



 Public Services Health
& Safety Association™

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Community Care: A Tool to Reduce Workplace Hazards





Community Care: A Tool to Reduce Workplace Hazards

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INTRODUCTION

The community sector can be an unpredictable place to work. Moving from one client home to another, your workplace is always changing.

It is important to be able to:

- recognize hazards that might cause a workplace injury
- decide what to do to control the hazard
- know when and what to tell your supervisor
- Advise your joint health and safety committee (JHSC) or health and safety representative (HSR) of unresolved health and safety hazards.

Common workplace risks when providing client care in the community include:

- Musculoskeletal Disorders
- Slips, Trips and Falls
- Driving
- Workplace Violence
- Infectious Diseases
- Fire and Emergencies
- Chemicals
- Kitchen Hazards

This tool outlines hazards associated with each of these common risks, and gives suggestions to control the hazards that the worker should tell the supervisor and JHSC/HSR. It also suggests training that should be provided to workers and information that the worker should tell the supervisor.

For each common risk there are also suggestions for the employer and/ or Local Health Integration Network (LHIN) Home and Community Care to control workplace risks at the employer and/or system level.

How to effectively use this tool:

- Use the tool during orientation of community care workers, to point out the many hazards and control options.
- Use the tool to identify whether the control is best put in place at the system level, at the employer level or at the worker level.
- The tear-off checklist at the back of the tool can be used by works to identify and report hazards to their supervisor and JHSC/HSR; the supervisor can then record any corrective action taken, or whether the hazard was passed along to the system level.



Sharing information and working together is most effective in an organization with a positive safety culture, where staff members:

- Are asked for their input and are involved in decision making,
- Are comfortable sharing their suggestions and concerns, and
- Are recognized and rewarded for their positive contributions.

By working together at all levels, workplace injury to community care workers can be reduced.

WORKPLACE HAZARDS

MUSCULOSKELETAL DISORDERS (MSD)

An injury or disorder of the musculoskeletal system resulting from exposure to various hazards and/or risk factors in the workplace (OHSCO 2007) and causing pain. Over half of the injuries to community care workers are MSDs. The highest risk task is client handling. The three main risk factors for MSDs include:

- High force: Heavy muscular effort is needed during tasks such as lifting, pushing, pulling and carrying.
- Repetition: Using the same muscles repeatedly during a task like scrubbing or vacuuming.
- Posture: An awkward posture like raising arms overhead, bending far over, or twisting the body. A static posture like holding a bent position over a bed for more than 30 seconds.

Report signs and symptoms to your supervisor. Some considerations when reporting are:

- Can you see a sign of injury? Redness, swelling, loss of colour in skin tone, loss of joint movement.
- Can you feel a symptom of injury? Aching, pain, burning, weakness, cramping, numbness.
- Have you received training in the best way to:
 - Lift, transfer or reposition a client?
 - Provide client care in feeding, dressing, bathing?
- Tell your supervisor:
 - If the equipment is not there, is broken or needs maintenance.
 - If the client care needs change.
 - If you would like/need more training.
- Tell your JHSC/HSR: If you have any unresolved health and safety issues related to musculoskeletal disorders.

A CARE card at the end of this guideline can be used at workplaces as a poster.



The tables below give a summary of the risk and controls for hazards that can be associated with MSDs at the workplace, for workers and employers.

Workers:

Hazards	There is a risk if:	Worker controls
Client handling: Repositioning Transfers Lifts	<ul style="list-style-type: none"> • I need to transfer, reposition or lift the client. • The client resists being moved. • The client can't always understand directions. 	<ul style="list-style-type: none"> • Every time that you are about to work with a client, follow the CARE card to see if the client is ready to work safely with you. • Ensure the equipment you need to lift, transfer or reposition the client is there for you to use; if possible, adjust the bed to the best working height. • Ask the client to help you where they can during client handling.
Client care: Toileting Bathing	<ul style="list-style-type: none"> • There is not enough room around the toilet for me to assist the client. • The grab bars are too far away for the client to reach. • I have to reach to bathe the client. • I have to support the client's arm or leg. • I have to kneel on a hard floor for a long period of time. 	<ul style="list-style-type: none"> • Ask the client to help as much as possible. • Sit at the side of the tub when possible to get closer to the client and reduce bending and reaching. • Place one hand on the grab bar to support your weight when needed. • Use lifting equipment when possible. • Stand up straight now and then to rest your back. • Place a folded towel under your knees when kneeling on a hard surface.
Client Care: Feeding	I have to bend forward to feed the client.	<ul style="list-style-type: none"> • Use a stool to get as close to the client as possible. • Stretch between feeding tasks. • Relax at every opportunity; don't hold your arm up waiting for client.
Client Care: Dressing	<ul style="list-style-type: none"> • I have to reach or bend to help the client dress. • I have to support the client's arm or leg. 	<ul style="list-style-type: none"> • Sit on a stool when putting on socks and shoes.



