Community Disability Services

Staff Safety Toolkit

IMPORTANT NOTICE and LIABILITY WAIVER

The entire purpose of this document is to build organizational capacity for service providers to enhance the skills, knowledge and safety of staff supporting individuals with developmental disabilities.

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INTRODUCTION AND BACKGROUND

This Tool Kit focuses on the safety of staff in the Community Disability Services sector. The intent is to provide an easily accessible resource for those responsible for in-house training, refreshers and orientations on staff safety. The Tool Kit honours the unique needs of organizations by creating a structured framework with a menu of useful links, tools, strategies and e-learning resources for easy access. Many Occupational Health and Safety resources, tools and templates are easily available through trusted websites. These address various tasks and processes for employers and workers to improve their health and safety. Much of this material applies to our sector as easily as to any other, but each industry sector has specific hazards and issues to be considered. Materials developed for the Health Care sector align more closely to our sector needs, but do not address some of our unique situations, such as the ongoing staff and client relationship key to our work, and our role in minimizing behaviours while maximizing quality of life for the individuals supported.

METHODOLOGY AND SCOPE

This information is collated from contributing service provider agencies in the Community Disability Services sector as well as the broader safety community. A variety of methods, including literature reviews, committee members' input, a frontline survey, a management symposium and contributions from agencies were utilized to create a body of knowledge around staff safety.

The Tool Kit will look at safe work practices from three perspectives:

Place: worksites vary depending on tasks, activities and services, e.g., a home, a vehicle or in community

Individuals supported: know the client

Self: know your rights and your responsibilities, manage risk and self-care

This is a living document and your ongoing contributions to the Tool Kit to develop best practices and guidelines specific to our sector are vital. You decide which ones apply to your organization. We do hope to establish consistent messaging around staff safety in the Community Disability Services sector as well as to develop a useful model for sharing of resources among agencies and across the sector. The next step is to augment this Tool Kit with more sector-specific materials that have already been developed by organizations or under the direction of a working group.

SAFETY MANAGEMENT TRENDS

According to Kessels and Smit, approaches to address staff safety have evolved over the years. In the 1960s and 1970s, the focus was on improving safety from the engineering focus, for example, using handrails. In the 1980s and 1990s, the focus was on establishing clear policies for procedures and safety management systems. Over the last 15 years, the focus has shifted to behaviour, as not all situations can be captured in a procedure or protocol. It is about what you do in the moment. Recently there has been another shift based on the insight that the actual behaviour of staff is influenced by more than just their ability to act a certain way. It depends on a safety mindset and a team culture that supports communication and cooperation. "Safety needs to be seen as part of their professionalism." *

(*Kessels & Smit, The Learning Company | 2010)

GUIDING PRINCIPLES IDENTIFIED FROM BEST AND EMERGING PRACTICES

- Emphasis on prevention and a proactive approach

- Create an enabling approach to build worker and organizational capacity

- Belief in a continuous improvement focus: Plan-Do-Check-Act Cycle

- A safety culture is one of learning, not blame

- Importance of a safety mindset for all employees

- A 360° communication plan that involves not only getting the message out, but getting it back

- Active involvement of the workers at the frontline is critical

- Collaborative steps involving workers and management

- Use of participatory approaches and action-oriented tools are necessary

- Avoiding blame distribution: Working better together

  - Safety needs to be managed at the same organizational levels as other business functions

  - Commitment and leadership at all levels of an organization

SUGGESTED FRAMEWORK FOR TRAINING RESOURCES TOOL KIT

Health and Safety involves recognizing and managing the risks to the psychological, physical, and wellbeing of staff, contractors, volunteers, and visitors in the workplace. Workers need to have the knowledge to work safely. Safety is an important mindset for all staff, regardless of level in the organization, and a positive workplace safety culture is a factor in performance. It has a strong influence in the transfer of training knowledge into day-to-day operations. Content and context of training will vary depending on the role and responsibilities, the worksite, and identified hazards and controls. Clearly articulated safe work practices and accountabilities are key components. Supervisory positions play a key role in monitoring safety concerns and evaluating performance, while keeping records of training and the scheduling of training and refreshers are key components in the due diligence process and continuous improvement focus.

The following form the framework for areas specific to training needs:

1. Legislation, Rules, Rights and Responsibilities (Legal and Organizational)

2. Safety Culture and a Safety Mindset

3. Human Factors

4. Identifying Hazards and Managing Risks

5. Documentation, Inspections and Monitoring

6. Worker Competencies and Learning Opportunities

7. Technology and Apps – see appendices

THE CHALLENGES

Some respondents to a quick frontline survey felt organizations were more concerned for the well-being of clients, with a resulting diminished regard for staff safety. This frontline survey identified violence, potential violence and working alone as the three biggest areas of concern for staff working in Community Disability Services. (See A: The Voice of Frontline.)

Recent WCB statistics based on lost-time claims due to assaults and violent acts support these concerns. During the five year period from 2006 to 2010, time-lost claims due to assaults and violent acts were

> *2.00% Alberta-wide*

> *5.32% in Health Care Industries*

> *17.46% in Social/Community Support Services*

(Taken from *Lost Time and Disabling Injury WCB Claims by Industry – Assaults and Violent Acts by Persons*, Alberta 2010)

Some organizations beyond our sector have implemented a *zero tolerance policy* for workplace violence. This would be impossible for our sector, because of the behaviour challenges of some clientele. A clearly identified and understood code of practice for the prevention and management of occupational violence specific to disability services and a thorough awareness of staff rights and responsibilities are an essential part of any Health and Safety training for the sector.

