



**Annual Learning Package**  
**Occupational Health & Safety**

Fall 2013

## **INTRODUCTION**

The goal of the Health and Safety Program is “the prevention of accidents and illness.” Healthcare facilities are complex organizations, which have a variety of potential health and safety hazards. Because there are a variety of occupations within the hospital, the nature of health and safety issues can vary depending on the type of work performed.

## **OCCUPATIONAL HEALTH AND SAFETY POLICIES**

Occupational Health and Safety Policies are available in the Administration & Human Resources Policy and Procedure Manual, the Occupational Health and Safety Manual, and Department specific Policies and Procedures for safety are in Department Manuals.

## **OCCUPATIONAL HEALTH AND SAFETY ACT (OHSA)**

This is the primary Act governing occupational health and safety law in Ontario. Within the last two years there have been additions and changes to the Act which directly effect healthcare.

1. The **Safety Engineered Medical Device regulation (O.Reg. 474/07)** requires the use of safety engineered hollow-bore needles wherever possible in healthcare settings.
2. Part III.0.1 on **Violence and Harassment** requires employers develop a program to address workplace violence and harassment.

### **Internal Responsibility System (IRS)**

The Internal Responsibility System forms the framework for the Occupational Health and Safety Act. It is based on the principle that everyone is involved and shares the responsibility for occupational health and safety.

### **Guiding Principles:**

1. **Personal Responsibility** – each person in the workplace is personally responsible for identifying occupational health and safety hazards/issues and seeking solutions.
2. **Inclusiveness** – everyone in the workplace is involved in IRS.
3. **Co-operation** – the goal of all parties is the same – the protection of life and health.
4. **Information flow** – there are no secrets about safety. All persons have the right to know information about hazards and the required controls.
5. **Pro-Active** – everyone needs to take action to prevent accidents.
6. **Accountability** – the employer must ensure all people are held accountable for their responsibilities for safety before an accident occurs

## **ROLES AND RESPONSIBILITIES UNDER**

# **THE “OCCUPATIONAL HEALTH AND SAFETY ACT” (OHSA)**

## **The Employer:**

- Ensures equipment, material and protective equipment that is required is provided, maintained and is used by the workers.
- Ensures measures and procedures are carried out
- Provides information, instruction, training and supervision to protect the health and safety of the worker
- Ensures supervisors are competent as defined by the OHSA
- Ensures supervisors and workers understand hazards and follow procedures and the OHSA
- Ensures a health and safety policy and program are written and posted annually
- Monitors the health of workers exposed to designated hazardous substances and keep records
- Takes every precaution reasonable to protect the worker

## **The Supervisor /Manager:**

- Must be competent and have knowledge of health and safety hazards in the workplace
- Advise workers of existence of potential or actual hazards which supervisor is aware
- Provide workers with written policies and procedures for protection of the worker
- Takes every precaution reasonable for the protection of the worker
- Ensures worker work with the protective devices, measures and procedures required by the Act and the regulations
- Ensure workers use or wear required Personal Protective Equipment as provided.

## **The Worker:**

- Must comply with the OHSA and organizational policies and procedures set out for health and safety
- Reports any hazards that may endanger themselves or fellow workers
- Is jointly responsible with the employer and supervisor for the safety of their work environment
- Complies with training requirements
- Knows and employs safe work practices
- Uses required Personal Protective Equipment as provided by the employer

## **RIGHTS OF THE WORKER**

The Occupational Health and Safety Act gives full basic rights to the worker as follows:

1. **THE RIGHT TO PARTICIPATE** in identifying and resolving Workplace Health and Safety concerns.
2. **THE RIGHT TO KNOW** about potential hazards – W.H.M.I.S.
3. **THE RIGHT TO REFUSE WORK** that they believe is dangerous to their own or other’s safety. The Act describes exact details for the process.
4. **THE RIGHT TO STOP WORK** can only be done by certified members of the Joint Occupational Health and Safety Committee. The Act sets out the process for dealing with dangerous circumstances.

