygen tanks or old oxygen tanks in a storage room
 - lack of emergency procedures posted
 - faulty access doors that are supposed to prevent unauthorized personnel from entering an area but don't.



Top Safety Hazards

FNHA workers exposed to the highest safety risks are those who deliver health and other services to our remote communities and/or those whose job requires them to travel to communities where travelling alone and various road and weather conditions may provide special safety concerns. The top safety hazards at FNHA are:

- Travel
- Musculoskeletal injuries due to poor ergonomics
- Violence in the Workplace
- Working Alone or in Isolation
- Occupational exposures to infectious disease or bloodborne diseases

This course is designed to provide workers with a basic introduction to the FNHA Occupational Health and Safety program. If your position requires you to deliver services to communities and/or involves travel outside of the lower mainland you are required to take the Advanced Safety Training modules which address the specific safety measures.



Tolerance
Respect
Humanity
Reflection
Acceptance
Reconciliation
Safety
Humility
Cultural



Commitment to Cultural Safety and Humility

- When we engage in service from a position of Cultural Safety and Humility we are acknowledging the disruption of First Nations health and wellness through a process of colonization and oppression that has led to a legacy of trauma and health and social inequities.
- Some community members we serve may experience a health crisis that forces them to seek care, they may be triggered by behaviours that remind them of past experiences.
- Cultural safety can be created when health care workers approach First Nations care with Cultural Humility while acknowledging the risks inherent in any health care setting.



Demonstrating commitment to Cultural Safety and Humility

We demonstrate commitment to Cultural Safety and Cultural Humility by being open to learning and self-awareness and by integrating relationship-based care into our professional practice. We focus our intention on working with clients in a way that honours their cultural traditions and protocols and helps them achieve wellness in a safe environment. This requires an understanding of the pressures they face and developing communication skills that may be new to you.



Workplace violence/aggression facts

Behaviours directed to a worker by a non-worker

- International research shows that approximately 25% of all workplace violence occurs in the health care sector
- Health care workers are more likely to experience workplace violence than other workers
- Workers in emergency, psychiatric and long term care facilities are at highest risk
- While persons in care are the most common perpetrators of violence, family members and professional colleagues may also be sources of violence and abuse

A key skill in preventing workplace violence incidents is to anticipate client triggers and to be aware of our own. To use crisis de-escalation communication strategies when you notice a client becoming agitated or angry. If that is not successful, call for assistance or remove yourself from a potential volatile situation.



What exactly do we mean by aggression/violence?

- In the workplace, aggression/violence may be worker to worker and client to worker (bullying or harassment aka lateral violence).
- Workplace safety legislation covers both but they are called different things and the procedures for investigating are different.
- When we talk about Workplace aggression/violence by non-workers (e.g., persons in care, community members, members of the public) we use the OH&S definition from part 4.27:

*Violence means the attempted or actual exercise by a person, **other than a worker**, of any physical force so as to cause injury to a worker, and includes any threatening statement or behaviour which gives a worker reasonable cause to believe that he or she is at risk of injury.*

- It's important to point out that workers who are the targets of domestic violence by intimate partners should inform their supervisors so that appropriate actions can be taken to protect co-workers in case the aggressive partner should shows up at the workplace.



Violence can be physical or verbal

- Any of these behaviours (physical and verbal) are considered acts of violence and need to be reported: hitting, kicking, pushing; pinching, grabbing, biting, shoving, slapping; swearing; verbal or written threats; obscene or harassing phone calls; inappropriate touching; sexual advances / assault; throwing objects
- Staff are required to report ALL incidents of violence, even if they seem minor. Investigating incidents, developing and following up on corrective actions and tracking incident trends are all ways organizations demonstrate due diligence. In order to prevent incidents from re-occurring they must be reported and investigated.
- Remember: **if you feel threatened or unsafe you need to report.**



Workplace Bullying vs Harassment

Bullying and harassment are defined as behaviours between workers in the OHS Regulation.

