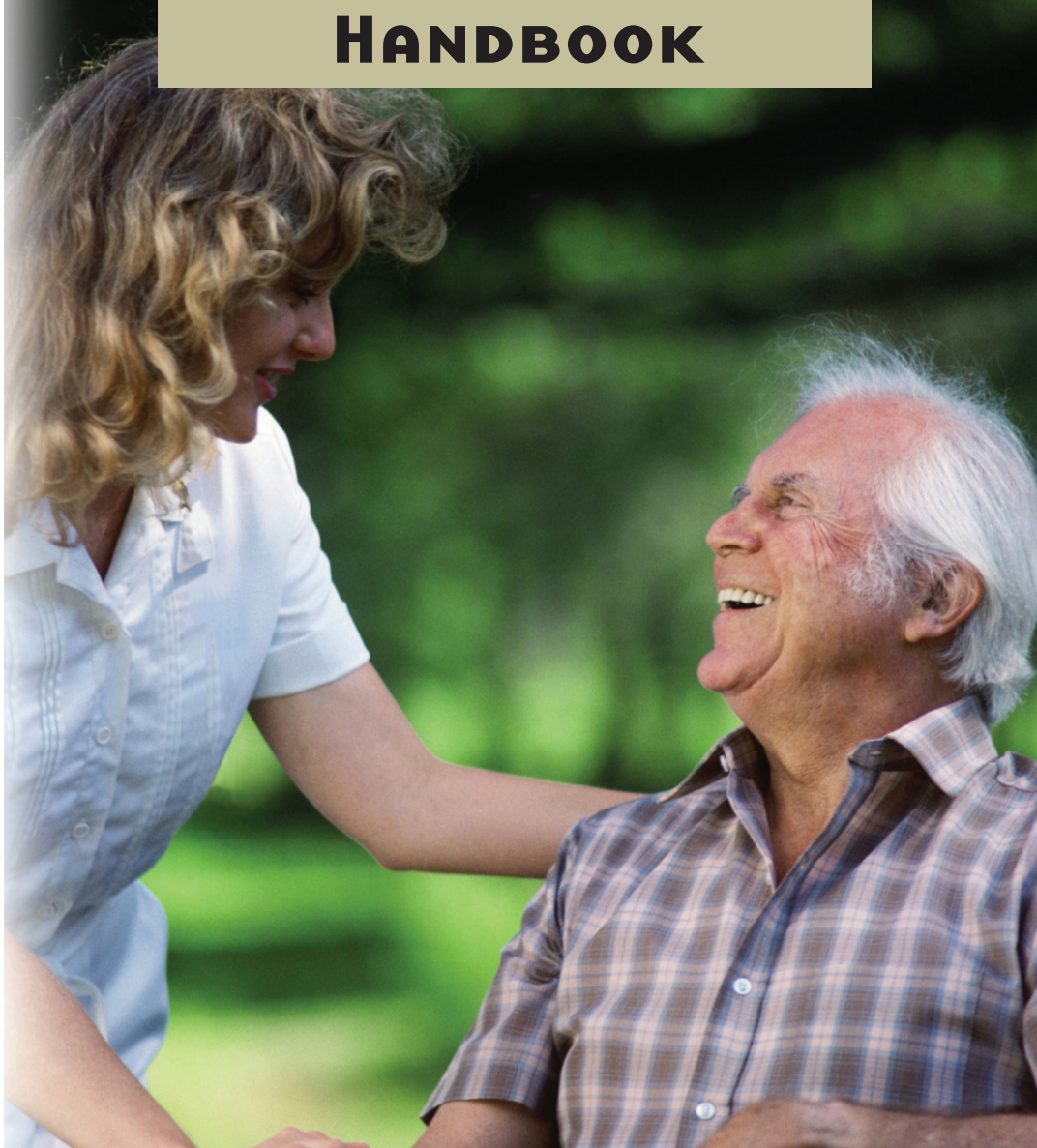




HOME AND COMMUNITY HEALTH WORKER HANDBOOK



WORK SAFE BC

WORKING TO MAKE A DIFFERENCE
worksafebc.com



Occupational Health & Safety Agency
for Healthcare in British Columbia
www.ohsah.bc.ca

O H S A H





About WorkSafeBC

WorkSafeBC (the Workers' Compensation Board) is an independent provincial statutory agency governed by a Board of Directors. It is funded by insurance premiums paid by registered employers and by investment returns. In administering the *Workers Compensation Act*, WorkSafeBC remains separate and distinct from government; however, it is accountable to the public through government in its role of protecting and maintaining the overall well-being of the workers' compensation system.

WorkSafeBC was born out of a compromise between B.C.'s workers and employers in 1917 where workers gave up the right to sue their employers or fellow workers for injuries on the job in return for a no-fault insurance program fully paid for by employers. WorkSafeBC is committed to a safe and healthy workplace, and to providing return-to-work rehabilitation and legislated compensation benefits to workers injured as a result of their employment.



About OHSAH



The Occupational Health and Safety Agency for Healthcare (OHSAH) in British Columbia is a provincial occupational health and safety agency for the healthcare sector. OHSAH's goal is to reduce workplace injuries and illness in healthcare workers and return injured workers back to the job quickly and safely. OHSAH is jointly governed by employers and unions, providing an innovative approach to improving workplace health and safety in the healthcare sector. OHSAH has programs and expertise in disability and disease prevention, occupational hygiene, ergonomics, occupational medicine, occupational psychology, education and training, and program evaluation. OHSAH also gathers, evaluates, and distributes workplace health and safety information and has extensive healthcare specific resources available to the healthcare community. For information and publications go to www.ohsah.bc.ca.





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WorkSafeBC Publications

Many publications are available on the WorkSafeBC web site. The Occupational Health and Safety Regulation and associated policies and guidelines, as well as excerpts and summaries of the *Workers Compensation Act*, are also available on the web site: WorkSafeBC.com

Some publications are also available for purchase in print:

Phone:	604 232-9704
Toll-free phone:	1 866 319-9704
Fax:	604 232-9703
Toll-free fax:	1 888 232-9714
Online ordering:	WorkSafeBC.com and click on Publications; follow the links for ordering



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2006 edition

Library and Archives Canada Cataloguing in Publication Data

Main entry under title:

Home and community health worker handbook. -- 2006 ed.

Co-published by Occupational Health & Safety Agency for
Healthcare in British Columbia.