> *Lost-time claims in the Health Care sector were two and one-half times greater than "Alberta wide stats, while the lost-time claims in the Social/Community sector was nearly nine times greater."*

CURRENT CHALLENGES THAT IMPACT SAFETY OF OUR STAFF

- Shifting worksite: auto, in community, in home

- Staff turnover, staff shortages and fit of staff

- Inadequate levels of staffing and working alone

- Cultural diversity and resulting communication challenges

- Balancing personal safety with client safety and quality of life

- Lack of resources to develop and implement a formal Health and Safety Management System

- Lack of existing OH&S materials specific to Community Disability Services

- Awareness of incidents and causal factors

- Appropriate and adequate training for all levels of staff

- Limited resources for formal ongoing training and evaluation of knowledge

- New client intake processes and uncertainty around a client's past history

- Complexity of individuals supported and shifting support needs

- Challenges created by confidentiality issues

LEGISLATION, RULES, RIGHTS AND RESPONSIBILITIES

Everyone is responsible for safety in the workplace – both employer and employee. There are different roles and responsibilities for all parties as outlined in the Occupational Health and Safety legislation. Rules governing health and safety in Alberta's workplaces fall under the Occupational Health and Safety Act, Regulation and Code referred to as *legislation*. These are legal obligations. There are also internal or organizational roles and responsibilities that are specific to your situation.

Occupational Health and Safety (OH&S) legislation is comprised of three components:

> OH&S Act
>
> OH&S Regulations
>
> OH&S Code

The OH&S Code Explanation Guide helps explain the rules of the Code in plain, easy-to-understand language.

An improved OHS system to better protect workers and ensure they have the same rights as other Canadians is in effect on *June 1, 2018*.

> Learn the New Rules

WORKING ALONE

As an employer, your responsibility is to ensure that risk has been eliminated or minimized for workers to work alone. The requirements for Working Alone are outlined in the following guides:

> Working Alone Regulations
>
> Q&A of Working Alone
>
> OH&S Code –Working Alone
>
> Working Alone Guide

WORK SAFE ALBERTA – Work Right Campaign

This is an initiative to reduce work place injuries and fatalities. Below are the links to the employer's and worker's guides from ***Work Right***. In the Learning Resources section there are several resources to help you understand legislation, rules and responsibilities.

> Employer's Guide
>
> Worker's Guide

> *Only employees who are adequately informed and empowered are able to fulfill their responsibilities:*
>
> *The Right to know*
> *The Right to participate*
> *The Right to refuse*

STAFF RIGHTS AND RESPONSIBILITIES IN THE WORKPLACE

The Employment Standards, Occupational Health and Safety, Human Rights in Alberta and Workers Compensation Board are comprehensive resources for employees. Pages 17 through 18 of *Your Rights and Responsibilities at Work* contain an overview of Health and Safety Responsibilities.

INTERNAL SYSTEMS

Agencies need clearly articulated safety policies, procedures and identified safe work practices. General health and safety, hazard identification and assessment, violence in the workplace, working alone, workplace inspections and accident investigation policies and procedures are needed.

A Guide to Writing A Policy Statement (CCOS&H) The best policies are specific to a workplace and not borrowed from or written by outsiders. A written occupational health and safety policy statement is a pledge to employees and the safety policy should be dated and signed by the senior executive of workplace.

Elements of a Good Health and Safety Program (CCOH&S)

Joint Occupational Health and Safety Committees

Does your organization have a point person, someone in a management position to oversee and be accountable for Occupational Health and Safety, or is there a group of individuals working together, a *Joint Occupational Health and Safety Committee?* These committees include workers and management and can be n effective way to increase awareness and improve health and safety in the workplace.

Health and Safety Management Program

A systematic approach that provides clear roles, responsibilities and accountabilities, and that utilizes worker participation and monitors the activities and progress of the organizations, is becoming more widespread within the sector. It helps create and maintain a safe work environment. Beyond the increased focus on safety, there is a significant financial savings for organizations on Workers' Compensation rates. Components of an effective system can be identified through the Alberta Government's Partnership Injury Reduction Program (PIR). There are eight standardized elements involved in any Health and Safety Management System:

1. Management Leadership and Commitment
2. Hazard Identification and Assessment
3. Hazard Control
4. Workplace Inspections
5. Worker Competency and Qualification
6. Emergency Response Plans
7. Incident Reporting and Investigation
8. Program Administration

For information on best practices guidelines review: Best Practices in Occupational Health and Safety in the Healthcare Industry Vol. 1

LEARNING RESOURCES

To give staff a basic understanding of OH&S, direct them to the e-learning portal:

Occupational Health and Safety Legislation – E-learning courses

Joint Worksite Health and Safety Committee (Work Safe Alberta)

Joint Worksite Health and Safety Committee (Canadian Centre for Occupational Health and Safety)

What is due diligence?

On Reading Legislation: Teachers Resource Manual Chapter 2, Pages 43-47 and 75 (Work Safe Alberta)
Federal Health and Safety Reports:

5

OTHER SAFETY STANDARDS

ACDS, CET 2016 Version – Standards 36

The 2013 CET Standards increased the focus on staff safety. There was a shift to a dual focus, from considering individual safety alone to including staff safety as well. In the 2016 CET version Standard 36 focuses on creating a culture that proactively promotes the health, safety and wellbeing of employees and individuals accessing services.

PDD Safety Standards Consultation - Final Reports

Supportive Living Accommodation Standards

These standards focus on accommodation in a home-like setting, where people can remain as independent as possible while they have access to accommodation and services that meet their changing needs. These standards apply to settings of four or more individuals. Residents in a supportive living setting can range from seniors who require support services due to age, chronic conditions and frailty to young adults with mental health or physical disabilities. See *Supportive Living Accommodation Standards.*

Psychological Health and Safety in the Workplace

These national standards have just been released by the Canadian Standards Association, the Bureau de normalisation du Québec, and the Mental Health Commission of Canada (MHCC). These standards are not mandatory and are not currently in legislation. They would, however, fall under Occupational Health and Safety, but have yet to be picked up by that body. More and more court cases are favouring the employee, and the general thinking is that eventually these will become a mandatory part of OH&S. It is an area that is particularly relevant to our sector. See *Psychological Health and Safety in the Workplace.*

Blueprint for the Canadian Registered Safety Professional Examination 1st Edition,

Includes the competency profile identified in 2015 to be certified by the Board of Canadian Register Safety Professional (CRSP).

Learning Resources for staff:
Testing your knowledge with OHS's Health and Safety quizzes

Questions for Consideration
Are the OHS Act, Code and regulations part of current training?

Do staff truly understand their rights and responsibilities (e.g., right to refuse unsafe situations)?