## **JOINT OCCUPATIONAL HEALTH AND SAFETY COMMITTEE (JOHSC)**

Stevenson Memorial Hospital has a Joint Occupational Health and Safety Committee (JOHSC), made up of workers and management (at least 50% are required by legislation to be workers). The committee is a legislated advisory group that meets monthly.

### **\* YOU SHOULD KNOW WHO YOUR JOHSC REPRESENTATIVES ARE\***

The names of the committee members are posted on the Health and Safety bulletin board, outside the Cafeteria. Also posted are the:

- Occupational Health and Safety Act
- Occupational Health & Safety Policy
- Health Care Regulations
- Minutes of JOHSC meetings (minutes are also on server)
- Any orders received by the Ministry of Labour
- Ministry of Labour explanatory material

## **Workplace Safety & Insurance Board (WSIB)**

**WSIB** covers the cost for medical care and lost wages for approved claims resulting from a workplace injury, or illness. The Occupational Health and Safety Department must submit claims to the WSIB within three working days of the accident/injury. Late submissions are subject to fines by the WSIB.

\* Report workplace injuries in person to Occupational Health and Safety or leave voice mail at ext. 3204 \*

## **EARLY AND SAFE RETURN TO WORK PROGRAM**

The employer has a duty to accommodate workers who are unable to return to their regular duties due to illness or injury by determining if they are able to return to a modified work program in keeping with the worker's functional abilities.

SMH has a Modified Work Program available through the Occupational Health and Safety Department. If you are off with a work-related injury, you must update Occupational Health and Safety regularly.

## **REPORTING INJURIES/INCIDENTS**

All injuries and incidents must be reported through the electronic **Safe Point Incident Reporting System**. All employee incidents are viewed by the Occupational Health and Safety Department and the employee's supervisor. You must also notify the Occupational Health and Safety Department in person or by leaving a voice mail at ext. 3204.

# **TYPICAL HEALTH AND SAFETY HAZARDS IN HEALTHCARE**

## **Musculoskeletal Injuries**

- Client Handling
- Slip and Falls
- Materials Handling
- Workstation Ergonomics

## **Exposure injuries**

- Handling of sharps such as needles and instruments
- Blood and Body Fluid
- Communicable Diseases

## **Latex allergies**

- Exposure to latex products

## **Violence in the Workplace**

- Harassment & Bullying
- Domestic Violence

## **PREVENTION AND RISK REDUCTIONS**

Prevention and risk reduction are very important to decrease accidents and incidents in healthcare facilities.

### **General Principles to follow:**

- Early recognition and reporting of actual or potential safety hazards
- Reporting of any incidents or near misses
- Being knowledgeable about workplace hazards
- Following established policies and procedures
- Wearing personal protective equipment when indicated
- Reading product labels
- Completing health and safety training programs

### **Strain and Sprain Injuries:**

Because healthcare workers are involved in varying jobs, the potential strain and sprain risks differ. For example:

- *In Patient Care* areas potential injuries can occur during patient moving and transferring activities
- *In Support services* potential injuries can occur while moving or lifting objects or while working with heavier equipment or from a slip and fall due to wet or greasy floor surfaces
- *In Office areas* potential injuries can occur from stress and strain injuries as a result of poor ergonomic set up, or poor body mechanics while working at a computer or desk.