	<ul style="list-style-type: none"> • The clothes are tight fitting with small buttons. 	<ul style="list-style-type: none"> • Use a lift or sliding sheets when needed. • Tell your supervisor if client clothing is hard to put on or take off.
Making the bed	<ul style="list-style-type: none"> • I have to bend over to make the bed or tuck in sheets. • There is little room around the bed. 	<ul style="list-style-type: none"> • Raise the bed to a good working height if possible, or squat or kneel on one knee to make one side of the bed at a time. • Use a power grip when pulling on sheets (both hands are used not just thumb and one finger). • Tell the supervisor if you cannot walk around three sides of the bed.
Cleaning	<ul style="list-style-type: none"> • I have to reach when cleaning the floors, toilet, bathtub or high up places. • I have to kneel on hard floors when cleaning. • I have to scrub. 	<ul style="list-style-type: none"> • Use cleaning equipment with long handles if possible. • Place a folded towel under your knees if kneeling on a hard surface. • Wear well-fitting gloves so you don't have to grip as hard when cleaning. • Use a step stool when available so you don't have to reach as far. • Use a scrub brush with a wide handle and wear well-fitting gloves.
Laundry	<ul style="list-style-type: none"> • I have to bend down or twist to use the washer or dryer. • I lift wet laundry. • I have to bend or reach to fold laundry. 	<ul style="list-style-type: none"> • Bend knees when using the washer or dryer. • Carry smaller loads – making two trips if necessary; do not twist the body. • Fold clothes in an area where you do not have to bend over.
Nurses Bag	I carry a heavy bag with the equipment or information I need to do my job.	Carry only what you need so that your bag is as light as possible.



Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service provider-employer	System: LHIN
Client handling and care: Repositioning Transfers Lifts Toileting Bathing Dressing	<ul style="list-style-type: none"> • Does the client need: <ul style="list-style-type: none"> – Transfers, repositions or lifting. – Toileting. – Bathing. – Dressing. – Feeding. • Is the proper equipment available? • Consider room layout. <p>Is there enough room around the toilet; enough around the bed?</p> <ul style="list-style-type: none"> • Has the worker told you that equipment needs to be repaired or replaced? • Has the worker told you that client needs have changed? • Can the worker safely complete all the client care tasks on his/her own with the equipment available? 	<ul style="list-style-type: none"> • Ensure that transfer, lift and repositioning equipment is available and in good working order. • Notify the client if equipment needs to be repaired or replaced. • Provide training in: <ul style="list-style-type: none"> • The proper use of equipment. • Safe client handling techniques. • Client care techniques (Bathing, dressing, and feeding). • Proper body mechanics. • Notify CCAC if client capabilities change to the point your worker can no longer provide safe care on their own. • Notify the client contact of worker reports of equipment not working or needing maintenance. • Try to arrange schedules so that workers have adequate rest between clients that require heavy care. • Provide a stool for feeding the client. 	<ul style="list-style-type: none"> • During the first visit with a client, ensure: <ul style="list-style-type: none"> – Washroom is equipped with grab bars for toilet and bathtub, there is a shower chair or commode if needed. – Bed (able to raise/ lower or regular bed accessible on all three sides). – One worker can – Safely provide care, otherwise allow for two workers. • Based on the client needs assessment, determine the equipment needs and match it to what the service provider offers (Mechanical lifts, sliders, beds, stools). • Ensure that service provider is aware of the transfer, lift and Repositioning equipment required. • Notify client what needs to be upgraded



		<ul style="list-style-type: none"> • If worker reports clothing is difficult to get on or off, suggest adaptive clothing to the client contact. 	<p>in order to provide safe services.</p>
Domestic duties	<ul style="list-style-type: none"> • Does the bed raise/ lower? • If standard bed, can the worker access all 3 sides? 	<ul style="list-style-type: none"> • Request that client make the standard bed accessible on all three sides. • Provide training in: <ul style="list-style-type: none"> • Making beds, cleaning, laundry. • Proper body mechanics. • Ask client contact for cleaning equipment that is better designed for the worker to use (long handle, wide grip, etc.). • Provide gloves made of materials that are appropriate for the task and in various sizes so that worker can select a glove that fits well. 	<ul style="list-style-type: none"> • Request that client make the standard bed accessible on all three sides.

SLIPS, TRIPS AND FALLS

Slips, trips and falls are the third highest reported injury by health and community care workers in Ontario. Most falls are due to slips and trips on a level surface, however falling from a height often results in a more serious injury.

- Common causes of slips, trips and falls include:
 - Rushing to get all tasks done
 - Poor lighting
 - Improper footwear
 - Clutter (on the floor and too much furniture in a room)

Training on slips, trips and falls should include the type of footwear workers should wear, and what to do if worker arrives and the walkway is not cleared of snow/ice. In case of any problems with repeated



clutter at home inform supervisor, and inform the JHSC / HSR if there are any unresolved health and safety issues related to repeated clutter at home.

The following is a summary of the hazards and controls for workers and employers.