Publisher's original name, Workers' Compensation Board of
BC, also appears in publication.

ISBN 0-7726-5626-6

1. Community health services - Safety measures. 2. Home
care services - Safety measures. 3. Community health aides -
Wounds and injuries - Prevention. 4. Industrial hygiene -
British Columbia. 5. Industrial safety - British Columbia. I.
WorkSafeBC. II. Workers' Compensation Board of British
Columbia. III. Occupational Health and Safety Agency for
Healthcare in British Columbia

RA645.37.B7H65 2006 363.11'93621209711 C2006-960180-1

Home and Community Health Worker Handbook

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WorkSafeBC Prevention Information Line

The WorkSafeBC Prevention Information Line can answer your questions about workplace health and safety, worker and employer responsibilities, and reporting a workplace accident or incident. The Prevention Information Line accepts anonymous calls.

Phone 604 276-3100 in the Lower Mainland, or call 1 888 621-7233 (621-SAFE) toll-free in British Columbia.

To report after-hours and weekend accidents and emergencies, call 604 273-7711 in the Lower Mainland, or call 1 866 922-4357 (WCB-HELP) toll-free in British Columbia.





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Introduction

This handbook is written for workers in the field of home and community health care.

Providing home support and assisting with the activities of daily living in a client's home can present special health and safety challenges. As home and community health workers, you perform a variety of different tasks, many of which put you at risk of injury.

The three most common causes of work-related injuries are:

- Overexertion and repetitive movements
- Slips, trips, and falls
- Violent and aggressive behaviour

You may also be exposed to infectious diseases and hazardous chemicals.

This handbook was written to help you:

- Identify the types of activities that put you at risk of injury and illness
- Prevent injuries and illnesses
- Know what to do if you are hurt or ill
- Know your workplace rights and responsibilities
- Know where to find more information

The safety checklist on page 31 can help you quickly identify hazards in the home.



Overexertion and repetitive movements

Approximately 50% of all work injuries suffered by home and community health workers are musculoskeletal injuries (MSIs) caused by overexertion or repetitive movements.

Musculoskeletal injuries (MSIs)

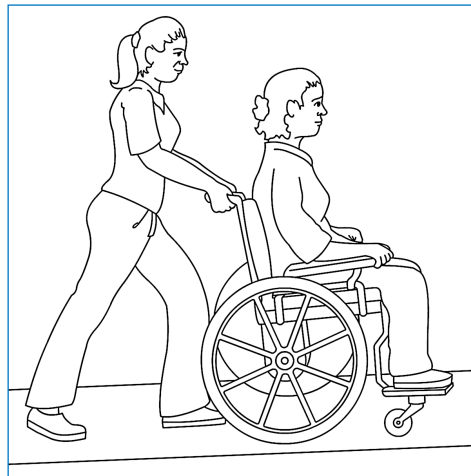
An MSI is an injury or disorder of the muscles, tendons, ligaments, joints, nerves, blood vessels, or related soft tissue. MSIs include sprains, strains, and inflammation that may be caused or aggravated by work.

Risk factors

Risk factors are parts of a work activity or environment that can cause or contribute to an injury. To prevent overexertion injuries, you need to know what risk factors you may come across. Five main types of risk factors that cause or contribute to MSIs are:

Force

Force is the effort you put into moving or gripping something, whether it's a person or an object. When your body has to work harder and your muscles, tendons, ligaments, and joints are physically stressed, you are at greater risk of injuring yourself.



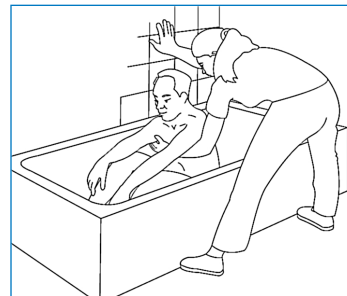


Repetition

Repetition is when you make the same movement or do the same task over and over again, using the same muscle groups. Performing any task or a series of similar tasks without sufficient rest tires the muscles and increases your risk of injury.

Awkward posture

Awkward posture occurs when any part of your body bends or twists excessively, outside a comfortable range of motion. Working in an awkward posture increases the stress on your muscles, tendons, ligaments, and joints. You are at greater risk for injury if you have to hold the posture for a long time, or if other risk factors, such as force, are present.

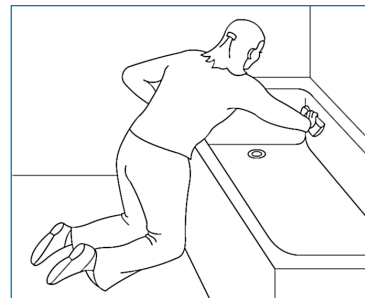


Static posture

Static posture occurs when you hold one position for a long time. The level of risk from static posture depends on the posture being held and the level of effort required to hold the posture.

Contact stress

Contact stress happens when a body part, especially a bony part like the knees or elbows, is pressed against a hard or sharp surface. Contact stress can injure the nerves and tissues beneath the skin by interfering with normal blood flow and nerve function.





Recognizing MSIs

If you have an injury caused by overexertion or repetitive movement, you may experience the following signs and/or symptoms:

Signs of injury are SEEN

- Redness
- Swelling
- Loss of normal joint movement
- Muscle wasting

Symptoms of injury are FELT

- Pain (shooting, dull, sharp, aching, or throbbing)
- Tenderness
- Weakness
- Numbness or cramping
- A feeling of heaviness
- Pins and needles
- Heat or burning sensation
- Cold sensation

Client care hazards

Client care activities can put you at high risk of MSI. Some of these activities include transferring or repositioning, dressing, and bathing clients.

ALL CLIENT-HANDLING ACTIVITIES ARE HIGH RISK

Transferring or repositioning clients

Risk factors include force and awkward posture.

- Transferring or repositioning clients without using equipment puts you at risk of injury because most people are too heavy for manual lifting.
- Transferring or repositioning clients can also require you to reach or bend over excessively and to twist your upper body.
- The risk increases when a client resists being moved.



Dressing clients

Risk factors include awkward posture and static posture with force.

- Dressing clients often requires you to reach and bend excessively, or use other awkward postures.
- You may have to support the client (or the client's leg or arm) in one position for a long time and the weight of the body or body part may require you to use high force.

Bathing clients

Risk factors include awkward posture, static posture with force, repetition, and contact stress.