A SAFETY CULTURE AND SAFETY MINDSET

The culture of an organization is the mix of shared values, attitudes and patterns of behaviour that give the organization its particular character. The term "safety culture" is about the value placed on health and safety in the workplace, and includes the ideas and beliefs that all members of the organization share about risk and incidents or accidents. An organization only has one culture, and safety needs to be seen as an important aspect of that culture. A positive workplace safety culture is a factor in performance and has a strong influence on the transfer of training knowledge into day-to-day operations. A safety mindset can only develop in a psychologically safe environment; one of learning, not blame. Employees need to explore what a safety mindset is and how mindful they are as they go about their day. Management commitment is a first step and workers need to see evidence of this.

WHAT ARE THE VALUES AND BELIEFS EMBODIED IN A SAFETY CULTURE?

(Taken from *Alberta - Overview of Best Practices in OH&S in the Healthcare Industry Vol 1*)

- All workplace parties are held accountable for their responsibilities

- Working safely is a condition of employment

- All employees are fully engaged in safety

- All incident investigations are directed towards identifying the root cause

- All workplace parties intervene when they observe an unsafe condition or behaviour

> *All incident investigations are directed towards identifying the root cause.*

FACTORS CHARACTERISTIC OF ORGANIZATIONS WITH A POSITIVE SAFETY CULTURE

(based on The Institute of Engineering and Technology, taken from page 1172 of the Independent SARS Commission Final Report)

- Leadership and commitment from the chief executive

- Management has someone in a safety role

- Involvement of all employees

- Effective communications and commonly understood and agreed-upon goals

- Good organizational learning and responsiveness to change

- A questioning attitude and rigorous and prudent approach by all

- Achievement of a safety culture includes achievement and sustainability of supervisory competency

LEARNING RESOURCES

Characteristics of Best Practices - Page 93 of *Overview of Best Practices in OH&S in the Healthcare Industry*

Suggested Good Practices   -   OH&S Education and Training from Ontario (page 4)

Measuring Commitment & Involvement Questionnaire - Occupational Health and Safety Teacher Resource Binder Chapter 3, page 5 Health & Safety Management System Checklist - Teachers Resource Manual Chapter 3, page 37

Best Practice for Behaviour Based Safety - Similar to the ABCs of behaviour modification, this resource developed by and for the Calgary Construction Owners Association includes a framework, implementation guide, tools and references associated with the behaviour-based safety concept.

20 Questions for Leaders about Workplace Psychological Health and Safety:

Webinars from the Campbell Institute: 1 hour free Webcasts with a management focus. Includes one on developing leading indicators

 Keys for Creating a Safety Culture article by Judy Agnew, Ph.D.

25 Signs you have an awesome Safety Culture

Explaining the Growth of Effective safety Systems Model   an article by Dave Fennel

 The OHS Vulnerability Measure   Developed at the Institute for Work & Health (IWH), measures the extent to which a worker may be vulnerable to occupational health and safety (OHS) risks at work.

Questions for consideration

Is safety a part of your strategic planning sessions?

Is it part of your performance evaluations?

Are performance standards identified for your supervisory staff to follow?

Are staff surveyed around health and safety concerns?

Do you make it easy for staff to make suggestions to improve health and safety?

What are some signs of a poor safety culture?

Do you ask staff what we can learn when a failure happens?

Do you ask staff what we can learn when things go well?

Do your incident reports focus on change rather than determining blame?

IDENTIFYING HAZARDS AND MANAGING RISKS

Employers have a duty under the Occupational Health and Safety Act (OH&SA) to take every *precaution reasonable* in the circumstances to protect workers from hazards and hazardous situations in their workplaces. The law does not expect you to eliminate all risk, but you are required to protect people as far as "reasonably practicable." This means elimination of the risk where possible or the use of "safe work practices" or "standard practices" when working in certain situations.

Employers must assess hazards, identify risks or potential risks in their workplace(s) and determine appropriate controls. All worksites, equipment, processes and individuals are assessed for risk. Since everything can have an element of risk, this risk needs to be ranked according to degree of danger and then prioritized. See the PDD Risk Analysis tool in the Risk Assessment Guide for their risk level scale: Likelihood + Consequences = Risk Level. All employees should assess for hazards on an ongoing basis while they are working, as this is an ongoing process of continuous improvement and adjustment to address the ongoing changes and new staff and clients. Do you have a comprehensive inventory of the OH&S hazards at your organization?

> Demonstrating Due Diligence - This document on the Canadian Centre for Occupational Health and Safety (CCOH&S) website contains a helpful checklist.
>
> Recognizing Workplace Hazards - (Work Safe Alberta) E-learning
>
> Hazard Assessment and Control- (Work Safe Alberta) E-learning

HAZARDS ARE GENERALLY GROUPED INTO FOUR TOPIC AREAS:

1. Biological: including but not limited to agents transmitted through respiratory tract, agents transmitted by blood or body fluids (HIV, Hepatitis B/C), building-related pathogens (legionella, fungi, mould)

2. Chemical: including but not limited to pest control products, mercury containing devices, cleaners and disinfectants

3. Physical: including but not limited to lifts and transfers, falling, vehicle driving, fire, equipment used with clients

4. Psychological: organizational, environmental or personal factors, i.e., stress and mental health; workload, working alone, fatigue and hours of work, substance abuse, occupational violence, critical incident stress, work-life balance

An identified hazard is assessed for risks, and risk control strategies are implemented.

Risk Control Hierarchy

The Canadian Standards Association has established a standard hierarchy for risk control that is widely used and applies to all types of hazards, based on a hierarchy of preferred actions. The principle behind this hierarchy is that risks that are dependent on individual behaviours, that is, "doing the right thing" are less reliable than risks controlled at a higher level in the hierarchy (such as "creating a safe place"). Though a very

> *Hazard – something with the potential to cause harm or injury.*
>
> *Hazard Identification – is the process of identifying hazards in the workplace that could cause harm to staff or others.*
>
> *Risk – the likelihood that it will actually cause harm or injury*
>
> *Risk Assessment – is the process of assessing the risks associated with the hazard, including the likelihood of injury or illness, being caused by the hazard or hazardous situation and identifying the factors that contribute to the risk.*
>
> *Risk Control: it the process of determining and implementing measures to eliminate or minimize the risk.*

useful framework, it does not always translate as well to hazards based on interactions with others. Most of these risk reduction strategies are at the lower end of the hierarchy; following protocols, training, procedures and the interchange of information, which require people to always "do the right thing." The higher end of the hierarchy focuses on creating a safe place, while the lower end of the hierarchy focuses on safe performances by people. Quite often a combination of strategies is needed.