Workers

Hazards	There is a risk if:	Worker Controls
Walking surfaces	<ul style="list-style-type: none"> • The walkway, steps and porch are often slippery. • The inside floors are slippery or wet. • The bath mat does not have a non-slip backing. • There is clutter on the floor of the client's home. • The entrance, carpets and hard surface floors are not even. • The entrance/rooms are poorly lit. 	<ul style="list-style-type: none"> • Wear proper footwear inside and outside of the client's home; follow your company footwear policy. • If sand or salt are available in the winter, spread on the walkway to keep it ice-free. • Clear clutter in the areas you need to walk. • Walk carefully, always watching where you are going; use handrails when climbing stairs. • Tuck electrical cords out of the way. • Keep drawers closed. • Ensure good lighting – replace burnt out bulbs. • Report to your supervisor if: <ul style="list-style-type: none"> • The walkway is not clear of ice and snow. • The carpet is buckled, curled or uneven, causing you to trip. • The hard surface floor is cracked or uneven, causing you to trip. • Tell your JHSC/HSR if your health and safety issues are not resolved.
Cleaning floors	I clean hard-surfaced floors	<ul style="list-style-type: none"> • Use the right amount of cleaning chemical for the floors – too much can make the floor slippery. • Clean up any spills right away.

Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System- LHIN
Footwear and surface	<ul style="list-style-type: none"> • Does the organization have a footwear policy? 	<ul style="list-style-type: none"> • Prepare a footwear policy and enforce this policy. • Provide ice cleats for staff to wear on icy surfaces. 	<ul style="list-style-type: none"> • During the initial assessment, ensure that:



	<ul style="list-style-type: none"> • Does the client’s home have surfaces that pose slip/trip/fall hazards? • Are the entrances and internal rooms well lit? 	<ul style="list-style-type: none"> • Require clients to have non-slip backing on all scatter mats including the bathroom. • Require clients to fix slip, trip and fall hazards inside and outside of the home. • Require clients to have proper lighting. • Assist the client in finding someone (family member, neighbour, service) to keep the walkways maintained in the winter. 	<ul style="list-style-type: none"> • The walkway in the winter is well maintained. • Scatter mats have non-slip backing. • Hard-surface floors are free of cracks, and uneven elevations. • Carpets are not curled, buckled, frayed or have uneven surfaces. • Extension cords do not run across the floor. • There is no clutter on stairs or floors. • Steps and handrails are in good condition. • Furniture in rooms is arranged to allow an adequate walkthrough. • Lighting is adequate for the task, especially in stairwells and outside.
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DRIVING

81% of collisions involve another car, the rest involve animals, signposts, fences, etc. Driving 30km/hr over the speed limit makes you 6 times more likely to kill or injure yourself. Fatigue and driving fast to maintain a schedule were found to increase the risk of a collision.

There are some differences when using a company car vs personal car for work:

- If you use your personal car for work, you are responsible for keeping it in good working order. The employer is responsible for keeping a company car in good working order.



- The Highway Traffic Act states that no person should drive a car that is in a dangerous or unsafe condition.

Training to be provided on how to check the car to make sure car is safe to drive e.g. doing a daily vehicle circle check.

Reporting to the supervisor should be done if there are any problems with the company car, if worker is involved in a collision or traffic ticket, and if it is hard to keep to schedule and drive safely. The JHSC/HSR should be informed if the worker has any unresolved health and safety issues related to driving.

The following is a summary of the hazards and controls for workers and employers.

Workers:

Hazards	There is a risk if:	Worker Controls
Driving skills	I regularly drive faster than the speed limit. I eat or drink while driving	<ul style="list-style-type: none"> • Drive within the speed limit or slower if road conditions are poor. If you are behind schedule and tempted to speed, tell your supervisor that there is not enough time in the schedule to drive safely. • Focus on the driving. If you need to read a map, take off your coat, reach for something in the back seat, etc. stop the car to do it.
Preparing for the drive	<ul style="list-style-type: none"> • I regularly have to adjust the mirrors while I drive. • I regularly have to read a map while I drive. • The client does not know that I am coming. 	<ul style="list-style-type: none"> • Adjust the headrest, seat, rear and side view mirrors before you drive. • Have sunglasses ready, and adjust the radio, heat/cooling etc. so you don't have to reach while driving. • Know where you are going so you don't have to read a map while driving. • The client should know that you are coming, and you should know who will be present when you are there.
Car break downs	<ul style="list-style-type: none"> • The car is not working properly. • I don't know when the car was last maintained. • I'm not sure what to do if the car breaks down or I run out of gas. 	<ul style="list-style-type: none"> • Walk around the car at the beginning of each shift to make sure it is safe. • Keep a maintenance record for your personal car if you use it for work. • Ask the employer what you are expected to do if the car breaks down. • Ensure you know where the gas stations are in your area.



Fatigue	<ul style="list-style-type: none"> • I have to drive long distances (greater than 1 hour) in the afternoon. • I am often tired when I am driving. 	<ul style="list-style-type: none"> • Recognize when you are tired; pull over in a safe spot and get out of the car and walk around for a few minutes. • Be aware of the drowsiness effects of some medications. • Avoid long drives in the afternoon.
Poor Weather	I drive to care for clients in poor weather	<ul style="list-style-type: none"> • Check weather and road conditions before heading out. • Bring along phone numbers you will need. • Keep an emergency kit in the car.
Transporting the client	I drive the client places	<ul style="list-style-type: none"> • Follow the supervisor's instructions on where to place the client in the vehicle, how to safely load and secure the client, and how to minimize distractions from the client.
Physical discomfort	<ul style="list-style-type: none"> • My neck and lower back hurt after driving. • My hips and lower back hurt from getting in and out of the car. 	<ul style="list-style-type: none"> • Adjust the car seat; use a rolled up towel or small cushion to support lower back. • Put your bag in and out of the car from the passenger door. • Get out of the car every hour of continuous driving and walk around. • Keeping in good physical condition will reduce discomfort.