**There are a number of ways healthcare workers can prevent and/or reduce the risk of strain and sprain injuries including:**

- Improving lifestyle factors to prevent injuries
- Practicing good principles of body mechanics and ergonomics
- Assessing and planning prior to moving objects or patients
- Using lifting aids such as carts and mechanical lifting devices
- Preventing slips and falls by cleaning any spills or carefully marking and roping off any spill until cleanup is possible
- Seeking help from others when moving or lifting items

## **Lifestyle Factors**

**Workers can improve their lifestyle factors by:**

- Maintaining an ideal body weight
- Stretching to maintain flexibility to prevent soft tissue injury
- Strength training for back and abdominal muscles to support the spine
- Maintaining good posture while standing or sitting
- Practicing stress management techniques to help prevent injury
- Getting adequate rest, since tired muscles are more prone to injury

## **Principles of Good Body Mechanics**

**Additional ways to reduce injury are to follow the principles of good body mechanics:**

- Keep your back straight to maintain the three “S curves of your spine”
- Bend your knees and lift using your legs
- Tighten your abdominal muscles when lifting
- Keep the object or person you are lifting close to your body
- Synchronize your movement with the patient/co-worker(s)
- Avoid reaching overhead to lift, it puts too much strain on your neck
- Keep your feet, shoulder width apart, to provide a good base of support
- Pivot/turn your entire body instead of twisting
- Call for assistance - Know and respect your own limits

## **Moving or Lifting Objects**

There are several **FACTORS TO CONSIDER** before lifting an object:

<b>Weight</b>	Try to determine the weight of an object before trying to lift it. You can do this by trying to move it with your foot.
<b>Size and Shape</b>	An object may not be heavy, but very large or awkward. Use a cart or request some help for moving these objects.
<b>Using a Cart</b>	Push instead of pull (you can push twice as much as you can pull without strain). Keep the cart as close to you as possible.
<b>Height</b>	Consider how tall the object is, since carrying or moving too much limits your vision.
<b>Location</b>	Consider where it is going to be placed, since lifting too high can injure your back or neck. Use a step-stool if you need it and let your arms and legs do the work.
<b>Distance and Pathway</b>	Before you even consider moving an object, you need to plan. Ensure you have a clear pathway without any hazards in the way. Keep in mind how far you have to carry the object; it may feel heavier the longer you carry it.
<b>Loose Parts and Disassembly</b>	The number of parts may cause some problems. Disassemble the object into a manageable number of parts. This may take more time, but not as much time as it will take to heal an injury.
<b>Time</b>	Don't rush. Rushing will only cause you to forget about all these factors and may increase your risk of injury. Make sure you wait for help if you need it.

## **Moving or Transferring Patients**

### **Factors to Consider**

If you spend much of your time transferring patients, here are some guidelines to consider:

#### **Patient Factors**

Your patient's condition:

- Weight and strength to assist during the move
- Language/communication barriers
- Physical disabilities/weaknesses
- Cognitive status
- Number of objects to be transferred with the patient, (e.g. IV pole, catheter)

#### **Environmental Factors**

Environmental factors that may decrease a risk:

- Adjusting height of bed/exam table
- Locking the brakes on the wheelchair or stretcher
- Ensuring the pathway is clear
- Preparing and positioning of the chair or stretcher where the patient is being moved to
- Assessing the need for lifting devices

## Use of Mechanical Lifts

Equipment or manpower available to assist:

- Various lifting and transferring devices are available at Southlake
- You should know their location and how to properly use them

Your own capabilities or limitations:

- Always plan ahead and determine where the patient is going, (i.e. chair, toilet)
- Call for assistance. Know your limits

## Dealing with Patient Falls during Moving and Transferring

If a patient starts to fall during a transfer, avoid trying to prevent the fall completely. In many cases, this may lead to an injury. It is better to gently guide the patient to the floor, if possible. If you are near a wall, gently push the patient against it to slow their fall.

## BLOOD AND BODY FLUID EXPOSURES

Blood and body fluid exposure follows contact with blood or potentially infectious fluids of another person (e.g. patient) by sharps, bites, laceration, mucous membrane contact (splash or spray in the eye, mouth and/or nose) or contact with non-intact skin (e.g. chapped skin, dermatitis, or eczema).