- Bathing clients often requires you to adapt to the layout of the bathroom and can cause you to use postures that are awkward and uncomfortable.
- You have to support the client (or the client's leg or arm) in one position for a long time.
- Assisting with bathing causes you to use the same sets of muscles over and over, without a chance to rest them.
- When bathing clients in bathtubs you may have to kneel on and lean against surfaces that can stress those body parts in contact with the hard surface.

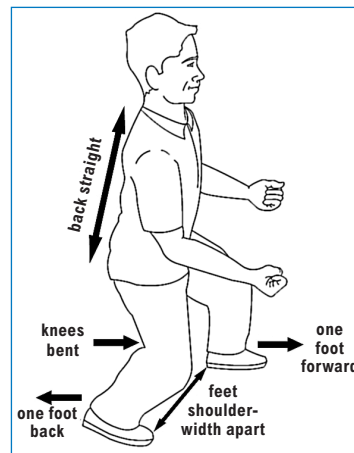
What you can do to prevent MSIs

- Perform only those tasks for which you have received training.
- Understand the risks of MSI and work safely within your physical capabilities.
- Check for hazards and assess the risks every time you transfer or reposition a client.
- Ask your client to assist as much as possible.
- Use equipment such as portable lifts whenever possible.



Transferring or repositioning clients

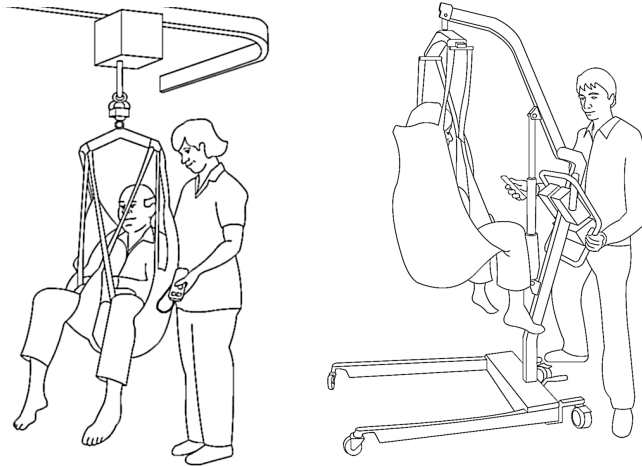
- Use transfer assist devices such as transfer belts or low-friction slide sheets.
- Remove obstacles from around beds and chairs so that you can position yourself close to the client.
- Never let your client hold onto you.
- When possible, work in pairs or teams to lighten the load.
- Use proper techniques: Shift your body weight using your legs during the transfer or reposition task. Don't pull with your arms or back.
- Ensure a strong base of support:
 1. Keep your feet shoulder-width apart.
 2. Position one foot forward and one foot back.
 3. Bend your knees.
 4. Keep your back straight.
- Never try to hold a client in a standing position.
- Never try to stop a client from falling. Control the client's fall to the floor as trained.
- Use a strong power grip (as shown). Avoid pinch grips.





Using mechanical lifts for assisting clients

- ▶ Use mechanical lift devices as you were trained.
- ▶ Be sure equipment is in good condition before you use it.
- ▶ Whenever possible, push clients—don't pull.
- ▶ Never manually lift clients when positioning them in the lift sling.



A safety checklist of client-handling risks and hazards can be found on page 31.

Dressing Clients

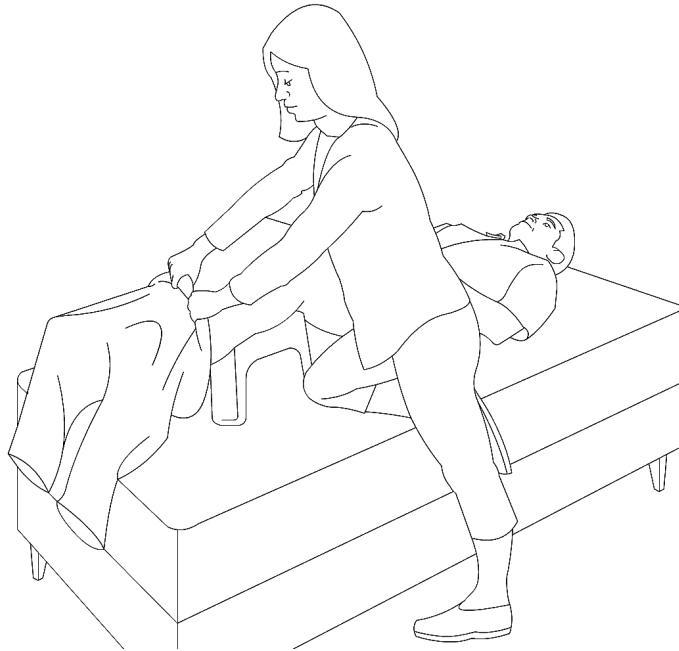
- Use proper techniques: Keep your body upright. Shift your body weight using your legs when assisting the client to move.
- Start with the client's weaker side when putting on clothes.
- Help your client to lean forward when putting on shirts; this will relax the client's arms.
- Try to complete several tasks at the same time. For example, roll your client to place an incontinence pad, pull on a pant leg, and adjust a lift sling.
- Sit on a stool when assisting seated clients with their socks and shoes.





Dressing clients in bed

- Ensure that your client is as close to the side of the bed as possible.
- Remove obstacles from around the bed so you can position yourself closely.
- Sit on the bed, or put one knee up on it, to bring yourself closer.
- Place your client's lower legs on a small stool or other elevated surface to lift their thighs off the bed.



Clothing can be adapted to make dressing clients easier. For example, adaptive clothing is roomier than normal clothing, has elasticized waistbands, and uses oversized buttons, snaps, or Velcro. For information, talk to your supervisor or worker health and safety representative, or visit www.ohsah.bc.ca.





Bathing clients

- Plan the bathing process. Assemble everything you need, and position all equipment.
- In small bathrooms, pull the wheelchair from the front so that you don't have to climb around it.
- Before you help clients into the tub, seat them on a transfer bench or shower stool, and lather the far side of their bodies. Place their feet on a stool or the edge of the tub and lather them.
- Sit on a stool, the side of the tub, or on the toilet seat (if it's close) to keep your back more upright and reduce how much you have to reach and bend.
- Use grab bars (if available) to support your upper body with one hand.
- Take short breaks to rest your lower back (e.g., stand up straight and arch your back slightly backwards).



Bathing clients in bed

- Try not to twist, bend, or reach for water basins.
- Place basins on stools or tables at a comfortable height and close to where you are working.