1. Design or reorganize to eliminate the hazard, to remove risk (remove known triggers of behaviours of concern)

2. Substitution/isolate: substitute a less hazardous substance

3. Minimize through engineering controls: handrails, surveillance elements, building design

4. Minimize through administrative controls: training, safe work practices, processes, scheduling

5. Personal Protective Equipment: used only when other levels of control are not possible or if additional protection is required to ensure the health and safety of workers, such as wearing gloves

> "In the case of occupational violence the ability to understand and respect the person with a disability is the common pathway to both quality of life and minimized risk."
>
> *Code of Practice for the Prevention and Management of Occupational Violence in Disability Services* (Australia, 2007, p. 5)

There are many styles and forms of risk assessment. Workplaces are encouraged to adopt a risk assessment approach that suits their particular organization or sector and engage appropriate expertise with respect to the scope and complexity of the hazards and risks that exist at the workplace.

Are these the 10 most common hazards for those working in Community Disability Services?
   o Aggression and erratic behaviour – going AWOL, running into traffic
   o Working alone safely – with aggressive individual or under the influence of drugs or alcohol
   o Transportation – riding public transportation with an individual, distraction while driving
   o Environmental hazards – in traffic, slip and fall, lack of safe room or location
   o Medication – administration of and reactions to, new medications and new responses.
   o Allergens – Fragrances, nut free
   o Poor environmental design – home not set up for staff safety
   o Biological – mice, bugs,
   o Chemical – cleaning products, industrial products, perfumes
   o Fatigue – long shift, working multiple jobs

- **What hazards exist in your workplace?**
- **How serious are the hazards?**
- **What can be done to identity and control these hazards?**
- **How effective are the controls implemented?**

LEARNING RESOURCES

Hazard Identification Assessment and Control – E-learning ($99 Fee)

Work Safe Alberta Hazard Assessment and Control – OHS Alberta

Job Safety Analysis Worksheet

These **Alberta Resources** designed for the Health Care Industry are very useful for risk identification, assessment and control for various types of hazards.

Best Practices for the Assessment and Control of Biological Hazards Vol. 2

Best Practices for the Assessment and Control of Chemical Hazards Vol. 3

Best Practices for the Assessment and Control of Physical Hazards Vol. 4

Best Practices for the Assessment and Control of Psychological Hazards Vol. 5

Best Practices in Risk Assessment (PDD) Guide and assessment tool

Teaching Resources - a good source for some handout materials on various hazards

What is a Risk Assessment? (CCOH&S)

What is Risk? (ACDS)

Task Hazard Analysis Workbook (Work Safe BC)

Some topic specific hazards and controls can be found in the following:

Workplace Violence Risk Assessment Template   A great tool from Nova Scotia with an organizational focus that applies well to our sector. It includes a hazard inventory, worker survey on violence and aggression in the workplace, a risk factors checklist, and a facility inspection checklist.

5 Steps to an Effective Program How to develop and implement a workplace violence preventionThis focuses on establishing a workplace violence program, but the process and steps are useful on a broader scale. (Work Safe BC)

Code of Practice for the Prevention and Management of Occupational Violence in Disability Services
The purpose of this resource from the Department of Human Services in Victoria, Australia, is to provide practical guidance on how to prevent and manage occupational violence in disability services. (2007 - WorkSafe Victoria AU)

Disability Services OH&S Compliance Kit (WorkSafe Victoria AU) how to control the most common hazardous tasks in the Disability Services sector.   Page 3 contains a risk assessment for occupational violence.

Working Safely in Visiting Health Services (2006 - WorkSafe Victoria AU)

Ergonomic Safe Handling Program (CCOH&S)

Handle No Unsafe Lift Workbook (Work SafeAlberta

Handle With Care - Patient Handling and the Application of Ergonomics (WorkSafe BC)

Handbook of Hazards and Controls for Homecare Providers (Work Safe Alberta)

HUMAN FACTORS

PLANNING FOR THE HUMAN ELEMENT

Human factors are anything that affects human performance in either a positive or negative way.

Lack of communication, complacency, lack of knowledge, distraction, lack of teamwork, fatigue, lack of resources, pressure, lack of assertiveness, stress or lack of awareness – these norms all affect human performance.

Human performance is also affected by the shifting diversity in the workplace, including both demographic and cultural shifts that add to language barriers. This includes cultural differences that affect job insecurity and could prevent new immigrants from speaking up.

There are two main approaches to dealing with human errors. The most common is to focus on the individual. The other is a systems approach, which places attention on the context and the checks and balances in place to catch potential hazards or mistakes.

The personal approach focuses on the unsafe acts, errors and procedural violations of people on the front line, and views unsafe acts as lapses, forgetfulness, inattention, poor motivation, carelessness, negligence, or recklessness. Errors are considered a moral issue based on the idea that bad things happen to bad people.

A systems approach accepts the fact that humans are fallible and errors are expected. Errors are consequences, rather than causes. The origin of error is not so much human nature as it is problems with the system—not who did it but how and why did the defenses, procedures and safeguards fail. James Reason is responsible for developing the Swiss Cheese Model of Defense. (See Appendix C: Human Factors for a PowerPoint Presentation.)