- **Harassment** is offensive behaviour based on discriminatory grounds as per the Human Rights Legislation
- **Bullying** is offensive behaviour not based on discriminatory grounds.
 - True bullying is defined by the WorkSafeBC policy as “any inappropriate conduct or comment by a person towards a worker that the person **knew or reasonably ought to have known** would cause that worker to be humiliated or intimidated”
 - Lateral violence is learned behaviour, often an intergenerational pattern of behaviour that resulted from frustration and feelings of powerless, a legacy of colonialization and oppression. It may be unconscious and the perpetrator may take responsibility for their behaviour when confronted

Employees are required to take the Respect in the Workplace course offered on the Learning Space. The procedure for bullying and harassment complaints are detailed in the Respectful Workplace policy documents.



The OHS Regulation says bullying is

Bullying behaviours are similar to those identified as 'violence' but are usually more subtle

- Behaviour that humiliates or intimidates
- Verbal aggression or name-calling
- Vandalizing personal belongings
- Sabotaging work
- Spreading malicious rumours
- Personal attacks
- Aggressive / threatening gestures
- Blaming/shaming
- Ignoring or excluding people
- Belittling
- Making snide comments

***It is the
impact
on the target
and not
the intent of
the aggressor
that
matters***



The OHS Regulation says bullying is not

When expressed in a respectful manner:

- Supervisors expressing a difference of opinion or offering constructive feedback or advice
- Supervisors making decisions relating to:
 - Job duties
 - Workloads and deadlines
 - Layoffs, transfers, and promotions
 - Work evaluation
 - Performance management,
 - Discipline, suspensions, or terminations



Possible results of chronic and systemic bullying

Workplace effects:

- Distraction that interferes with productivity
- Lower self-esteem
- Lower staff morale
- Higher absenteeism
- Staff turnover — targets of bullying and harassment and their co-workers

Employee effects:

- Physical illness (e.g., heart attacks, high blood pressure)
- Mental injury (physical changes in the brain due to prolonged stress, burnout which may result in poor treatment of others)
- Workplace injuries due to distraction



Steps to take if you feel targeted

1. Document the offensive behaviours objectively without inferring intent (date, time, what was said and who said it)
2. Have a conversation with the offending person that describes the offensive behaviour (When you said ____, I felt ____)
3. Explain that the behaviour is “unacceptable” (if they didn’t know before they know now)
4. Ask for a change of behaviour

The key is to state the behaviour is unacceptable. When you do this, one of two things may happen:

- A. The person will take responsibility, perhaps make an apology, and a change in behaviour is promised
- B. The offending behaviour continues and the person takes no responsibility for their behaviour



Steps to take (cont'd)

If you get result A, continue to monitor the behaviour and work on improving the relationship. If you get result B take action:

- Continue documenting the behaviour
- Enlist the help of your manager or another person to support and guide you to file a formal complaint. See the ***Respectful Workplace policy documents*** for the reporting procedure.



Lateral Kindness

These are a few ways we can begin to transform lateral violence into lateral kindness in our workplaces:

- Acknowledge that lateral violence exists and name it
- Recognize your colleagues – raising hands/kudos
- Lead by example; role-model kindness
- Learn active listening
- Practise healthy assertiveness in relationships
- Give and accept compliments
- Foster team effectiveness
- Name lateral kindness – displaying kindness wall
- Perform random acts of kindness
- Commit to personal self-awareness and authenticity



Working alone or in isolation





What does it mean to work alone or in isolation?

According to the OHS Regulation (4.20.1 – 4.22) Working Alone or in Isolation “means to work in circumstances where assistance would not be readily available to the worker (a) in case of an emergency, or (b) in case the worker is injured or in ill health.”

This definition takes into consideration that workers may be working at a time or in a facility location where assistance would not be readily available in case of an emergency. If you are not sure you are working alone or in isolation, ask yourself:

- If I am injured or an emergency occurs, how will I get help? What if I am unconscious? Will someone know to try to reach me?

Common FNHA examples include staff travelling alone to a community to provide services or nurses responding to emergency calls after hours at a nursing station.

Areas where workers work alone or in isolation either before or after regular working hours (whether in a health centre or office) should also use procedures to ensure they are aware of who they can call for help if the need arises.



Working Alone or in Isolation at FNHA

- Every position where FNHA workers are expected to work alone requires the development of site-specific and situational worker safety check-in procedures.
- Workers who work alone or in isolation for short or intermittent periods of time without being directed to do so are not considered to have been “assigned” to work alone. Be sure your manager is aware you are working outside of normal office hours.
- Each team must develop criteria for making check-in calls and communicate those expectations to all team members.
- At managers’ discretion, office workers may develop less formalized procedures to check in with co-workers when working outside of normal working hours.
- The OHS Directive and the Working Alone or in Isolation Procedure provide guidance on the development and implementation of appropriate check-in procedures.