Housekeeping hazards

Housekeeping activities can put you at high risk of MSI. Some of these activities include making beds, cleaning, doing laundry, and cooking.

Making beds

Risk factors include awkward posture and grip force.

- Tucking in sheets often requires you to bend over at the waist and reach forward.
- Gripping sheets and bed covers using a pinch grip increases the force required.

Cleaning

Risk factors include awkward posture, static posture with force, and contact stress.

- Cleaning the floors, the toilet, or the bathtub causes you to bend over or kneel, and cleaning overhead may require you to reach overhead for a long time. Scrubbing with force while bending or reaching increases your risk of injury.
- Kneeling on hard surfaces can put pressure on your knees.

Doing laundry

Risk factors include awkward posture with repetition and grip force.

- Loading or unloading laundry from washers and dryers can require you to repeatedly bend forward while twisting.
- Lifting dry laundry using a pinch grip can increase the force required by the small muscles in the hand and forearm.
- Lifting wet laundry can require even greater force to grip and lift.

Cooking

Risk factors include force, awkward posture, and static posture.

- Cutting with blunt knives can increase the force required to cut food.
- Preparing and cooking food on a surface that is too high can require you to use awkward wrist and shoulder postures.
- Preparing and cooking food on a surface that is too low can require you to bend over and put stress on your back.

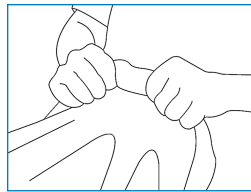
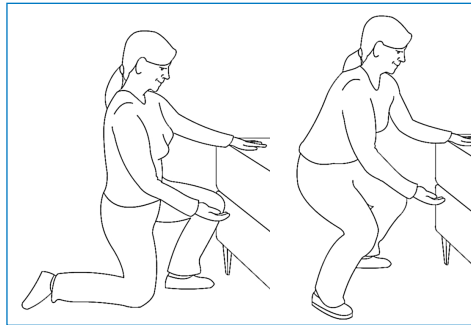




What you can do to prevent MSIs

Making beds

- Avoid bending forward; bend your knees, not your back.
- Kneel on carpeted surfaces, or squat (as shown) to make one side of the bed at a time.
- Walk around the bed rather than reaching over it.



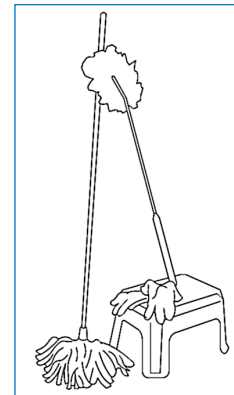
- Use a power grip (as shown) instead of a pinch grip when handling sheets and covers.
- Reduce awkward shoulder postures by replacing duvet covers using the “inside-out” method: Slide the cover around the duvet instead of stuffing the duvet into the cover.

Cleaning

- Use cleaning equipment with long handles for hard-to-reach areas.
- If kneeling to clean floors or complete other tasks, place a folded towel under your knees.



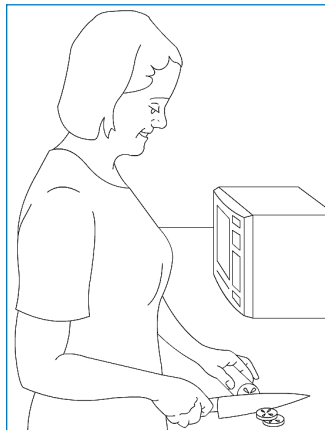
- Make sure your gloves fit well so that you don't need to use extra force when gripping or scrubbing.
- Use a step stool to reduce reaching when dusting or changing shower curtains.
- Use a long-handled brush to scrub the bottom and walls of the tub.





Doing laundry

- Carry only loads that you can manage comfortably. Make two trips if necessary.
- Do not twist your body while lifting the laundry.
- Avoid bending forward. Bend your knees if you need to reach into the washer or dryer.
- Use a power grip instead of a pinch grip when handling laundry.
- Fold clothes at a comfortable working height (about 5–25 centimetres below standing elbow height). Your shoulders should be relaxed.



Cooking

- Use the right tools for cutting; avoid blunt knives.
- Use utensils that allow you to keep your wrists straight.
- Prepare food at a comfortable working height (about 5–10 centimetres below standing elbow height). Your shoulders should be relaxed.





Slips, trips, and falls

Slips, trips, and falls are the second most common cause of injury for home and community health workers. You can be injured by a slip, trip, or fall both inside and outside your client's home.

Hazards inside the home

- Uneven or slippery floors
- Wrinkled or worn carpet and curling vinyl tiles
- Clutter in hallways and on stairs
- Electrical cords that cross walking areas
- Open drawers

Hazards outside the home

- Surfaces such as sidewalks, steps and wooden ramps covered with water, ice, snow, leaves, or moss
- Uneven sidewalks
- Debris or items left on sidewalks and pathways
- Poor lighting

What you can do to prevent injuries

Inside the home

- Keep your shoes on while you work.
- Check the floor surface before walking on it. Is it slippery? Is it uneven?
- Rinse and dry floors after cleaning to remove any slippery residue from cleaning products.
- Watch out for wrinkled or worn carpet and vinyl tiles that are curling at the edges.
- Watch out for clutter in walkways and stairs, and suggest that items be stored in a safer place.
- Use handrails when climbing up and down stairs.
- Tuck electrical cords out of the way.
- Keep drawers closed.
- Carry loads in both hands to keep your balance, and look where you are going.



Outside the home

- Do not rush. Plan your route and stay focused.
- Wear footwear that has a good tread and won't slip.
- Be especially careful when walking on uneven, wet, or icy surfaces.
- Use a flashlight.

See page 31 for a safety checklist that includes slip and trip hazards.





Violence

Violence refers to physical force that causes injury to a worker, and includes any threatening statement or behaviour that gives you reasonable cause to believe that you are in danger. Working closely with clients and their families and friends, often under difficult circumstances and sometimes in isolated locations, can put you at risk of violence.

Many home and community care workers do not report to their supervisor, worker health and safety representative, or co-workers when their clients act aggressively or are violent toward them because they feel that it is “part of the job.” Being exposed to violent or aggressive behaviour is not part of your job. It is not okay.

Always be aware of potentially violent situations, and report acts of violent or aggressive behaviour to your supervisor as soon as you can.