### Sharps

Sharps are defined as any object which could readily puncture or cut the skin of an individual. Common examples of hospital sharps are:

- Needles used in IV starts, blood draws, injection and suturing
- Broken glass such as vials, ampoules or pipettes
- Scissors, razor blades, knives as used in surgical procedures or box cutters
- Anything that could puncture through a garbage bag, risking unexpected injury and exposure to environmental staff

### Handling Sharps

Important handling and disposal practices:

- Never recap needles
- Always use safety engineered medical devices (SEMD) provided .
- Immediately discard all actual and potential sharps into appropriate containers and NOT into regular garbage containers
- Replace sharps container when  $\frac{3}{4}$  full; **do not** fill above recommended fill line.
- Never place broken glass in a regular garbage bag. Dispose in a cardboard box marked "broken glass"
- All surgical blades should be placed in the sharps container and separated from handle using a haemostat

***Failure to dispose of sharps appropriately puts your co-workers at risk of injury and/or infection***



## **Reporting Blood and Body Fluid Exposure Hazards and Injuries**

- Report all potential or actual blood and body fluid hazards to supervisor
- Report all blood and body fluid exposure injuries promptly to the Occupational Health and Safety Department in person or by leaving voice mail at ext. 3204
- In the off hours, go to the Emergency Department where Blood and Body Fluid Exposure Kits are located to ensure that you receive appropriate follow-up care
- Complete the online Safe Point incident report

## **COMMUNICABLE DISEASE EXPOSURES**

A communicable disease is an infectious disease that can be transmitted by direct or indirect contact with an affected individual or the individual's secretions. Transmission of communicable diseases can be prevented by following Routine Practices, e.g. wearing Personal Protective Equipment as required and ensuring immunity information is up to date for Hepatitis B, measles, mumps, rubella, and varicella as well as documentation of tuberculosis screening.

If you are exposed to a communicable disease contact Occupational Health and Safety to receive appropriate information and follow-up care.

## **LATEX ALLERGIES**

Healthcare workers should also be aware of the potential risks of natural rubber latex sensitivity/allergies that can occur from the repeated exposure to latex products.

The allergic reaction is caused by the sap from the rubber tree found in products made of natural rubber. It may occur through:

- Direct skin contact
- Contact with mucosal surfaces
- Aerosolization

**A Common source of latex in hospitals is sterile latex gloves.**

### **Symptoms:**

Symptoms of a latex allergy can include:

- **Contact Dermatitis of the hand** – including dry, flaky or itchy rash with cracks or sores or dry skin, crusted and thickened with hard bumps, sores and skin blister, usually on the hands
- **Immediate Allergic Reactions** – rash, itching and hives, hay fever type symptoms, asthma symptoms or anaphylactic shock

### **Prevention:**

At SMH, measures have been taken to provide a latex safe environment.

Examples include:

- Banning of Latex balloons
- As much inventory as possible has been replaced with latex free inventory

If you suspect you have a latex allergy, notify Occupational Health and a proper assessment will be done.

## **SPENDING MOST OF THE DAY AT A DESK**

### **Ergonomics**

Know when your back is properly aligned – your arms, shoulders, and hips are “stacked” in a straight line.

- Use a chair with good support of your lower back or add a lumbar support to your chair if not already built in
- Ensure chair is adjusted properly
- Use a footrest to reduce strain on your back if necessary
- Avoid crossing your legs when seated at your desk or workstation
- The top of the monitor should be approximately at eye level
- Keyboard should be directly in front and at elbow height and on a slight incline
- Keep your wrists in a neutral position without hyper-flexing them
- To prevent repetitive strain injuries, use assistive devices such as gel mouse pads, keyboard support pads, and/or a scrolling mouse
- Keyboard and mouse should be at the same height
- Avoid cradling the phone between your head and neck
- Consider a hands-free headset if you are on the phone a lot
- Use document holders to keep papers in an upright position
- Ensure adequate lighting and if there is a glare from your monitor, consider an anti-glare screen
- If you spend most of the day sitting, shift your position frequently to eliminate strain
- Make sure frequently used items are within reach
- Do not stretch or twist to obtain an item

### **NOTE:**

***An ergonomic self-assessment package is available from the Occupational Health and Safety Department by calling ext. 3204. The Occupational Health and Safety Department is available to arrange for an assessment of your workstation for ergonomic concerns.***

## **HAZARD RECOGNITION AND REPORTING**

A workplace hazard is any condition or action that has the potential to cause loss due to an injury, illness or disease. Recognition, reporting and resolution of hazards in the workplace is everyone's responsibility.