Working Alone check-in procedures

FNHA contracts with **Replay Message Centre** for check-in services so we have people consistently available for ensuring staff safety while in the field and to ensure we are complying with Regulation.

- Workers set up a profile with Replay, before using the service, and provide an emergency contacts list
- Workers call the answering service at the start and end of a trip or shift and again at agreed-upon check-in times determined in advance by each team.
- Workers are assured that if they don't call at the next check-in time, Replay will first try to reach them then consult their emergency contact list and find someone who can locate them.
- If you work with persons in care or travel for work outside of the lower mainland, you can find more information about the Working Alone or in Isolation Procedures and in Advanced Safety Training.



Working Alone homework

Discuss with your manager and team the need for using the formalized check-in procedures through **Replay Message Centre (1-866-918-0291)**. This service should be used for travel outside of the office/facility; working after normal office hours may not require use of Replay but rather a less formal check-in procedure such as checking in with a co-worker also known to work late. Staff who work in the field and/or travel frequently should ask their manager to discuss criteria for use of Replay Message Centre at a team meeting. Regardless of which you use, a procedure needs to be developed and communicated to all team members.

Find set-up documents at the bottom of the [Working Alone or in Isolation page](#) on the OHS team site.



Workplace Health and Safety Rules

- All workers, persons in care and the public are expected to conduct themselves in a manner which respects the rights of others.
- All workers are expected to report to work physically and mentally “fit for work”.
- No employee shall be permitted to remain at work while their ability to work is affected by alcohol, drugs (prescription or non-prescription) or other substance, so as to endanger their health or safety or that of any other person.
- This includes not being under the influence of substances or in a state of fatigue.
- FNHA promotes a violence-free workplace. Any work-related threats or acts of violence against workers or their families are unacceptable.
- Workers are responsible for reporting to their supervisor and First Aid whenever they become sick or injured at work. All injuries, no matter how minor, must be reported immediately.
- Any unsafe acts or conditions encountered in the workplace must be corrected or reported to your supervisor.
- Workers must inform supervisors and First Aid when they have significant allergies which might be encountered while at work (e.g., bee stings, foods, scents, etc.).
- A complete list of [Health and Safety Rules](#) can be found on the OH&S team site on the Bighouse.



Driving for work





FNHA fleet vehicles

- FNHA provides fleet vehicles based on the type of job duties performed and the area in which travel will take place.
- The vehicles provided for remote locations are mostly all-wheel drive vehicles, and FNHA is always updating the fleet to make sure the vehicles are well maintained and replaced as required.
- Winter tires – mandatory for many BC roads between October 1 and March 31– are provided for extra safety.



Before you drive a fleet vehicle

- Before you drive a FNHA fleet vehicle you will be required to read the Fleet Vehicle Policy documents, meet the pre-use requirements, including training, sign the required forms (e.g., fleet use authorization form)
- Remember that while driving an FNHA fleet vehicle you are the steward of corporate property. Be sure your Manager has given you authorization to use FNHA fleet vehicles and that they have signed off on your Fleet Vehicle Use Authorization form. Do a quick pre-trip inspection before use; check vehicle for any damage, tires for pressure and ensure the insurance decal is still attached.
 - Take a moment to adjust the seat and controls if you drive various vehicles in the fleet
 - Abide by the vehicle use guidelines. Keep the gas tank at minimum half full for the next driver and remove any garbage and personal belongings.
 - Abide by Motor Vehicle Act laws and regulations.
 - Be sure there is an Emergency Roadside kit in the vehicle. If you do not, contact Fleet Services (604-693-6687) or fleet.corpserv@fnha.ca.