Basic Driving Rules

- Walk around the car to check that it is safe; report any vehicle problems to your supervisor.
 - Always use a seatbelt and make sure that any passengers use their seatbelts.
 - Do not talk on a phone when driving.
 - Use full headlights during the day.
 - Do not multi-task while driving.
 - Drive within the posted speed limits or according to road conditions.
 - Do not drive under the influence of drugs or alcohol.
 - Report collisions or traffic tickets to your supervisor.
- Tell your supervisor if it is hard to keep to the schedule and drive safely.
- Tell your JHSC/HSR if you have any unresolved health and safety issues.



Employers & LHIN Home and community Care

Hazards	Assess the risk	Service provider- Employer	System - LHIN
Driving Skills	Does the worker receive speeding tickets?	<ul style="list-style-type: none"> • Discourage speeding by making workers responsible for their own speeding tickets. • Arrange the schedule to allow enough time; this will reduce the temptation of speeding. • Arrange appointments to follow a logical progression. • Avoid routes that are considered more dangerous or under construction. • Develop basic company driving rules to address multi-tasking. • Educate the worker on seat belt use, car maintenance, and defensive driving skills. 	
Preparing for the drive	Does the client know the worker is coming?	<ul style="list-style-type: none"> • Ensure the client is aware that the worker is coming. • Ask who will be present while the worker is providing care. 	During the initial Visit, Ask who will be present when the worker is providing care.
Car breakdown	Is there an emergency contact list?	<ul style="list-style-type: none"> • Establish a pre-trip inspection for vehicles. (e.g. Daily Circle Check) • Develop a procedure for employees to follow if the car breaks down. • Determine minimum safety features for company vehicles. 	
Poor Weather	Does the worker drive to care for clients during poor weather?	Encourage workers to check weather and road conditions on a daily basis.	
Fatigue	Does the worker drive long distances in the afternoon?	Encourage worker to stop the car and walk around it for a break from driving	



Transporting Clients	Does the worker transport clients?	<ul style="list-style-type: none"> • Develop procedures on where to place the client in the vehicle, how to safely load and secure the client, how to minimize distractions from the client. • Train the worker in the procedures. 	
Time management	Does the worker report issues with the schedule and work load?	<ul style="list-style-type: none"> • When workloads are excessive, consider use of part time and on-call staff. • Establish a reporting process so that someone is aware of destination and expected time of arrival. • Encourage workers to report time management issues. 	

WORKPLACE VIOLENCE

There are four types of workplace violence:

- Type I (external): The perpetrator has no relationship to the worker or workplace
- Type II (client or customer): The perpetrator is a client at the workplace who becomes violent toward a worker or another client
- Type III (Worker to Worker): The perpetrator is an employee or past employee of the workplace
- Type IV (domestic violence): The perpetrator has a personal relationship with an employee or a client

Workers have the Right to Refuse Unsafe Work, whereby a worker may refuse to work or do particular work where he or she has reason to believe that the workplace violence is likely to endanger himself or herself

Workers should review if they have had training in de-escalating potential violence, working with people who have mental health issues or dementia, and what should workers do if they encounter workplace violence.

Supervisor should be notified if the worker experiences any workplace violence issues or near misses, or if the worker feels they may have been exposed to any of the four types of violence.



The JHSC/HSR should be notified if the worker has unresolved health and safety issues related to workplace violence.

The following is a summary of the hazards and controls for workers and employers.

Workers

Hazards	There is a risk is:	Worker controls
Client violence/ aggression	<ul style="list-style-type: none"> • The client has a history of angry outbursts. • The client has a negative mood/ attitude. • The client has signs of substance abuse. • The client has a cognitive impairment. • The client has sexually harassed me in the past. 	<ul style="list-style-type: none"> • Remain neutral, empathetic, interested, calm and use active listening. • In a calm way, explain that violence is unacceptable and is not tolerated. • If you feel threatened, politely terminate the interaction, be prepared to call the police if required. • Stand outside of personal space. • Stand to the side, never in front. • Stand on non-dominant side (watch side). • Always position yourself so that you can easily reach an exit. • Use calm body language. • Continually assess the needs of the client and meet these needs to avert episodes of aggressive behaviours.
Travel in community	<ul style="list-style-type: none"> • I travel to a dangerous/remote area. • I travel when it is dark outside. • I travel alone. 	<ul style="list-style-type: none"> • Know the area. • Know the safest route. • Be aware of surroundings when waiting for public transit. • Have emergency telephone numbers handy. • Travel in daylight hours whenever possible. • Advise home/office when you arrive and leave (check-in procedures).