Workplace hazards include but are not limited to:

- Physical: materials handling, slips and trips, extreme temperatures, radiation, electricity, energy sources, pneumatics, hydraulic, gravity, noise, vibration, heat stress, cold stress
- Biological: virus, fungi, bacteria, parasites, mould, blood and body fluids
- Chemical: fumes, mists, vapors, cleaning solvents and dusts (grinding, asbestos removal)
- Musculoskeletal: client handling, ergonomics, repetitive motion, awkward postures
- Psychosocial: fatigue, shift work, stress, working alone, workplace violence, working conditions
- Hazards specific to machinery, materials, tools and equipment in use
- Hazards related to nonexistent or inadequate work processes and/or work environments
- Hazards created when proper work practices are not followed

Workers should report hazardous conditions verbally and/or in writing to their supervisors. Workers should also alert nearby workers and contain and/or block access to immediate hazards including removing defective equipment from service and completing a maintenance requisition or bio-medical notification.

**NOTE:** For hazards requiring immediate attention, immediate verbal notification should precede any written report

Reporting forms for written notification are available in the [‘Hazard Recognition and Reporting’](#) policy located in the Administration & Human Resources Policy and Procedure Manual or through the Occupational Health & Safety Department.

Once a supervisor receives notification any critical hazards immediately should be corrected immediately. Hazards should be rated using the hazard priority tool (refer to [Workplace Inspection](#) policy for tool).

Supervisors should respond to workers report of hazard not later than 24 hours after receiving and report to the JOHSC any hazardous condition that is not immediately corrected or is ongoing

Occupational Health and Safety and The JOHSC will assist supervisors and workers in the hazard reporting process and forward a written recommendation to Senior Management if hazardous conditions are not able to be resolved.

## **VIOLENCE and HARASSMENT IN THE WORKPLACE**

Violence is an increasing problem within workplaces, and healthcare especially. Stevenson will not tolerate any type of violence occurring here or at any of our functions. The Violence Prevention Program at Stevenson Memorial Hospital relies on open communication from everyone in order to prevent, and deal with any instance of violent behaviour, including harassment, bullying and domestic violence.

Violence – any actual, attempted or threatened conduct of a person that causes or is likely to cause physical and / or psychological harm / injury / illness or that gives a person reason to

believe that he /she or another person is at risk of physical or psychological harm / injury/ illness, including, but not limited to, any actual or attempted assault (including sexual assault and physical attacks); threat; verbal, psychological or sexual abuse; harassment and bullying.

Violent incidents can involve many different levels of response depending on what type of act occurred.

**If an event involved physical acting out which may cause physical harm to the acting out individual or others the following steps need to be taken:**