Fleet user responsibilities

In addition to the general requirements for driving a fleet vehicle, *pooled vehicle users* are responsible to:

- Ensure your manager has signed off on your Fleet Vehicle Authorization form and a copy has been sent to Fleet Services
- Notify your Regional Fleet administrator immediately if you notice something in the vehicle requires attention or repair
- Lock vehicle whenever unattended, and keep any valuables (cell phone, laptop, special equipment) locked in the vehicle and out of view to prevent break ins
- Report all vehicle incidents to your Manager and Fleet Services
- Pay for any violation tickets received while using the fleet vehicle
- Complete log book upon return and return all contents of vehicle pouch to your Regional Fleet Administrator or receptionist



Using personal or rental vehicles for work

- Take along an emergency kit and communication kit (cell phone and/or GPS device, satellite phone)
- Arrange with the rental company ahead of time to have winter tires available. Contact Corporate Services Travel team for assistance if needed.
- Understand the procedure for reporting a vehicle accident with the rental company and with ICBC.
- **Note:** When accidents occur during the course of your normal work duties, and you have an injury however minor, you have a choice to file a claim for compensation through either WorkSafeBC or ICBC. **Be sure you understand your rights** before deciding which avenue to choose. If you decide to pursue compensation through ICBC you are still responsible to file a Worker Incident Report to safetymatters@fnha.ca.



Distracted Driving -- expectations

The BC Motor Vehicle Act requires that drivers abstain from texting while driving

- Drivers can be distracted by cell phone use and other activities like:
 - applying make-up, eating
 - reaching for objects
 - programming navigation systems
 - fatigue
 - driver frustration (e.g., road rage)



FNHA Hazard Management Executive Directive and Travel Safety Procedure state that workers who decide to make or receive cell phone calls while driving must employ hands-free methods whether the vehicle is in motion or stopped at a traffic light.



Distracted Driving -- expectations

You are strongly encouraged to pull over to the side of the road to make or receive cell phone calls. Please abide by the following guidelines:

- Cell phones
 - Do not hold or operate by hand, even while stopped at a red light
 - If using cell phones, use hands-free operation only and place (one) ear-piece in ear before driving
 - Keep your phone out of reach while in the car or affix it to a holder to avoid a possible fine. Fines received while driving fleet vehicles or on work time are the employee's responsibility (a total of \$543 including demerit points for first-time offence)
 - Drivers in the Graduated Licensing Program (L or N drivers) are restricted by law from hands-free cell phone use
- Hand held audio players must be fixed to vehicle or driver's body
- Navigation systems must be programmed before driving and fixed to vehicle so view not obstructed
- Two way radios may be used with CAUTION to communicate with other drivers on resource/forest service roads



Reporting a vehicle incident

Workers must report all motor vehicle incidents.					
Fleet vehicles: follow steps 1-7 Personal vehicles: follow steps 1-7, omitting contact with Fleet Services and Regional Fleet Admin Rental vehicles: follow steps 1-7, omitting contact with Fleet Services and Regional Fleet Admin and adding any steps from the vehicle rental company					
	Accident	Vandalism	Theft of auto	Theft from auto	Other
1. Attend to any injuries and to the vehicle(s) a. If anyone is injured call 911 b. Move the vehicle(s) off the road if it is safe to do so c. Avoid discussing who is at fault for an accident	X				
2. Record details (driver, vehicle, witnesses, and incident scene). Use the <i>ICBC What to do after a Crash</i> form (or the back page of the Fleet Vehicle Log book) to assist.	X	X	X	X	X
3. Report the incident to FNHA immediately, or as soon as practical, to the manager/supervisor, to Fleet Services (604-693-6965) Monday to Friday 8:00 – 4:30), and to the Regional Fleet Administrator.	X	X	X	X	X
4. Obtain a police report	*	X	X	n/a	
5. Contact ICBC Dial-A-Claim for assistance a. 604-520-8222 (Lower Mainland) b. 1-800-910-4222 (elsewhere in BC, Canada or US)	X	X	X	n/a	
6. Submit an Incident Report within 24 hours: a. Driver (fleet vehicle): fill in <i>Fleet Vehicle Incident form</i> and send to Manager/supervisor and fleet.corpserv@fnha.ca	X	X	X	X	X
7. If employee had injury with time loss or medical aid OR incident was a near miss (potential to cause injury but didn't): a. Driver: also complete a <i>Worker Incident Report</i> within 24 hours. Email to safetymatters@fnha.ca and cc your manager/supervisor.	X	X	X	X	
*If there was an injury, a traffic violation or if damage is over \$1000					