Clients

- Clients may have a history of violent behaviour.
- They may act aggressively, or feel frustrated or angry because of:
 - Their medical conditions or medications
 - Poor communication with health care providers
 - Their dependence on others
 - Drug or alcohol addiction
 - Language and cultural barriers

Family and visitors

- Family members and visitors may have a history of violent behaviour.
- They may become argumentative because of their frustration with the client’s condition or the care arrangements.

Environment

- The home may be in a high-crime area or an isolated location.
- Firearms may be stored unsafely in the home.
- The home may be cluttered and poorly lit, making it difficult to leave quickly in the event of violence.



If you feel threatened

- ▶ Leave the home immediately.
- ▶ Call your supervisor as soon as it is safe to do so. Follow procedures for refusal of unsafe work (see the Worker Rights and Responsibilities section on page 28 of this handbook). Your worker health and safety representative can assist you.
- ▶ Call 911 for help if you are unable to leave.

What you can do to reduce the risk of violent and aggressive behaviour

Clients

- When you arrive at the home, assess your client's mood before you start your duties.
- Tell your client what you are going to do before you do it.
- When possible, keep space between you and your client.
- Avoid letting your client come between you and a way out of the room.
- Be aware that your client may become more aggressive when you are assisting with personal care or toileting.
- Be sensitive of cultural or language barriers.

What you should know and report about clients

- ▶ Read the communication notes and care plan before visiting a client.
- ▶ Be aware of mental health diagnoses, specific triggers, and ways to minimize violent behaviour.
- ▶ Know your employer's procedures to minimize risk.
- ▶ Report to your supervisor and/or record in the communication book:
 - Events/conditions that cause violent and aggressive behaviour in your client
 - Significant changes in your client's mood
 - Techniques you use to calm the client





Family and visitors

- If unauthorized visitors are at the home when you arrive, ask the client to have them leave before you enter or before you provide care.

Environment

- Use a flashlight and be alert when walking to or from clients' homes at night.
- Make sure that you can get out of your client's house easily, without stepping over and around furniture or clutter.
- Tell your supervisor if:
 - Any inside or outside lights are not working
 - Firearms are stored unsafely

If the situation with a client, a family member, or a visitor is becoming stressful

- Stay calm.
- Face the person with your elbows at your side and your hands in the air with palms facing out.
- Try to leave at least two metres (six feet) between you and the person.
- Watch for signs that the person may strike out (for example, red face, fast breathing, finger pointing, and yelling).
- Do not argue or raise your voice.
- Reassure the person that his or her concerns will be dealt with as soon as possible.
- Tell the person how to make a complaint to your employer.
- Tell your supervisor about the situation as soon as it is safe to do so.

Travelling and working alone

When you travel and work alone, you have a higher chance of being exposed to violent and aggressive behaviour. To keep yourself safe:

- Follow your employer's working-alone policies and procedures.
- Plan the safest route to your client's home. Stay on well-travelled roads and streets.



-
- Carry a cellphone and phone numbers for police, fire, and ambulance, and your supervisor.
 - Carry a personal alarm.
 - Keep your car in good working order.
 - Lock your car while you are driving.
 - Park in well-lit areas. Avoid underground parking lots, dark alleyways, or parking beside large vehicles that stop people from seeing your car.
 - Avoid getting on or off at bus stops that are poorly lit or where there are few people.
 - Drive to the nearest police station if you feel you are being followed.
 - If you feel you are being followed while walking, go directly, without running or looking back, to the nearest place of business and call 911.

The safety checklist on page 31 will help you identify conditions that may expose you to the risk of violent or aggressive behaviour.





Exposure to infectious diseases

As a home and community health worker, you may come in contact with infectious diseases such as hepatitis, HIV, influenza (flu), tuberculosis (TB), measles, and chicken pox. To protect yourself, you need to become familiar with how diseases are spread and how to prevent exposure.

Blood-borne Diseases

Blood-borne diseases, such as hepatitis B, hepatitis C, and HIV, are diseases that are spread through direct contact with contaminated blood and body fluids of a person with the disease. These kinds of diseases are not spread by mosquito bites or by casual contact, such as shaking hands, or by using the same facilities and equipment (e.g., toilets, sinks, telephones, and dishes) used by a person with the disease.

You are at risk of exposure to these diseases if:

- Infected blood or body fluids come into contact with the tissues lining your eyes, nose, or mouth
- Infected fluids come in contact with a cut in your skin
- You are poked with a needle that is contaminated with infected blood

Other Diseases

Other infectious diseases, such as flu, TB, measles, and chicken pox, may be spread by:

- Touching a person or object (e.g., table, door knob, or telephone) contaminated with the disease, and then touching your eyes, nose, or mouth
- Breathing in the very small airborne drops of saliva or mucous made when an infected person coughs, sneezes, or speaks very close to you

You might be exposed to these types of diseases when providing direct client care, such as dressing or bathing, or cleaning and cooking for infected clients.

What you can do to prevent exposure to blood-borne diseases

- Handle all blood and body fluid materials as if they were infectious. No blood or body fluid should come into contact with you.
- Complete all three doses of your hepatitis B vaccination.



-
- Use proper hand washing procedure.
 - Use appropriate personal protective equipment (including gloves, gown, goggles, and face shield) as you were trained.
 - Handle sharps safely, and dispose of them in designated sharps containers.
 - Put used needles into properly designed rigid containers, and place soiled waste materials into garbage bags for proper disposal.
 - Be alert when handling garbage bags or waste containers. Watch for sharps sticking out of the bag or container. Do not:
 - Reach into waste containers with your bare hands
 - Compress garbage bags, hold them against your body, use bare hands to pick them up, or use your hands to support them from underneath
 - Never reach blindly. Look before reaching behind furniture and equipment.

If you are exposed to potentially infected blood or body fluids

- Immediately wash the exposed area thoroughly with soap and water, and allow the wound to bleed freely.
- Go to the nearest hospital emergency department for treatment and evaluation within two hours of exposure.
- Report the incident immediately to your supervisor.
- Follow appropriate post-exposure protocols.

What you can do to prevent exposure to other diseases

- Ensure that you have had all the appropriate vaccinations and booster shots (such as for influenza, measles, and chicken pox).
- Wash your hands frequently using proper hand washing procedure.
- Try not to touch your face or mouth.
- Use appropriate personal protective equipment (including gloves, gown, goggles, face shield, and respirator) as you were trained.
- Have infectious clients wear surgical masks.
- Be aware of the risk assessment results from your supervisor, and follow the recommended safe work procedures.