Errors happen when multiple factors come together to allow them to happen. Raising awareness of these human factors and modifying behaviours is an enabling approach. A model that helps staff evaluate perceived risks focuses on

> *"What is important to note is that new staff are more likely to commit knowledge-based and rule-based errors. Senior staff are more likely to commit skill-based errors."*
> — *James Reason*

> *Self: Is the staff fatigued? Does she have the necessary experience and knowledge to carry out the task?*

> *Context: Represents environmental factors (disruptions, interruptions, handovers), equipment failures, inadequate resources and time*

> *Task: Factors relating to the task at hand, e.g., task complexity, duration and physical demands*

THE CLASSIFICATION OF ERRORS

Knowledge-based Errors

- Result from a deficit in knowledge

- An attempt is made but is unsuccessful due to lack of knowledge

- Does not achieve the desired outcome

Rule-based Errors

- When a known rule is incorrectly applied or the situation is misinterpreted

Skill-based Errors

- When a person's actions are different from their intentions

- Occur during automatic behaviours which require little conscious thought or when our attention is being diverted

LEARNING RESOURCES

Fatigue, Extended Work Hours and Performance (Work Safe Alberta)

(OHS Insider)

To Err is Human   BC OH&SAH

Psychosocial Hazards **:** A psychological hazard is any hazard that affects the mental well-being or mental health of the worker and may have physical effects by overwhelming the individual coping mechanisms and impacting the workers ability to work in a healthy and safe manner. Although these issues have been around for many years, psychosocial hazards are only now being recognized as potential workplace hazards. These would include fatigue and hours of work • technological changes • stress and critical incident stress • bullying including cyber bulling/harassment • workplace violence and abuse • working alone

Fatigue in the Workplace

Safe Patient Handling – Manitoba Some good risk assessment tools

Shift Work and Fatigue (a Work Safe Alberta video)

Human Factors - Fatigue

Waking the Workplace Zombie Alberta OH&S Magazine (page 10)

Stress Symptoms, Signs and Causes and ways to work address it. The HelpGuide.org

Tips for Supervising Young Workers   (Work Safe Alberta)

Human Factor PowerPoint - See Appendix C: Human Factors

> *Although we cannot change the human condition, we can change the conditions under which humans work!*

WORKER COMPETENCIES AND LEARNING OPPORTUNITIES

Organizations need to do everything "reasonably practical" to ensure workers are competent and experienced to work safely and with minimal risk to health. Part of their administrative controls requires appropriate training for all levels of staff. This training needs to meet both the needs of the organization and the needs of the employee. It should not be limited to hazard identification and risk assessment; safety should be an integral part of all training. Training should be site specific and role specific. Training for senior executives would concentrate on leadership, due diligence, liability issues and the review functions. Middle managers would need to know how to organize and control hazards and show leadership. Team leaders will need to know how to implement, apply, recognize risks, monitor and develop staff. Frontline staff would need to know how to recognize safety concerns and carry out actions to mitigate concerns according to policy.

 The goal of training is to provide employees with the knowledge, skills and abilities to do the work in a manner that minimizes risks from potential work-related hazards. This does not mean that all risks need to eliminated, but employees should be confident they have the appropriate training and experience for their position. Training will be required for all new or inexperienced employees or volunteers, when staff are reassigned or transferred to a new job, when new individuals or new equipment are introduced, with new processes or procedures, or for inadequate performance. Some of this training will be mandatory and may require refreshers. Safety training should be designed by qualified individuals, and training for each staff member needs to be recorded and documented.

Job/Task-specific health and safety training should be determined by a training needs assessment specific to the worksite(s). This needs assessment should include reviews of

> *"What is safe for one may not be safe for a less experienced person."*
> — *a Symposium participant*

- Hazard assessment and risk analysis
- Job task analysis
- Review of health and safety inspections and/or audits
- Review of applicable legislation, standards, codes and guidelines
- Review of accident statistics and investigations
- Review of minutes, recommendations of and responses to a JHSC and/or health and safety representatives
- Benchmarking with other organization,
- Consulting with staff, JHSC and/or health and safety representatives

LEARNING RESOURCES

Employee Orientation Checklist   (CCOH&S)

OH&S Training Standards Released in March 2013 by Canadian Safety Association (Fee applies)

Suggested good practices - Taken from page 4 OH&S Education and Training from Ontario for different levels of a Health Care organization

Questions for consideration:

What qualifications should a safety trainer have? What kind of instruction or training do people need?

When and how often should this training occur?

What kind of information do people need?

Can you identify the warning signs of violence?

SUGGESTED GOOD PRACTICES ON OCCUPATIONAL HEALTH AND SAFETY TRAINING

1. How to Identify and analysis hazards and control risks

2. Rights and Responsibilities according to position

3. Any safe work practice, policy and procedure for the organization

4. Any client-specific training

5. Any task-specific training

6. Emergency response training and practice around preparing for communications and evacuations

7. Positive Behaviour Supports and Advanced Behaviour training

8. First Aid and CPR

9. Medication administration

10. Lifts and Transfers

11. Crisis intervention training

12. Critical incident reporting and debriefing

LEARNING RESOURCES

General

Staff Safety Guide: Streets to Home Though this is aimed at staff working in the City of Toronto, it does include many safety tips and strategies that might increase awareness and increase your "street smarts."

CCOH&S Resources

CCOH&S Podcasts Short audio clips on a variety of topics that can be integrated into a Staff Meetings

Office Safety Guide CCOH&S (Book- $15)

Workplace Safety Toolkit www.nonprofitrisk.org (USA)

How to Work Safely in Alberta -   A large collection of resources and best practices (Work Safe Alberta)

Working Safely in Community Services   from Australia
Safety Tips For Seniors

My Health A-Z Resource for information and tools for Albertans.

Health Recalls and Safety Alerts

Back and Lift Care

No Unsafe Lift Workbook -

Back Active

Straighten Up Alberta

Techniques to Support Back Care

Back Care and Lifting Videos

Preventing Musculoskeletal Injury E-Tool

-Assisting People in Wheelchairs (Work Safe Australia)

Supporting people with personal hygiene care (WorkSafe Australia)

Blood-Borne Pathogens and Infection Control

Hand Washing Video

Continuing Care Safety Association Videos   (Don't take your work home with you)

Routine Practices

Pandemic Planning (CCOH&S)

Chemical Hazards

WHMIS is a Canada-wide system of hazard communication around controlled products. It includes three elements: Labels, Material Safety Data Sheets and Worker Education. Changes to the WHMIS guide - the new system is called WHMIS 2015 focuses on a global harmonizing Approach

Crisis Intervention

Crisis and Trauma - webinars and training (fee-based)

Nonviolent Crisis Intervention - (CPI) Practical skills and strategies to safely manage disruptive or difficult behaviour while balancing the responsibilities of care. (fee-based)

The Mandt System - Comprehensive, integrated approach to preventing, de-escalating and, if necessary, intervening when the behaviour of an individual poses a threat of harm to themselves and/or others.