Personal Protective Equipment (PPE) responsibilities

Employers are responsible for:

- Performing a risk assessment of the workplace and a Job Hazard Analysis for each team to identify and control physical and health hazards
- Identifying and providing appropriate PPE for employees
- Training employees in the use and care of the PPE
- Maintaining PPE, including replacing worn or damaged PPE
- Periodically reviewing, updating and evaluating the effectiveness of the PPE program





Personal Protective Equipment (PPE)

Examples of PPE in use at FNHA:

- Nurses – surgical gloves, masks, eye protection, gowns, respirators
- Dental Therapists – surgical gloves, masks, eye protection
- Environmental Health Officers – surgical gloves, eye protection, respirators
- Facilities/maintenance – steel-toed boots, fall protection harnesses and lanyards, high visibility vests, eye protection, hearing protection

Unless noted otherwise in a collective agreement or by department policy, workers are responsible for providing their own:

- Clothing for protection against the natural elements
- General purpose work gloves and appropriate footwear, including safety footwear
- Safety headgear such as hard hats

Your supervisor will inform you what PPE is required for your work location and how to use it properly.



Emergency Procedures

Emergencies and disasters can occur any time without warning. The better prepared you are, the more likely you will be able to react quickly, minimizing panic and confusion when an emergency occurs.

All FNHA work locations must have:

- An Emergency Procedures Plan in place
- An Emergency Evacuation diagram posted
- Regular drills several times a year
- Trained fire / floor wardens: these individuals will wear clothing like hi-vis vests and/or headwear that identifies them as floor wardens during an emergency, actual or exercise.
- Prior identification of persons requiring assistance

Homework question:

Your supervisor is responsible to inform you of the assembly area for your work location after everyone evacuates the office. If you don't know where it is, ask.



Working in or visiting a community

- First, secure an invitation to the community or arrange introduction to a community contact through the Regional Manager for the applicable region.
- Find out if there are any events in the community the week you plan to visit so your presence doesn't interfere. Call the regional office (e.g., Prince George, Oyster Bay) for contact information for the community's nurse or Health Director.
- Coordinate your visit with another department, if possible, to conserve demands on community resources.
- Plan accommodation well ahead of time. If you have concerns about the security or privacy of the accommodation, arrange to travel with a co-worker.
- If vehicle safety is a concern when relying on community drivers, you have the right to refuse unsafe work. Work with your manager to make alternate plans.
- Upon arrival workers are responsible to:
 - familiarize themselves with the emergency evacuation procedures (e.g., warning sound, assembly areas, tsunami safety zone) for that specific facility/community, and
 - establish a community contact who can include them in emergency notifications (e.g., flood, tsunami, wildfire).



Occupational First Aid facilities

First Aid facilities

- Park Royal: First Aid room in Suite 204 - to contact the First Aid Attendant call Park Royal reception (604-693-6500)
- Sinclair Centre: First Aid room in suite 540 beside the kitchen -- to contact the First Aid Attendant call Sinclair reception (604-693-6700)
- 1166 Alberni – call reception (604-693-6907)
- 1138 Melville – OHN treatment room
- Smaller sites – first aid available varies by location

If you are injured:

1. Seek first aid if available and report your injury to your supervisor.
2. Complete all four pages of the Employee Incident Report. This report form can be found at the bottom of the [Bighouse OHS Worker Incident Reporting page](#) Scan and email the report (4 pages) to safetymatters@fnha.ca.
3. If you require medical attention or miss work following the day of injury, start a WorkSafeBC claim by calling the Teleclaim line at 1 888 WORKERS (1 888 967-5377), Monday to Friday from 8 a.m. to 6 p.m.

The First Aid Attendant will advise as to next steps (e.g., see a doctor or return for follow-up visit to FA Attendant)

A large red exclamation mark graphic, with the dot being a solid red circle and the stem being a red rectangle with a small red square at its base. The exclamation mark is centered behind the text.