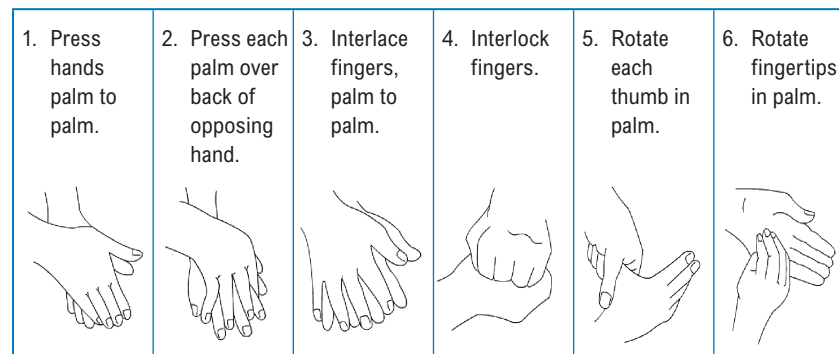
Hand washing

Hand washing is one of the best ways to minimize the risk of getting or spreading infection. By removing disease-causing material from your hands, you avoid infecting yourself when touching your eyes, nose, or mouth. You also avoid contaminating common objects (e.g., phones, keyboards, and doorknobs) and infecting others.

Follow proper hand washing procedure using soap with warm running water. If water is not available, use a waterless hand cleanser that has at least 70% alcohol.

Make sure to wash your hands immediately:

- After arriving and before leaving each client's home
- After unprotected contact with blood or other potentially infectious materials
- Before putting on and after removing personal protective equipment (for example, gloves, respirators, and goggles)
- Before and after direct contact with clients
- When hands are visibly soiled



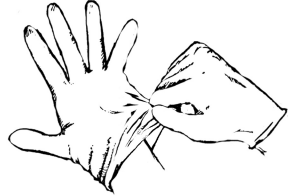
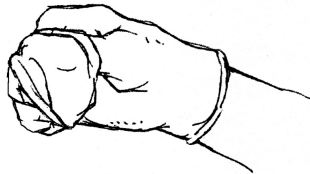
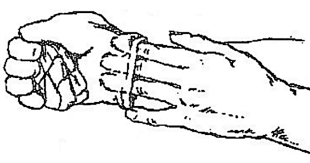
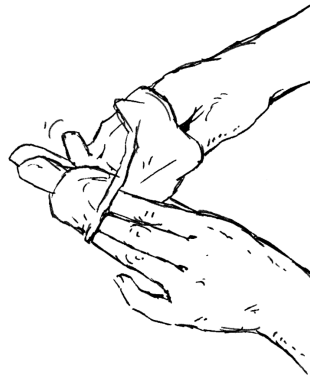
Gloves

Gloves are the most common type of personal protective equipment. Gloves should be waterproof, disposable, of good quality, suitable for the task, and preferably latex-free. Don't use cloth gloves or gloves that are not waterproof.





Remove disposable gloves as soon as possible if they become damaged or contaminated, and after you have completed the task requiring gloves. Gloves should be removed before leaving the work area. Do not wash and reuse your gloves. Use new gloves for each new task.

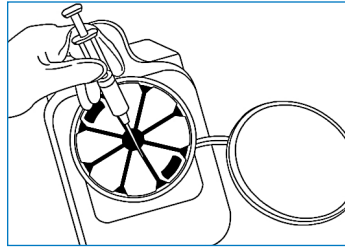
Removing gloves	
1. With both hands gloved, grasp the outside of one glove at the top of your wrist.	
2. Peel off this first glove, peeling away from your body and from wrist to fingertips, turning the glove inside out.	
3. Hold the glove you just removed in your gloved hand.	
4. With your ungloved hand, peel off the second glove by inserting your fingers inside the glove at the top of your wrist.	
5. Turn the second glove inside out while tilting it away from your body, leaving the first glove inside the second.	
6. Dispose of the entire bundle promptly in a waterproof garbage bag. Do not reuse!	
7. Wash your hands thoroughly with soap and water as soon as possible after removing gloves and before touching any objects and surfaces.	





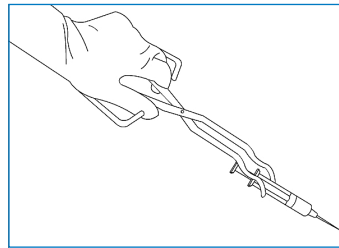
What you can do to handle sharps safely

- Follow safe work procedures provided by your employer.



- Wear disposable gloves when handling or disposing of sharps.
- Point sharps away from your body and discard immediately after use into portable sharps containers—rigid, unbreakable, puncture-proof, leak-proof containers with lids that can be locked when full.

- Use tongs or pliers to handle and dispose of broken needles, other sharps, and broken glass.
- Do not:
 - Recap or directly handle needles
 - Remove, bend, or break contaminated sharps
 - Remove contaminated needles from disposable syringes—discard them as a single unit



Placement and handling of sharps containers

- Place containers in an accessible location close to where you work with sharps.
- Keep containers upright and secure them so they can't tip over.
- Never force sharps into containers or put your hands in containers.
- Do not open containers or empty them. Replace when they are three-quarters full.
- Secure the lid before moving or disposing of containers.
- Do not throw containers in the garbage. Follow your employer's disposal procedures.
- Keep containers out of reach of children.





Exposure to harmful chemicals

Using cleaning products or pesticides in your client's home can put you at risk of exposure to chemicals. Some chemicals in household products can irritate or burn your eyes and skin. Some can irritate your lungs. Some are suspected of causing longer-term health effects. Use all household products with care.

You should be familiar with the symbols that describe the hazards presented by household products. You should also read all product labels to identify possibly harmful substances.

CONSUMER SYMBOLS	
 Corrosive	This product can cause burns to your skin and to mucous membranes, which may result in permanent damage.
 Explosive	This product may explode if heated or punctured. May cause objects to be released at high speeds.
 Flammable	This product or its vapour can cause fire quickly if heated.
 Poison	This product may result in serious illness or death if ingested, absorbed, or inhaled.