Siva Training - Canadian-based provider of specialized safety management services for caregivers and families responsible for mentally ill and developmentally delayed children, adolescents and adults.

Food Safety

Food Safety free home study course. (AHS)

Home Care Strategies

Indoor Air Quality

Mice Infestation

Bed Bugs Prevention and Treatment - Edmonton Region Resource

AHS Bed Bug Management Protocols

Bed Bugs

Mold in the Home (EHS Partnerships)

Best Practices Mould in the Workplace (Alberta Works)

Alberta Municipal Affairs: Home Safety Tips

Emergency Management and First Aid:

Emergency Management Checklist (CCHOS)

Why Have an Emergency Plan (CCOH&S)

Get Prepared Canada includes Wildfires, floods, and other natural hazards, as well as bomb threats and other hazards. What to do before, during and after!

Emergency Kit

Emergency training Public Health agency of Canada introduces a new e-learning portal

Basic Emergency Management Training – online - Alberta Municipal Affairs

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To order Alberta-specific fire safety and emergency preparedness pamphlets, cards, booklets, posters and teaching resources, contact the Alberta Emergency Management Agency (AEMA)

Manager's Guide to Handling Trauma in the Workplace

Emergency preparedness – Risk a resource developed by Calgary Chamber of Voluntary Organizations (CCVO) that includes Fire, flooding, blackout, pandemic influence, severe weather, shelter in place, Terrorism/lockdown, cyberattack, and staff and personal disaster preparedness   (new)

First Aid and CPR

First Aid Courses - approved courses in Alberta

Take Home Naloxone Kit Training - Fentanyal/Opioid overdose

Infection Prevention and Control

Infection Prevention and Control – Alberta Health Services

Mental Health

Workplace Strategies for Mental Health(Great West Life) free training and tools

Psychosocial Factors

Relaxation Techniques for Stress

Introduction to Emotional Resilience

Strategies for Supervisors

Stress Management Techniques

Strategies for Coping with the Stresses of Life

Culture and healing Videos

Mindfulness for Health

Vehicle Safety

Driving   Road Safety

Driving for Work: 2011 -Work Safe Alberta

Driving for Work (Work Safe Alberta) E-learning

Workplace Violence

Research (Chappell and Di Martino) shows that a preventative approach based on harm minimization following OH&S principles is considered best practice. Literature recognizes four types of workplace violence:

- The perpetrator has no relationship to the worker or the workplace
- The perpetrator is a client at the workplace who becomes violent toward a worker or another client The perpetrator is an employee or past employee of the workplace
  The perpetrator has a personal relationship with an employee or a client, e.g., domestic violence in
- the workplace

Preventing Violence and Harassment in the Workplace (Work Safe Alberta)

Violence Prevention (BC)

Dementia: Understanding Risks and Care Strategies (Work Safe BC) video and discussion guides

Violence Awareness Video (15 minute, free E-learning from CCOH&S)

Bullying in the Workplace CCOHS Resource

Learning Resources on Workplace Violence - a new national initiative – still under development

Guidelines for Preventing Workplace Violence in HealthCare and Social Services Workers (2016 U.S. Department of Labour)

Workplace Health and Safety

Workplace Health and Wellness Guide (book $15 - CCOH&S)

Healthy Workplaces (CCOH&S)

Workplace Strategies for Mental Health(Great West Life) free training and tools

Risk factors for Poor Psychological Health

DOCUMENTATION, INSPECTIONS AND MONITORING

Inspections and documentation are an essential part of any health and safety system. Initial risk assessment work establishes a baseline. Organizations receiving COR certification have stated that it is common for statistics to go up at first, as staff focus on reporting all incidents. This will come down in future timeframes. As the concerns of workers and supervisors are addressed, existing and potential hazards are identified and controlled and one gains a deeper understanding of the job roles, activities and related tasks.

Ongoing inspections are necessary and are an important step in the **Plan-Do-Check-Act** cycle. How often would depend on the degree of risk, but it ensures the continuity of monitoring and corrective action, identifies new hazards as well as providing new avenues for improvement. The physical onsite inspection allows for observation by a trained worker and inspector, and allows for written documentation to occur, to be analyzed for corrective action and future follow up.

EFFECTIVE WORKPLACE INSPECTIONS

For information on what makes for an effective workplace inspection, review this CCOH&S document:

Effective Workplace Inspections (CCOH&S)

Workplace Inspections E-course (fee-based - CCOH&S)

Sample of an Inspection Checklist (Work Safe Alberta)

REPORTING AND INVESTIGATION OF CRITICAL INCIDENTS, MINOR INCIDENTS AND NEAR MISSES

We complete incident investigations to find out what happened, why it happened and how to prevent it from happening again. We need to look at root causes, and direct and indirect causes that lead to the incident. The investigation should answer who, what, where, when, why and how.

Focus on a culture of learning, not blame, at this point. Performance issues will be addressed, but after a thorough investigation into the direct, indirect and root causes of the incident or accident as part of the continuous improvement process. This may mean additional training or that improved safe work practices are required.

Steps involved in Incident Investigation

- Report the accident to a designated person within the organization
- Provide first aid and medical care to injured person(s) and prevent further injuries or damage
- Investigate the accident
- Identify the causes
- Report the findings
- Develop a plan for corrective action
- Implement the plan
- Evaluate the effectiveness of the corrective action
- Make changes for continuous improvement
  (taken from CCOH&S *Accident Investigation*)

Incident Investigation: E-learning Course

Accident Investigation: CCOH&S
Reporting and Investigating Injuries and Incidents

LEARNING RESOURCES

Are we addressing the symptoms instead the cause, or is there a deeper problem that needs to be addressed?

Root Cause Analysis

> Workplace investigations should not only be triggered by serious accidents resulting in injury, it is also important to investigate near miss or close call incidents.
> "Remember the difference between an accident and a near miss is luck and split- second," adding incident investigations should always be viewed as part of an organization's accident prevention program.
>
> —Tom Lauritzen, former Regional Prevention Manager for WorkSafeBC

The 5Ws

Checklists developed for your organization's needs are a great tool for the walkthrough. There should always be space for additional items to be identified.