INCIDENT REPORTING



Report these incidents

Report these types of incidents if they arise out of the course of your work day and you:

- Require medical attention (or the First Aid attendant directs you to go to a hospital). This includes consulting with OCISM, LifeWorks or other therapist due to *psychological trauma*.
- The incident is a near miss (i.e., an unplanned event that did not result in injury, illness, or damage – but had the potential to do so)
- The incident results in time-loss (i.e., you are unable to return to your usual job function on any working day *after* the day of injury)
- The incident requires you to seek medical aid (e.g., hospital, walk-in clinic, physician, chiropractor, massage therapist, physiotherapist)
- The injury or accident results in a fatality, serious injury, major structural collapse or major release of a hazardous substance (these must also be immediately reported to WorkSafeBC)
- Incidents that involve violence or aggression



Incident reporting legal requirements

- Please make sure you report to your supervisor right away and complete the *Worker Incident Report form* so OHS can report to WorkSafeBC. Find the form at the bottom of the [Incident Reporting page](#).
- WorkSafeBC requires all accidents to be reported to them within 72 hours, to ensure there are no delays in an injury claim. This is the responsibility of OHS.
- All serious accidents must be investigated by the employee's supervisor/manager in partnership with the OHS team and a JOHSC worker representative.
- The investigation will look for root causes of the accident and recommend corrective actions to prevent similar incidents from recurring (e.g., training, safe work procedures).
- OHS regularly provides statistics on incident trends to senior management.
- **Nurses MUST report all incidents involving staff on a Worker Incident Report (WIR) form.**
 - If an incident involves both staff and patients, both the WIR and the appropriate nursing report form must be used.
 - Failure to file an WIR may jeopardize your claim being accepted. Fleet vehicle incidents must also be reported IMMEDIATELY. See slide 48 for details.



Filing claims forms following the incident

- If your injury requires medical attention or take time off after the date of the injury, you are required to call the WorkSafeBC Teleclaim line (1 888 967-5377) to start your claim. This step protects you and may reduce the time it takes for a decision to be made.
- Once the Worker Incident report is received, OHS will then submit the 'Employers Report of Injury' (form 7) to WorkSafeBC.
- Compensable injuries must be shown to have arisen out of your regular work. This means injuries that occur during breaks (lunch and coffee) may not be accepted. An accurate description of the circumstances of your incident helps WorkSafeBC make a decision on your claim more quickly.
- Ask your manager to assist you in reporting the incident and filing sick leave forms if you are off work



What to expect after the claim is filed

- Once you have reported, you may be contacted by WorkSafeBC to get more information about your incident.
- You can expect to hear from a WorkSafeBC Claims Officer by phone or by mail once a decision is made about accepting your claim.
- You may be accepted for health care costs (for visits to chiropractors or physiotherapists) and/or you may be accepted for wage loss.
- If you have time loss following the date of your injury you should arrange through your manager to submit leave forms to payroll for sick time while waiting to hear if your claim is accepted.
- If your claim is accepted for wage loss FNHA will be reimbursed for wages paid to you while you are recovering.
- Prompt reporting of your incident and the filing of the proper paperwork will reduce the risk of delays in payment for lost work time.



Return to work options

- If you are injured at work, the goal is to help you return to work as quickly as possible after the injury and the rehab prescribed by your General Practitioner.
- Gradual or modified return-to-work: Studies have shown that when employees return to work within 30 days of their injury, even if they work part-time at first or at modified duties, they are more likely to successfully integrate back into the job. They are less likely to suffer from depression due to the loss of social connections and loss of satisfaction that comes from meaningful work.
 - Gradual return-to-work: May include a shortened workdays with a plan to increase to full regular duties
 - Modified return-to-work: Employees regular work tasks are matched to functional abilities/restrictions for a period of time with a plan to increase to full regular duties



Return to work – what to expect

- Be sure to keep in contact with your WorkSafeBC claims officer and your manager while off work to give regular updates.
- Your manager works with the HR Business Partner and OHS with the goal of arranging a successful return-to-work once your physician clears you to return.