		<ul style="list-style-type: none"> • Carry a cell phone.
Parking vehicle	<ul style="list-style-type: none"> • The parking lot is usually dark and/or isolated. • There is a possibility of a personal attack. 	<ul style="list-style-type: none"> • Park on premises or as close to the home/building as possible. • Lock your purse in trunk before you go to your destination; avoid locking purse in trunk at the destination. • Put your keys in your hand before leaving the home/building so you are ready to unlock your car. • Carry a whistle or another type of personal alarm; use it and scream if attacked. • Be aware of your surroundings. • Never try to disarm an armed individual.
Pets	The client has a pet	Before the visit, request that any pet be secured

Employer & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System- LHIN
Client violence/ aggression	<ul style="list-style-type: none"> • Does the organization have a policy/ procedure for the 4 types of workplace violence? • Has a risk assessment been completed? 	<ul style="list-style-type: none"> • Develop a written policy/procedure that addresses all types of workplace violence, in consultation with the JHSC/worker health and safety representative, and with input from staff. • Conduct a risk assessment prior to a caregiver working in the home: • Assessment of the home environment prior to undertaking home visits. 	Require clients to sign a contract stating that they understand that their care may be terminated if a caregiver experiences violent or threatening activity in their household.



		<ul style="list-style-type: none"> • Assessment of environment external to the client’s home and possible hazards. • Prepare a letter of agreement or service contract with the client outlining client roles and responsibilities, as well as the zero tolerance policy for violence. • Provide workers with training that includes: <ul style="list-style-type: none"> • The employers’ and workers’ responsibilities for the prevention of violence. • How to identify, prevent and manage aggressive behaviours and violent situations. • It needs to be emphasized to all workers that their safety comes first. • Ensure that all incidents are reported promptly and that accurate record keeping exists. 	
Travel in community	Is the client’s home in a dangerous/remote area?	Identify safest travel route and inform worker	
Parking vehicle	Is the parking area visible and well lit?	Provide worker with information on how to select the safest parking spots	During initial visit identify potential safe parking locations
Pets	Does the client have a pet?	Instruct worker that all pets must be secured before entering the home and providing care	During initial visit, inform client that pets must be secured before the caregiver enters the home.



			Make note that the client has a pet.
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INFECTIOUS DISEASES

Infections can pass from client to worker, or from worker to client, or can be transmitted from other sources such as:

- Other people or visitors to the home
- Animals, including cats, dogs, rats, etc
- Food that has not been prepared or stored safely
- Contaminated drinking water

A standard precaution to take is to assume all clients are infectious and take steps to prevent blood or body fluid from contacting your skin or eyes.

What is a SEMS?

Any sharp medical device that has a build-in safety features to help protect workers from a sharps injury.

Workers should review if they have received training in:

- Proper hand washing and routine practices (Universal Precautions)?
- When hands should be washed?
- Transmission of infections and contact, droplet or airborne precautions?
- Cleaning up blood and body fluid spills?

A summary of handwashing techniques is as shown below:





Supervisors should be notified if worker gets exposed to blood or body fluid from a splash or needle stick. The JHSC/HSR should be notified if the worker has any unresolved health and safety issues related to exposure to infectious diseases.

The following is a summary of the hazards and controls for workers and employers.

Workers:

Hazards	There is a risk if:	Worker controls
Blood and body fluid exposure: Sharps Splashes Spills	<ul style="list-style-type: none"> • I use hollow bore needles during client care. • I might be splashed by blood or body fluid during client care. • I sometimes need to clean up spills of blood or body fluid. 	<ul style="list-style-type: none"> • Use sharps in a well-lit area. • Use a safety engineered medical sharp (SEMS) whenever one is available. • Always dispose of sharps safely right away – don't wait for later. • Report any exposure to your supervisor. • Wear disposable gloves whenever you may come in contact with blood or body fluids. • When removing garbage bags, do not squeeze the bags or hold them against you, in case sharps are inside. • Wear disposable gloves and use disposable towels for cleaning up blood or body fluid spills, then wipe the area with a 1:10 bleach solution.
Respiratory disease exposure	<ul style="list-style-type: none"> • I don't have an immunization record. • I have not had a TB Skin Test and I don't know my TB status. • I have not been fitted to wear an N95 respirator. 	<ul style="list-style-type: none"> • Check to see that your immunizations are up to date. • Do not come to work if you have a fever, cough or cold. • Use gloves, gowns, respirators and goggles/face shields when needed. • Be properly it tested for a N95 respirator and learn how to do a seal check before working with a client with an airborne disease. • Ask an infectious client to wear a surgical mask.
Food handling/ food safety	I prepare food for the client	<ul style="list-style-type: none"> • Wash hands before preparing food. • Use a separate cutting board and knife for raw meat.



		<ul style="list-style-type: none"> • Wash cutting boards with dish soap and hot water after cutting meat; disinfect with a mild bleach solution.
Laundry	There are soiled linens to wash	<ul style="list-style-type: none"> • Handle soiled linen carefully to prevent contamination of your clothing. • Remove fecal material from soiled laundry and flush it down the toilet. Wash heavily soiled laundry separately and add bleach to the water.
Cleaning	I clean the home	<ul style="list-style-type: none"> • Things in the home that are touched frequently should be cleaned more often. • Treat your bag as a piece of clean equipment; only reach inside the bag if your hands are clean. This way you will not contaminate anything inside the bag.

Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System- LHIN
Blood and body fluid exposure: Splash Sharps	Are hollow bore needles used during care?	Determine if safety engineered medical sharps are an option. <ul style="list-style-type: none"> • Provide a sharps container for all clients who receive care. • Encourage Hepatitis B Immunization. • Train workers in: <ul style="list-style-type: none"> • Proper hand hygiene. • How to disinfect equipment after use. • Safe sharps disposal. • How to clean up a blood or body fluid spill. • Provide hand sanitizer 	<ul style="list-style-type: none"> • Screen clients prior to accepting into care, transfer and discharge from care. • Assess the need for dedicated equipment (i.e. antibiotic resistant organisms).



		<p>and disposable gloves, eye and face protection, if needed, and a gown in the event clothes may be soiled. Provide surgical masks for the client to wear, if needed.</p> <ul style="list-style-type: none"> • Develop a procedure to follow if exposed to blood or body fluid or a needle stick injury. • Encourage employees to report exposures. 	
Respiratory disease	Will the worker care for clients with airborne diseases?	<ul style="list-style-type: none"> • Ensure only employees who have been it tested for an N95 respirator are assigned to care for clients requiring airborne precautions. • Encourage annual influenza immunization. • Prepare a written TB infection control program. • Offer immunization programs and TB testing. 	Follow outbreak reporting requirements.
Food handling/ food safety	Will the worker be laundering soiled linens?	Provide training in safe handling of food	
Laundry and cleaning	<ul style="list-style-type: none"> • Will the worker be laundering soiled linens? • Will the worker need to follow special environmental cleaning procedures? 	Provide instruction of cleaning and laundry requirements.	



FIRE AND EMERGENCIES

This can include fire, blackout, and carbon monoxide poisoning or extreme temperatures.

Many elders living in their own homes on fixed incomes cannot afford home repairs, placing them at risk for fire. Although many clients are at low risk for fire, one-third may be poorly prepared to respond to fire or disaster.

Workers should review if they have received training in what they should do if there is a fire in a client's home. Supervisors should be notified of any fire hazards known by the worker, and if the smoke detector is not in the house or is not working. The JHSC/HSR should be notified if the worker has any unresolved health and safety issues related to fire and emergencies.

A common type of fire is kitchen fires. Kitchen fires start because of heating of oil. As oil gets hot it smokes a bit; if it gets hotter it bursts into flame. To extinguish a fat fire, cover it with a pot lid or damp cloth and turn off the gas or power. Foam or powder extinguishers can be used but NEVER use water. Also, do not try to carry the burning pan.

The following is a summary of the hazards and controls for workers and employers.

Workers:

Hazards	There is a risk if:	Worker controls
Smoking	<ul style="list-style-type: none"> The client smokes. There is no smoke detector in the home. 	Refuse unsafe work if client continues to smoke in your presence or as determined in contract prior to visit.
Electrical fires	<ul style="list-style-type: none"> Extension cords run under rugs. Extension cords and electrical outlets have too many plugs in them. The client uses space heaters that sit close to furniture or curtains. The appliances are smoking, or put out an unusual smell. Electrical wires are old and worn. 	<ul style="list-style-type: none"> Ask the client to move the cord out from under the rug. Move the space heater so that there is at least three feet of space around it. If any appliances start to smoke or put out an unusual smell, unplug and stop using it until it is repaired. Ask client to not overload extension cords. Tell your supervisor of worn out wiring. Tell your JHSC or HSR if you have unresolved health and safety issues related to worn out wiring.
Oxygen use	<ul style="list-style-type: none"> The client uses oxygen tanks and equipment. 	<ul style="list-style-type: none"> Place the tank and equipment away from any heat sources.



	<ul style="list-style-type: none"> The oxygen cylinder is not chained or stored in a well-ventilated area. 	<ul style="list-style-type: none"> Check to see that there is a sign on the front door that tells the fire department oxygen is in use. Ensure oxygen tanks are secured. Handle oxygen cylinders carefully as they should not be dropped, bumped or rolled. Store oxygen cylinders when not in use in a well-ventilated areas away from sources of fire or heat. Do not smoke in a home where oxygen is being used.
Escape routes	The hallways, stairways and doorways are cluttered.	<ul style="list-style-type: none"> Remind the client that hallways, stairways and doorways need to be kept clear. Have a planned emergency escape route.
Carbon monoxide	The client has a gas stove and/or a wood burning fireplace.	Look for a carbon monoxide monitor and test it regularly.
Kitchen fires	I cook with oil for the client	<ul style="list-style-type: none"> Never leave the kitchen when any amount of oil is heating on the stove. Be sure you know how to put out a fat fire (see page 47).
Extreme temperatures	The building is too hot or too cold	<ul style="list-style-type: none"> Report to supervisor temperatures that are too hot/cold. Report to supervisor if cooling/heating systems are not working properly. Tell your JHSC or HSR if you have unresolved health and safety issues related to extreme temperatures and cooling/heating systems that are not working properly.
Emergency contact list	The client does not have an emergency contact list posted	<ul style="list-style-type: none"> Ask the client to post an emergency contact list near the phone. Understand how to contact the organization in the event of an emergency.



Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System- LHIN
Fire	<ul style="list-style-type: none"> • Does the client smoke? • Is oxygen used in the home? 	<ul style="list-style-type: none"> • Train the worker in what to do if the client is smoking when the worker is at the home. • Create a standard sign for the client’s front door indicating the use of oxygen equipment – this will alert emergency responders. 	<ul style="list-style-type: none"> • Inform the client that he/she will not be able to smoke when the worker is at the home. • During the first visit with a client, ensure: <ul style="list-style-type: none"> – A working smoke detector is in the client’s home. – A fire extinguisher is in client’s home. – No obvious electrical hazards are present. (Extension cords running under a rug, overloaded electric outlets).
Electrical fires	Has the worker informed you of worn out wires, overloaded extension cords or cords running under carpets?	<ul style="list-style-type: none"> • Talk to the client about safe use of electrical equipment. • Ask client to get old or worn out wiring repaired or replaced. 	Look for worn out wiring or overloaded extension cords or electrical outlets, or cords running under rugs.
Oxygen	<ul style="list-style-type: none"> • Does the client smoke? • Is there signage of oxygen use posted? • Are oxygen cylinders stored in a well ventilated area and clamped to prevent them from falling over? 	Ensure that there is an oxygen cylinder handling policy/ procedure in place.	<ul style="list-style-type: none"> • During the initial assessment: <ul style="list-style-type: none"> – Ensure signage for oxygen cylinder is posted. – Ensure client doesn’t smoke.



			<ul style="list-style-type: none"> – Ensure proper storage of oxygen cylinder.
Disaster planning	Is there an emergency contact list?	<ul style="list-style-type: none"> • Train the worker to identify emergency exits and escapes routes. • Train worker on how to assist the client to exit the home; in an apartment building, instruct the worker to move wheelchair-bound client to the stairwell; inform emergency services of their location so firefighters can transport the client. • Provide a template for clients to use when creating their list of emergency phone numbers. 	<ul style="list-style-type: none"> • Identify emergency exits and escape routes. • Determine how service delivery will continue during various types of emergencies.
Extreme temperatures	<ul style="list-style-type: none"> • Is the home air conditioned? • Is the furnace in good working order? 	<ul style="list-style-type: none"> • Ensure that plans are in place to cool the environment (e.g. fans, window air conditioners). • Ensure the furnace is in good working order in preparation for cold winter months. 	<ul style="list-style-type: none"> • During the initial assessment: <ul style="list-style-type: none"> • Ensure the furnace/air condition units are functioning. • Inform client of their accountability for servicing the furnace when required.



CHEMICALS

Workers can be exposed to chemicals during housekeeping (mixing chemicals, container that is leaking) or when giving drugs or medications.

The highest risks are:

- Chemicals in unlabelled containers.
- Chemicals stored incorrectly.
- Leaking containers.

Chemicals can enter the body through:

- The skin or eyes through vapours or a splash.
- By breathing them in.
- By eating or drinking them by mistake.
- The skin if punctured with a needle containing a drug.

Signs and symptoms of chemical exposure include:

Dry or red skin; blisters;	Itchiness	A burning sensation on skin or in nose or throat
Stinging eyes	Coughing	Dry Throat
Shortness of breath	Headache	Nausea
Dizziness	Blurred vision	

Workers should review if they have received training in how to read and understand consumer symbols and WHMIS labels. Supervisors should be notified if the worker has a chemical exposure or experiences signs or symptoms when using cleaning chemicals, or if a client asks worker to use an unfamiliar cleaning product or if a client asks worker to mix chemicals or cleaning products. The JHSC/HSR should be notified if the worker has any unresolved health and safety issues related to cleaning chemicals/products or a chemical exposure.

The following is a summary of the hazards and controls for workers and employers.

Workers

Hazards	There is a risk if:	Worker controls
Cleaning chemicals or pesticides	<ul style="list-style-type: none"> • I use cleaning products or pesticides in the client's home. • I am not sure how to read a consumer product label. 	<ul style="list-style-type: none"> • Never use a chemical in an unlabeled container. • If you are asked to use an unfamiliar chemical, tell your supervisor so you can get training before using it.



		<ul style="list-style-type: none"> • Never mix two chemicals together. • Use gloves or other personal protective equipment when required. • Ask your supervisor to train you in consumer symbols (see below). • If you experience signs or symptoms when using a chemical, stop using it immediately. • Use chemicals in an area with good ventilation.
Drugs	I have to give injections	<ul style="list-style-type: none"> • Handle sharps safely. • Never recap needles. • Report a needle stick to your supervisor. • Discard the needle right away in a proper sharps disposal container.

Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System- LHIN
Cleaning chemicals	Does the worker use, store or handle consumer cleaning products?	<ul style="list-style-type: none"> • Provide training to workers in consumer product symbols and how to read consumer labels. • Provide training on what to do if cleaning product comes in contact with skin or eyes. • Provide training in how to safely clean up a spill. • Provide necessary personal protective equipment. 	<ul style="list-style-type: none"> • Is there enough ventilation to use the cleaning products? • Do cleaning products have labels and are they stored properly?