A Sample General Workplace Inspection Checklist - see Appendix 2 in Best Practices in Occupational Health and Safety in the Healthcare Industry Vol. 1

Examples of performance expectations from managers, supervisors and workers - see Appendix 3 in Best Practices in Occupational Health and Safety in the Healthcare Industry Vol. 1

7 Steps to Make a Safety Committee Work

Hazard Identification Checklists – Why aren't they working? Len Collie – a different approach?

Appendices

GLOSSARY OF TERMINOLOGY

Alberta Council of Disability Services (ACDS): is a not-for-profit association that exists to serve community-based service provider members who support people with developmental disabilities or brain injury.

Apps: are programs that are designed to be used entirely within the browser. Using apps, you can do things like create documents, edit photos and listen to music, without having to install complicated software, and they are mobile friendly.

Competent worker: an adequately qualified, experienced and suitably trained worker who requires little supervision.

Controlling Hazards: There is a hierarchy of controls that applies to all types of hazards.

Canadian Centre for Occupational Health and Safety (CCOH&S): promotes workplace health and safety, and encourages attitudes and methods that will lead to improved worker physical and mental health, through a wide range of products and services.

Due Diligence: is the level of judgement, care, prudence, determination and activity that a person would reasonably expect to carry out under particular circumstances. Employers are required by OH&S legislation to ensure as far as reasonably practicable, the health and safety of both employees and those on the worksite Three main factors need to be addressed for a valid defense: Foreseeability, Preventability and Control.

E-Learning: refers to the use of electronic media and information and communication technologies (ICT) in education. E-learning is broadly inclusive of all forms of educational technology in learning and teaching.

Hazard: any situation, condition or thing that may be dangerous to the safety and health of workers.

Hazard identification: The process of identifying hazards in the workplace that could cause harm to staff or others.

Health Hazard: anything that could cause illness.

Health and Safety Management System: is a process to minimize the incidence of injury and illness in the workplace. The scope of this system varies depending on the type of work and the nature of the work performed. Their purpose is to identify, access and control workplace hazards.

Imminent danger: refers to any danger not normally present on a job or to any dangerous conditions that a worker would not normally perform their work in.

Incident: an occurrence that has the potential to cause injury or illness. This includes near misses.

Legislation: a law passed by an official body, especially a government assembly.

Near Miss: Near miss (close call) An incident in which injury did not occur but which could have caused an injury or loss under slightly different circumstances.

Occupational Health and Safety: (OH&S) promotes health and safety through partnerships, resources, education and enforcement of the Occupational Health and Safety Act.

Psychosocial hazards: A psychological hazard is any hazard that affects the mental well-being or mental health of the worker and may have physical effects by overwhelming the individual coping mechanisms and impacting

the workers ability to work in a healthy and safe manner. Although these issues have been around for many years, psychosocial hazards are only now being recognized as potential workplace hazards. These would include fatigue and hours of work • technological changes • stress and critical incident stress • bullying including cyber bulling/harassment • workplace violence and abuse • working alone

Rights and Responsibilities: are a group of legal rights and claimed human rights having to do with labor relations between workers and their employers, usually obtained under labour and employment law.

Risk: the danger that injury, damage or loss will occur.

Risk Assessment: the process of assessing the risks associated with the hazard, including the likelihood of injury or illness being caused by the hazard or hazardous situation and identifying the factors that contribute to the risk

Risk Control: The process of determining and implementing measures to eliminate or minimize workplace risk.

Root Cause Analysis: is a method of problem solving that tries to identify the root causes of faults or problems that cause operating events.

Safety Culture: is the way in which safety is managed in the workplace, and often reflects the attitudes, beliefs, perceptions and values that employees share in relation to safety

Safety Hazard: anything that could cause injury

Technostress: is the negative psychological link between people and the introduction of new technologies and is a result of altered habits of work and collaboration that are being brought about due to the use of modern information technologies at office and home situations.

Workplace Hazardous Materials Information System: is Canada's national hazard communication standard. The key elements of the system are cautionary labeling of containers of WHMIS "controlled products," the provision of material safety data sheets (MSDSs) and worker education and training programs.

TECHNOLOGY/APPS

This area is provided as a separate section to make it easily accessible, as it is a growing area of interest to our sector.

As a hazard control, it would fall under the engineering controls or personal protective equipment. Adding technology-based tools to your safety and risk management programs helps build capacity of organizations, by increasing efficiencies, improving data accuracy, improving workflow management, and decreasing time-sensitive incidents. Working Alone applications are one of the technologies in use—cell phones, GPS trackers, and emergency alert systems are becoming more common, depending on the local and the clientele.

Purpose-built environments designed to increase safety in home for individuals with complex behavioural and mental health challenges are common. Surveillance and recording are increasing our ability to monitor safety concerns.

EMERGENCY RESPONSE SYSTEM/PROCESS

- Safetyline
- StaySafe app (Sept 2016)
- TELECARE

   Personal Life Guard

MEDICATION REMINDERS AND DISPENSING TECHNOLOGY

E-Pill Eliminate a behaviour trigger by ensuring medication is taken.

SOFTWARE APPLICATION THAT FACILITATE EASIER REPORTING OF OUTCOMES AND INCIDENTS

ShareVision: Person-Centred Management Systems
TN ActiveCare

GENERAL

Using Technology to Keep the Plan Visible

Hazard Assessment App

OH&S in iTunes

Safety Awakenings

Alberta Emergency Alert APP

Red Cross First Aid App

Alberta WildFire App

Addiction and Mental Health Mobile App Directory

Workpose App   Ergonomics at your desk

REFERENCED PUBLICATIONS AND WEBSITES:

ALBERTA SPECIFIC RESOURCES:

Alberta OH&S Home Page-
Partnership in Injury Reduction
OH&S Education and Awareness
OHS Publications Directory
Ask an Expert
How to Work Safely and Stay Healthy
The Continuing Care Safety Association - Safety Competencies
Alberta Association for Safety Partnerships

NATIONAL RESOURCES

Canadian Standards Association (CSA) is the pre-eminent standards development organization in Canada. They work with business, regulators, government and industry to develop standards that work for people and business. In addition to publications, CSA provides training, application tools & guides, personnel certification and other resources to help organizations apply and derive the benefit of standards within their operations.