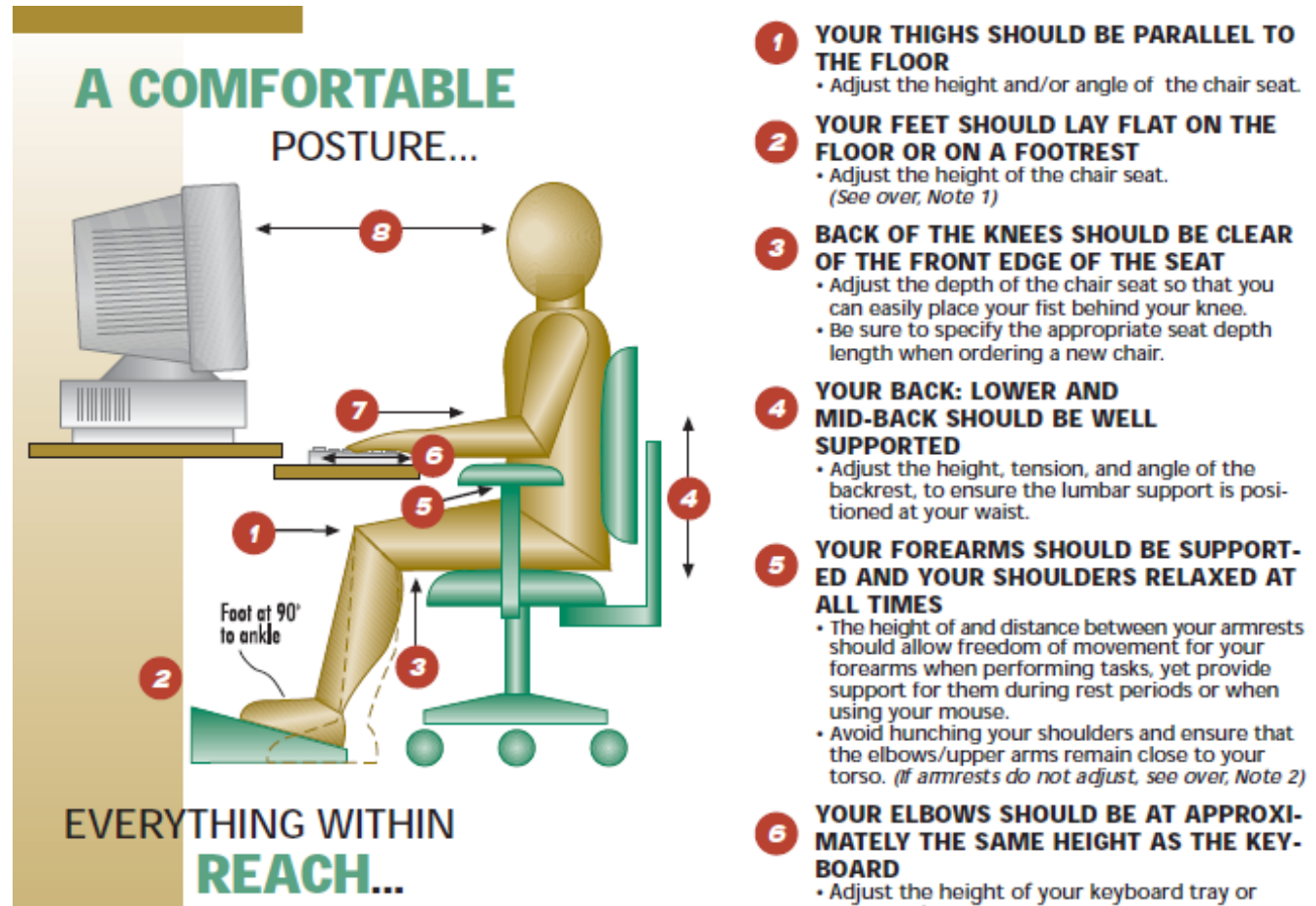
Ergonomics to prevent musculoskeletal injuries (MSIs)

- Musculoskeletal injuries (MSIs) are a group of painful disorders of muscles, tendons, and nerves. Injuries can result from overuse and develop over time. Work activities which are frequent and repetitive, or activities with awkward postures cause these disorders which may be painful during work or at rest.
- FNHA has an ergonomics program to address worker concerns/injuries from repetitive activities causing musculoskeletal injuries. Common causes of MSI injuries include:
 - Frequent driving
 - Prolonged sitting, keyboarding, and using mouse
 - Lifting, carrying, pulling or pushing loads
- Take Advanced Safety Training module 3 for more information on client handling, equipment handling and driving discomfort.
- You can find a number of resources on the [OH&S Ergonomics page](#) (look under Additional Resources) for safe lifting tips and setting up your workstation
- “It starts with me”. We ask workers to be proactive and take advantage of the tools we provide to make sure their workstations are set up for comfort. To start, refer to the chart on the next slide.