### Reporting and Investigation

Step	Actions/Decision	Responsibility
Incident Management	<ul style="list-style-type: none"> <li>• Call Code White</li> </ul>	<ul style="list-style-type: none"> <li>• All</li> </ul>
	<ul style="list-style-type: none"> <li>• Is Police Involvement necessary?                             <ul style="list-style-type: none"> <li>○ Does incident involve death, injury, weapons, and/or the victim has requested police</li> <li>○ If yes, contact police</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Manager/Coordinator</li> <li>• Security</li> </ul>
	<ul style="list-style-type: none"> <li>• Medical Attention</li> </ul>	<ul style="list-style-type: none"> <li>• Worker/Manager</li> </ul>
	<ul style="list-style-type: none"> <li>• Is this a Critical Injury?                             <ul style="list-style-type: none"> <li>○ If yes, contact OH&amp;S and preserve scene</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Manager/Coordinator</li> </ul>
	<ul style="list-style-type: none"> <li>• Debrief</li> </ul>	<ul style="list-style-type: none"> <li>• Manager/Coordinator</li> </ul>
	<ul style="list-style-type: none"> <li>• Is counselling necessary from <a href="#">EAP</a>?                             <ul style="list-style-type: none"> <li>○ If yes, contact EAP by telephone, or provide employee with contact information</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Manager/Coordinator</li> </ul>
Information Gathering	<p><b>Within 24 hours:</b></p> <ul style="list-style-type: none"> <li>• Fill out Incident Report(s)</li> <li>• Risk Management (if non-worker is involved)</li> <li>• OH&amp;S</li> </ul>	<ul style="list-style-type: none"> <li>• Worker(s)</li> <li>• Manager/Coordinator</li> </ul>
	<ul style="list-style-type: none"> <li>• Cooperate with witness statements and information gathering by security or police</li> </ul>	<ul style="list-style-type: none"> <li>• All</li> </ul>
	<ul style="list-style-type: none"> <li>• If critical injury contact Ministry of Labour</li> </ul>	<ul style="list-style-type: none"> <li>• OH&amp;S</li> </ul>
	<ul style="list-style-type: none"> <li>• Send copies of all documents to OH&amp;S</li> </ul>	<ul style="list-style-type: none"> <li>• Manager/Coordinator</li> </ul>

	<b>Within 48 hours:</b> <ul style="list-style-type: none"> <li>Review all reports and investigate incident</li> </ul>	<ul style="list-style-type: none"> <li>Manager/OH&amp;S</li> </ul>
	<b>Within 72 hours:</b> <ul style="list-style-type: none"> <li>Was a worker injured/lost time from work? <ul style="list-style-type: none"> <li>If yes, send forms to WSIB</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>OH&amp;S</li> </ul>
Follow-up	<b>Within 5 Business Days:</b> <ul style="list-style-type: none"> <li>Develop follow-up actions</li> </ul>	<ul style="list-style-type: none"> <li>Manager</li> </ul>
	<ul style="list-style-type: none"> <li>Debrief involved staff as to occurrence and follow-up (utilize EAP when necessary)</li> </ul>	<ul style="list-style-type: none"> <li>Manager/OH&amp;S</li> </ul>
	<ul style="list-style-type: none"> <li>Cooperate with any ongoing investigations</li> </ul>	<ul style="list-style-type: none"> <li>All</li> </ul>
	<b>Within 30 Days:</b> <ul style="list-style-type: none"> <li>Review of Incident, Investigation and follow up</li> </ul>	<ul style="list-style-type: none"> <li>Human Resources/OH&amp;S</li> <li>JOHSC</li> <li>Risk Mgt. (when appropriate)</li> </ul>

- Workers are to report all violence-related incidents or hazards to their Manager or Coordinator. This report can be made confidentially, at the worker's request.
- Any incident involving death, injury, and/or weapons will be reported to the police.
- Individuals retain the right to involve the police if they choose.
- Confidentiality will be maintained with the exception of the steps to ensure the safety of others and prevention of recurrence. For example, a police report may be necessary.
- The reporting worker may make the report confidentially indicating the need for confidentiality to her or his direct Manager or Coordinator, or in their absence, to another Manager.
- No report of violence or risks of violence can be the basis of reprisal against the reporting worker.
- In instances where an individual is experiencing forms of domestic violence Stevenson encourages them to confide in their direct manager and/or Coordinator, or to Occupational Health and Safety so supports can be offered to keep everyone in the workplace safe.**
- If the event involved the uttering of threats which the victim perceived as real start the process from the "Information Gathering" section but remind the victim of their right to involve the police**
- If the event was physical acting out without harm to self or others start the process from "Information Gathering"**

## Bullying and Harassing

Bullying and harassment are types of violence and need to be dealt with in an open manner.