Consumer Product Symbols

	Hazard Category	Precautions
<p>TOXIC PRODUCT</p> 	<p><i>Poisonous</i></p> <p>May be lethal. Or May cause serious and irreversible effects</p>	<p>Do not get in eyes or on skin.</p> <p>Do not breathe fumes.</p> <p>Wear protective clothing and safety equipment as indicated on the label</p>
<p>CORROSIVE PRODUCT</p> 	<p><i>Causes Burns</i></p> <p>Will cause chemical burns to the skin, eyes and lungs. May form dangerous fumes when mixed with other chemicals.</p>	<p>Do not mix with other chemicals.</p> <p>Do not get in eyes or on skin.</p> <p>Do not breathe fumes.</p> <p>Do not swallow</p> <p>Wear protective clothing as indicated on the label</p>
<p>FLAMMABLE PRODUCT</p> 	<p><i>Fire Hazard</i></p> <p>May ignite if exposed to a spark or flame or May spontaneously ignite</p>	<p>Read the specific instructions on the label. Use only in well ventilated areas. Keep away from flames and objects that spark.</p> <p>Store in a safe location.</p>
<p>PRESSURIZED CONTAINER</p> 	<p><i>Explosion Hazard</i></p> <p>Under Pressure may explode if heated. If ruptured hazardous contents will be released</p>	<p>Do not Puncture.</p> <p>Do not burn.</p> <p>Store away from heat.</p>
<p>QUICK SKIN BONDING ADHESIVES</p>	<p>Bonds Skin Instantly</p>	<p>Do not get in mouth eyes or on skin</p>



KITCHEN HAZARDS

Common type of kitchen hazards are working with dull knives and working with hot materials.

The following is a summary of the hazards and controls for workers and employers.

Workers:

Hazards	There is a risk if:	Worker Controls
Cooking/ kitchen	<ul style="list-style-type: none"> • Are the knives dull? • Are the appliances near the sink? 	<ul style="list-style-type: none"> • Keep knives sharp. • Don't use appliances near the sink or other water. • Use caution with boiling water - always pour away from yourself. • Do not put metal in the microwave as it will spark and smoke and may start a fire.

Employers & LHIN Home and Community Care

Hazards	Assess the risk	Service Provider- Employer	System - LHIN
Cooking/ kitchen	<ul style="list-style-type: none"> • Are the knives dull? • Are the appliances near the sink or water? 	Ensure policy/procedures are in place for inspecting kitchen conditions including knife use, electrical appliances near water sources and nonmetal objects in the microwave.	During the initial Assessment inspect knives and location of electrical appliances.



CONTACT INFORMATION

Supervisor Name and Number: _____

Agency Name and Number: _____

JHSC/HSR Name and Number: _____

Police Direct Line: _____

Fire Direct Line: _____

Ambulance Direct Line: _____

Poison Direct Line: _____



CARE CARD: MUSCULOSKELETAL DISORDERS (MSD)

Before moving a client check:

COMMUNICATION

Eye Contact? Able to follow simple commands?

ABILITY

Change in physical ability? Change in energy level? Can client move legs arms? Is client drowsy? (Medications, illness, fatigue)

RESISTANCE

Client refusing to participate? Signs of escalating behaviour?

Client agitated? Client uncooperative?

EQUIPMENT/ENVIRONMENT

Any obstacles along travel path? Equipment functioning & positioned appropriately? Correct sling type/size? Correct positioning of bed, equipment, and chair track?



COMMUNITY CARE HAZARD REPORT

Section 1- Worker hazard report

Complete the first section of this form for workplace hazards where you need your supervisor's help to fix the problem. Pass the form to your supervisor so he/she can complete the second section. Provide a copy to your JHSC/HSR if the issue is not resolved in a timely manner.

Section 2 – Supervisor follow up

Keep a record of the corrective action you take and those that you forward to the system for consideration. Remember to keep the worker informed of the actions you have taken and the progress. Inform the worker when you believe the hazard is controlled and record the date.



COMMUNITY CARE HAZARD REPORT

Your Name: _____

Client Name: _____ Date: _____

SECTION 1 – WORKER HAZARD REPORT

Type	Hazard Areas	Describe the hazard you found
Musculoskeletal Disorders	<ul style="list-style-type: none"> • Client handing- lifts, transfers, repositioning • Client care- toileting, bathing, feeding, dressing • Making the bed, cleaning, laundry • Nurses bag 	
Slips, Trips and Falls	<ul style="list-style-type: none"> • Footwear • Walking surfaces • Cleaning floors 	
Driving	<ul style="list-style-type: none"> • Driving skills • Preparing for the drive • Car breakdowns • Fatigue • Poor weather • Transporting the client • Physical discomfort 	
Workplace Violence	<ul style="list-style-type: none"> • Client violence/aggression • Travel in community • Parking vehicle • Pets 	
Infectious Diseases	<ul style="list-style-type: none"> • Blood and body fluid exposure – sharps, splashes, spills 	



	<ul style="list-style-type: none"> • Respiratory disease exposure • Food handling/food safety • Laundry Hazards • Cleaning Hazards 	
Fire and Emergencies	<ul style="list-style-type: none"> • Smoking • Electrical Fires • Escape routes • Carbon Monoxide • Kitchen fires • Extreme temperatures • Emergency contact list 	
Kitchen hazards	<ul style="list-style-type: none"> • Knives • Electrical appliances 	

SECTION 2 – SUPERVISOR FOLLOW UP

Corrective action was communicated to worker – Yes No Date: _____



Safe Environments
Healthy Workers

www.pshsa.ca

Supervisor Name: _____

Supervisor Signature: _____

Organization: _____

CAF # : _____

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Community Care: A Tool to Reduce Workplace Hazards

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