BORDERS		
Caution	Warning	Danger
Least Hazardous / Most Hazardous		

What you can do to prevent exposure to harmful chemicals

- Do not use a product if you are unfamiliar with it or have not been trained to use it safely.
- Use personal protective equipment such as gloves and respiratory equipment as you have been trained.
- Always follow instructions on product labels.
- Do not use a product if you cannot read the label or if there is no label.
- Use products in well-ventilated areas.
- Dilute the product as required by the manufacturer.
- Keep cleaning cloths separate from cloths used for food preparation.
- Know how to clean up spills safely.
- Do not mix cleaning products. Chemical reactions may occur and create toxic vapours.
- Know what to do if a product comes in contact with your skin or eyes.
- If you experience any signs or symptoms of exposure, stop using the product immediately, and move to an area with fresh air.





Possible signs and symptoms of chemical exposure

- | | | |
|-----------------------|-----------------------|------------------|
| ➤ Dry or red skin | ➤ Stinging eyes | ➤ Headache |
| ➤ Blisters | ➤ Coughing | ➤ Nausea |
| ➤ Itchiness | ➤ Dry throat | ➤ Dizziness |
| ➤ A burning sensation | ➤ Shortness of breath | ➤ Blurred vision |





If you are hurt on the job

You must act immediately whenever you have signs or symptoms of injury or disease caused by work activities. Delaying medical attention when experiencing signs and symptoms of injury can lead to more serious health effects and may result in lengthy time away from work.

You are responsible for:

1. Immediately reporting to your supervisor.
2. Seeking medical attention, if appropriate. Remember to tell your doctor that your injury was caused by work activities.
3. Completing and submitting an Application for Compensation and Report of Injury or Occupational Disease (Form 6) to initiate a claim with WorkSafeBC. You can get this form from your employer or download it from WorkSafeBC.com. Your worker health and safety representative can assist you in filling out this form.

Your employer is responsible for:

- Paying your transportation costs from your workplace to a doctor's office or hospital
- Paying your wages on the day of your injury
- Submitting a WorkSafeBC Employers Report of Injury and Occupational Disease form (Form 7)
- Investigating the incident and implementing corrective actions to prevent injuries from re-occurring

Your doctor is responsible for filling out and submitting the WorkSafeBC Physician's First Report form (Form 8), defining the type of injury or disease you have, the cause of your injury or disease, and the treatment recommended.

WorkSafeBC

If WorkSafeBC accepts your claim, you will begin receiving benefits immediately. Your health care costs will be covered from the day of your injury, and your wages will be covered from the first scheduled day of work you miss following your injury.

For more information on WorkSafeBC's claims process and benefits, call the Claims Call Centre at 604 231-8888, toll-free 1 888 967-5377, or go to WorkSafeBC.com.





Critical Incident Response (CIR) Program

If you experience a significant trauma at work, such as being exposed to violent or aggressive behaviour or witnessing a traumatic death, you may develop post-traumatic stress disorder (PTSD).

If you are experiencing emotional or psychological trauma, such as intense fear, helplessness, or persistently re-experiencing the event, seek assistance through the WorkSafeBC CIR program for workers and employers. If you are a unionized worker falling under the Community Health Subsector Agreement, your employer is required to make this debriefing available to you. Critical incident response and critical incident stress debriefing (CISD) can significantly reduce your chances of developing PTSD if provided in a timely manner, optimally within 24-72 hours, following the incident.

If you have any questions or wish to arrange an intervention, please contact the Critical Response Liaison at WorkSafeBC:

- Toll-free within B.C. at 1 888 621-7233 local 4052
- Urgent or after-hours at 1 888 922-3700



Worker rights and responsibilities

Under WorkSafeBC's Occupational Health and Safety Regulation, you have the right to:	Under WorkSafeBC's Occupational Health and Safety Regulation, you are responsible for:
<ul style="list-style-type: none"> A safe work environment 	<p>Promptly reporting to your supervisor:</p> <ul style="list-style-type: none"> If you have not been provided with information on the hazards or risks in the home If you are at risk of injury or of exposure to violent or aggressive behaviour If there are any unsafe conditions in a client's home If there are any changes in a client's personal needs or behaviour If you have been injured in the course of your work activities
<ul style="list-style-type: none"> Refuse unsafe work 	<p>Refusing any task that you feel puts you at undue risk of injury. Follow these steps for refusing unsafe work:</p> <ol style="list-style-type: none"> Immediately report the situation to your supervisor. Your supervisor/employer must investigate immediately and either make the work safe or advise you that they feel the work is already safe. <p><i>Note: your employer may assign you to other work.</i></p> <ol style="list-style-type: none"> If you believe the work continues to be unsafe and you are continuing to refuse the unsafe work, contact your worker health and safety representative, and participate in another investigation with him or her. If, after this joint investigation, you still believe that the work is unsafe, and you are continuing to refuse unsafe work, contact WorkSafeBC immediately for resolution by an officer. <p>Call: 1 888 621-7233 between 8:30 a.m. and 4:30 p.m. After hours, call: 1 866 922-4357.</p>



<ul style="list-style-type: none"> • Proper health and safety information, instruction, and training for your work activities 	<ul style="list-style-type: none"> • Applying the knowledge and training you receive • Following your agency's occupational health and safety procedures, as you were trained
<ul style="list-style-type: none"> • Well-maintained and functioning personal protective equipment and assistive devices such as ceiling lifts or floor lifts 	<ul style="list-style-type: none"> • Using the personal protective equipment and assistive devices provided by your employer, as you were trained
<ul style="list-style-type: none"> • Not be discriminated against, disciplined, or fired for exercising any right (i.e., refusal of unsafe work), or in carrying out health and safety responsibilities 	<ul style="list-style-type: none"> • Reporting to WorkSafeBC any discriminatory action by your employer
<ul style="list-style-type: none"> • Be represented on workplace health and safety committees and participate in related activities 	<ul style="list-style-type: none"> • Co-operating with workplace health and safety committees

Joint occupational health and safety committee

Workplaces with 20 or more regularly employed workers must have a joint occupational health and safety (JOHS) committee that advises on all elements of your workplace occupational health and safety (OHS) program. Your JOHS committee is made up of worker and employer representatives. In unionized workplaces, the unions determine the process to select worker representatives. How the union selects worker representatives is sometimes determined by the collective agreement. In non-unionized worksites, worker representatives must be elected by workers through a secret ballot. The number of worker representatives must be equal to or greater than the number of employer representatives.

Members of the JOHS committee are trained in OHS processes and procedures, and work cooperatively within a joint process (equal representation) to promote health and safety in the workplace. Smaller workforces of between 10 and 19 workers elect a single worker health and safety representative.