- **Bullying:** A type of violence involving repeated inappropriate behaviour, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment, which could reasonably be regarded as undermining the individual's right to dignity at work.
- **Harassment:** A type of behaviour involving engagement in any vexatious comment or conduct that is known, or ought reasonably to be known to be unwelcome, and causes a person to believe their health and safety is at risk.

What you should do if you are being bullied and/or harassed:

1. Tell the person(s) harassing or bullying you to stop the unwelcome behaviour or conduct.
2. If you are uncomfortable or unwilling to address the issue directly, or if the behaviour continues after discussing the matter, you need to talk with your immediate Manager or the Manager of Human Resources.
3. The complaint should contain as much relevant detail as possible, including:
  - a. The nature of the complaint
  - b. All relevant dates and times
  - c. All relevant places
  - d. All relevant persons
  - e. All relevant behaviour and conduct including any occasion when you attempted to stop the behaviour
  - f. Any related written documentation
4. Provide the following information **in writing**, separate from the complaint statement:
  - a. All relevant witnesses having knowledge of the complaint, and
  - b. The remedy sought
5. Workers shall not file complaints in "bad faith" (i.e. dishonestly or deceitfully)

**Note:** Workers may withdraw their complaint at any time during the investigation. Anybody filing a complaint will cooperate with the investigation in order to help create a harassment and bullying-free workplace.

## OCCUPATIONAL HEALTH & SAFETY

### ANNUAL LEARNING REVIEW TEST

1. What does the acronym SEMD stand for?
  - A) Sharp Engineered Medical Device
  - B) Safety Engineered Medical Device
  - C) Sharp Elective Medical Device
  - D) None of the above
  
2. A quick way of determining if an object is within your lifting capabilities is by trying to move it with your foot.
  - A) True
  - B) False
  
3. If you believe that you are being bullied or harassed at work you should?
  - A) Tell the person(s) harassing or bullying you to stop the unwelcome behaviour or conduct.
  - B) Grin & bear it
  - C) Tell your colleagues to watch out for that person.
  - D) Go to HR immediately
  
4. It is permissible to use a wall to slow a patient if they are falling to the floor.
  - A) True
  - B) False
  
5. If you spend prolonged periods at a work station you should:
  - A) Ensure adequate lighting
  - B) Use document holders
  - C) Keep your wrists in a neutral position
  - D) All of the above
  
6. Which method of moving an object is least likely to cause an injury?
  - A) Pushing
  - B) Lifting
  - C) Pulling
  - D) None of the above
  
7. If using a computer the monitor should be positioned so the top is at eye level.
  - A) True
  - B) False

8. A Worker as defined by the Occupational Health and Safety Act (OHSA) is responsible for:
- A) Doing physical repairs to unsafe equipment
  - B) Knows and employs safe work practices
  - C) Reports any hazards that endanger himself/herself and their co-workers
  - D) B and C
9. The use of Personal Protective Equipment (PPE) is NOT voluntary and is a requirement of the Occupational Health and Safety Act (the law).
- A) True
  - B) False
10. Which of the following is a responsibility of the employer under the Occupational Health and Safety Act (OHSA)?
- A) Ensures a Health and Safety Policy and Program are written and posted annually
  - B) Takes Every Precaution reasonable for the protection of the worker
  - C) Ensures supervisors are competent as defined by OHSA
  - D) All of the above
11. Staff at SMH must comply with annual training requirements related to occupational health and safety issues, such as the annual Safety Core Curriculum?
- A) True
  - B) False
12. You see an exposed wire on a piece of equipment. What do you do?
- A) Notify my supervisor
  - B) Put in a maintenance requisition or biomedical notification
  - C) Take the equipment out of service to ensure nobody is injured
  - D) All of the above