Setting up your sitting computer workstation

This chart is available on the [Ergonomics page](#) under Additional Resources (#1).





Do you need ergonomic assistance?

- If you need more help to make adjustments to your workstation components (monitor, chair, keyboard) view the Video listed as #3 in the Additional resources list.
- If you still require assistance, email safetymatters@fnha.ca for the link to the ROSA ergonomic self-assessment tool and the [Request for Ergonomic Assistance](#) intake form.
- Save the ROSA results and submit them along with the [Request for Ergonomic Assistance](#) form to safetymatters@fnha.ca
- Your request will be reviewed and you will be contacted to discuss implementation of ROSA recommendations. If you need new equipment, you will be advised of next steps.
- In some cases, OHS may recommend
 - A referral to the Disability Management Specialist, or
 - A full ergonomic assessment
- You can find the complete procedure for requesting ergonomic assistance in the Ergonomic assessment request procedure flow located on [this Bighouse page](#).

ACTIVITY: What do you think is the most likely ergonomic-related injury for your work area?





WHMIS 2015

- All workers are required to know about the Workplace Hazardous Materials Information System (WHMIS).
- The most common chemicals in use at FNHA are printer toner cartridges, fire extinguishers, cleaning supplies and hand sanitizer. Hand sanitizer contains a small amount of alcohol and may be a skin irritant.
- Some workers (e.g., Nurses, Environmental Health Officers, Dental Therapists) are exposed to chemical or biological hazards specific to their duties.
- It is the responsibility of all Managers/Supervisors to make their staff aware of what chemicals are used in their work area and sure staff know how to handle them safely.
- Consider being the go-to person in your work area. Ask your manager for approval and send a request to FNHA People Development to take the new updated [WHMIS 2015](#) online course.



Have you had your site safety orientation?

- The site safety orientation with your supervisor will cover everything in this training course in much more detail, specific to your work area.
 - Supervisor contact information
 - Emergency evacuation procedures for your site (fire, earthquake, bomb, etc.)
 - Task specific hazards
 - Who is responsible for Workplace Inspections
 - Location of hazardous products
 - Personal Protective equipment required
 - Training required (e.g., Violence Prevention, WHMIS)
 - Safe Work Procedures
 - Location of Information Safety Board
 - Identification of JOHS committee members
 - First Aid procedures and room location

ACTIVITY: If your supervisor has not provided you with a site safety orientation be sure to ask. The form is available on the Bighouse or by contacting safetymatters@fnha.ca



Optional safety training you may request of your manager (depending on work duties)

Online

- Safe driving for Work
- Winter driving
- WHMIS 2015
- Transportation of Dangerous Goods
- Confined Space awareness
- Underwater Egress (online version)
- Safe lifting
- Electrical safety for non-electrical workers

Classroom

- Defensive driving
- Joint Occupational Health & Safety Committee training
- Aircraft Ditching and Underwater Egress training
- First aid level 1 or level 2
- Lateral violence
- Nurse Safety Awareness training



References and resources

Look for specific safety resources under 'My Safety at Work' on the Bighouse [OH&S team site home page](#)

Answers to safety questions

- WorkSafeBC: [Safety at work](#)
- CCOHS: [OSH Answers](#)

Bullying /Harassment/Lateral violence

- WorkSafeBC: [Bullying and harassment resources](#)
- Valerie Cade: [Bully Free at Work](#)
- [The Crab In The Bucket](#): Denise Findlay and Teresa Golka



Occupational Health and Safety team

Walter Myers, Program Lead, OHS
Erin Bailey, Program Coordinator OHS
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Remember: “*It starts with me*”
Safety Matters!

Contact us at safetymatters@fnha.ca.



Next steps

- Thank you for completing the online Safety Orientation for New Employees training course.
- Please make sure you complete the accompanying quiz document so we have a record of your successful completion.
- Be sure to progress to the Advanced Safety Training modules if you work directly with clients or travel for work outside of the lower mainland.
- We wish you all the best in your work at FNHA and hope that you have a safe and enjoyable experience.
- If you have questions or comments on this training or any other workplace safety topics please contact safetymatters@fnha.ca.