If you have a health and safety issue you have been unable to resolve, and would like it raised at the next JOHS committee meeting, or you are interested in becoming involved in your JOHS committee, contact your worker health and safety representative. To find out who your worker health and safety representative is and how to contact her or him, talk to your supervisor or union steward.

Community Health Subsector Agreement

If you are a unionized worker covered by the Community Health Subsector Agreement, there are a number of occupational health and safety provisions, found in Article 22, that the employer has agreed to. These include:

- To promote safe working conditions and safe work practices, and the prevention of accidents, workplace injuries, and industrial diseases.
- To provide you with information in its possession regarding a client that is necessary for you to safely carry out your duties. Upon admission, transfer, or assignment the employer will make every reasonable effort to identify the potential for aggressive behaviour.
- To provide you with orientation or in-services necessary for safe work performance, safe use of equipment, safe techniques for lifting and supporting clients, and safe handling of materials and products.
- To provide you with emergency travel kits for work in isolated areas with hazardous road conditions (with agreement at the local level) where you must use your own or the employer's vehicle for work.



Safety checklist

You must be told what hazards may be present BEFORE you visit a client. Complete this checklist for each home you visit to identify new hazards or changes in your client's condition that require reassessment to protect your health and safety.

If you answer "No" to any of these questions, contact your supervisor.

Before arriving at a client's home

- Is your client expecting you?
- Are you aware of your client's case history?
- Can you reach the client's home safely by car, bus, or other means?
- Do you have a set check-in time with your employer/supervisor?
- Do you know what to do in the event of an emergency or if you are injured?

When entering a client's home

- Is there good lighting outside and inside your client's home?
- Are walkways and stairs at your client's home dry, in good repair, and clear of debris and clutter?
- Has the client stopped smoking inside the house one hour before your arrival?
- Do you feel safe entering the client's home?
- Do you feel safe dealing with the client, his/her family, or friends?
- If the client owns weapons, are they stored safely?
- Are aggressive pets leashed or locked in a separate room?
- Is the client's home free of illegal drugs?

While working in a client's home

- If the client requires your help to move, have you been trained to complete an assessment of the client's abilities before helping with the move?
- If the client must be moved with a mechanical lift or other device, have you been trained to use this equipment (e.g., ceiling lift, portable lift, or transfer assist device)?
- Have you been trained to protect yourself from infectious disease and exposure to harmful chemicals, and have you been provided with appropriate personal protective equipment?
- Do you know how to use your client's cleaning products safely?
- Are you able to keep the work area well-ventilated (e.g., open a window) when you are using cleaning products?



When you need more information

If you have any questions or concerns about your safety at work, contact:

WorkSafeBC

Prevention Information Line

Phone: 604 276-3100 in the Lower Mainland
or toll-free 1 888 621-7233 (621-SAFE) in B.C.

Web site: WorkSafeBC.com

**Occupational Health and Safety Agency
for Healthcare (OHSAH) in British Columbia**

Phone: 778 328-8000

Web site: www.ohsah.bc.ca

Your union:

BCGEU: B.C. Government and Service Employees' Union

Phone BCGEU Headquarters: 604 291-9611

or toll-free 1 800 663-1674

Web site: www.bcgeu.bc.ca

BCNU: British Columbia Nurses' Union

Phone: 604 433-2268

or toll-free 1 800 663-9991

Web site: www.bcnu.org

CUPE BC: Canadian Union of Public Employees

Phone CUPE BC Regional Office: 604 291-1940

Web site: www.cupe.bc.ca

HEU: Hospital Employees' Union

Phone: 604 438-5000

or toll-free 1 800 663-1513

Web site: www.heu.org

UFCW: United Food and Commercial Workers Union Local 1518

Phone: 604 434-3101

or toll-free 1 800 661-3708

Web site: www.ufcw1518.com



WorkSafeBC Offices

Visit our web site at WorkSafeBC.com

Abbotsford

2774 Trethewey Street
V2T 3R1
Phone 604 276-3100
1 800 292-2219
Fax 604 556-2077

Burnaby

450 – 6450 Roberts Street
V5G 4E1
Phone 604 276-3100
1 888 621-7233
Fax 604 232-5950

Coquitlam

104 – 3020 Lincoln Avenue
V3B 6B4
Phone 604 276-3100
1 888 967-5377
Fax 604 232-1946

Courtenay

801 30th Street
V9N 8G6
Phone 250 334-8765
1 800 663-7921
Fax 250 334-8757

Kamloops

321 Battle Street
V2C 6P1
Phone 250 371-6003
1 800 663-3935
Fax 250 371-6031

Kelowna

110 – 2045 Enterprise Way
V1Y 9T5
Phone 250 717-4313
1 888 922-4466
Fax 250 717-4380

Nanaimo

4980 Wills Road
V9T 6C6
Phone 250 751-8040
1 800 663-7382
Fax 250 751-8046

Nelson

524 Kootenay Street
V1L 6B4
Phone 250 352-2824
1 800 663-4962
Fax 250 352-1816

North Vancouver

400 – 224 Esplanade W.
V7M 1A4
Phone 604 276-3100
1 888 875-6999
Fax 604 232-1558

Prince George

1066 Vancouver Street
V2L 5M4
Phone 250 561-3700
1 800 663-6623
Fax 250 561-3710

**Surrey**

100 – 5500 152 Street
V3S 5J9
Phone 604 276-3100
1 888 621-7233
Fax 604 232-7077

Terrace

4450 Lakelse Avenue
V8G 1P2
Phone 250 615-6605
1 800 663-3871
Fax 250 615-6633

Victoria

4514 Chatterton Way
V8X 5H2
Phone 250 881-3418
1 800 663-7593
Fax 250 881-3482

Head Office / Richmond

Prevention Information Line:
Phone 604 276-3100
1 888 621-7233 (621-SAFE)

Administration:
6951 Westminster Highway
Phone 604 273-2266

Mailing Address:
PO Box 5350 Stn Terminal
Vancouver BC
V6B 5L5

**After Hours
Health & Safety
Emergency**

604 273-7711
1 866 922-4357
(WCB-HELP)

R06/06



EMERGENCY PHONE NUMBERS

Fire/Police/Ambulance: _____

Poison Control: _____

Emergency Contact: _____

Out-of-Area Contact Person: _____

Coordinator/Supervisor: _____

Agency: _____

Worker Health and Safety Representative: _____

Employer Health and Safety Representative: _____

Union Steward: _____

Other: _____



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