Canadian Occupational Safety: http://www.cos-mag.com/

Canada's Occupational Health and Safety Magazine: http://www.OH&Scanada.com/

Canadian Centre for Occupational Health and Safety: https://www.ccohs.ca/
Established in 1978, CCOH&S promotes the total well-being—physical, psychosocial and mental health—of working Canadians by providing information, training, education, management systems and solutions that support health, safety and wellness programs. A not-for-profit federal department corporation, CCOH&S is governed by a tripartite council—representing government, employers and labour—to ensure a balanced approach to workplace health and safety issues. They offer a range of workplace health and safety services to help your organization raise awareness, assess risks, implement prevention programs and improve health, safety and well-being.

WorkSafeBC

INTERNATIONAL RESOURCES

Nonprofit Risk Management: an organization that specializes in helping non-profit leaders cope with uncertainty. Based in the US, so the legislation is not relevant, but they have a comprehensive *Workplace Safety Toolkit*

Clinical Human Factors

Human Factors – James Reason

Government of Australia

Forms and Publications Search for *"disability services"* with quotes

http://www.dhs.vic.gov.au/home

http://www.worksafe.vic.gov.au/home

https://www.worksafe.vic.gov.au/pages/safety-and-prevention/your-industry/community-support-services

The Community Services Safety Pack – Au

A: THE VOICE OF FRONTLINE

To grasp a better picture of the sector's needs from a frontline perspective, our Training and Development Advisory Group developed a short staff survey. The number of responses was small considering the number of workers in the sector, but it gave us a better picture of where they see the gaps, their biggest concerns about safety, what their role is and ways to improve.

IDENTIFIED THEMES

What is your biggest concern regarding safety when working the front-line?

• Aggressive behaviours of clients	64%
• Working alone	36%
• Informational /training/staffing	27%
• Being connected	20%
• No concerns	17%
• Client safety comes first	15%
• Lifts and transfers	9%
• Safety in vehicle	4%

Do you understand or are you aware of your organization's policies and procedures for ensuring your safety? 97.2% responded Yes. In response to the supplemental question "How could they be improved?" a variety of suggestions were made:

- More review of Safety Policy and Procedures.
- No concerns.
- Communicate new updates – between frontline and supervisors.
- Take staff concerns seriously - listen to staff.
- Ensure homes are properly staffed.
- It is my responsibility to ask for what I need.
- Increase emphasis on prevention and a proactive approach.

What are your responsibilities as an employee to ensure your personal safety?

- Know the individual: history, triggers, plan
- Awareness of surrounding
- Follow protocols and take training
- Communicate/connect
- My safety is my responsibility
- Stay healthy

Do you know your rights as an employee in regards to your personal safety? Yes or no and explain why. Responses were 92% Yes and 8.0% No. Explanations included

- Can refuse unsafe work
- Aware of knowledge of rights
- It's more about clients' safety, not ours
- Not taught this

B: ACCREDITATION STANDARDS THAT ADDRESS SAFETY

ALBERTA COUNCIL OF DISABILITY SERVICES

2016 CET ACCREDITATION STANDARDS that ADDRESS SAFETY: Standard 36

Human Factors

Models and Management

What is Human Factor/Error?

- Anything that affects human performance in a positive or negative way.
- Defined as
  - Environmental
  - Organizational
  - Job Factors

Approaches

- Focuses on the unsafe acts, errors and procedural violations of people on the front line.
- Views unsafe acts as lapses, forgetfulness, inattention, poor motivation, carelessness, negligence and recklessness
- Errors are considered a moral issue and that bad things happen to bad people

- Humans are fallible and errors are expected
- Errors are consequences, rather than causes
- Origins of error is not so much because of human nature as in problems with the system
- "Although we cannot change the human condition, we can change the conditions under which humans work
- Not who did it but how and why did the defenses, procedures and safeguards fail

System Model

The Swiss Cheese Model

- James Reason proposed that a system of defense is like a Swiss cheese model
  - Consider the holes to be opportunities for a process to fail, and each of the slices as "defensive layers" in the process. An error may allow a problem to pass through a hole in one layer, but in the next layer, the holes are in different places, and the problem should be caught. Each layer is a defense against potential error impacting the outcome.
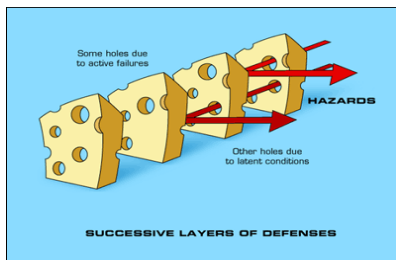
Layers of Defense

Some holes due to active failures

HAZARDS

Other holes due to latent conditions

SUCCESSIVE LAYERS OF DEFENSES

Reasons For Failures

- Active Failures
  - Unsafe actions that directly affect the individual committed by the staff.
  - They take a variety of forms; slips, lapses, fumbles, mistakes and procedure errors
  - Followers of the Person Model will look no further than the accident or incident

- Latent Conditions
  - The inevitable unclear procedures or bad process (resident pathogens) within a system.
  - Arise from decisions made by designers, builders, procedure writers and top level management.
  - These may go unnoticed until they are combine with active failures
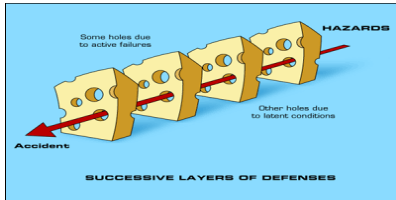 - Examples include; complicated procedures, design and construction deficiencies

Layers of Defenses – Accident

- For an accident or event to occur, the holes in each layer must line up even momentarily to permit a trajectory of accident opportunity

Classification of Error

- Knowledge-based errors
  - Result from a deficit in knowledge
  - An attempt is made but is unsuccessful due to lack of knowledge.
  - Does not achieve the desired outcome

- Rule-based errors
  - When a known rule is incorrectly applied or the situation is misinterpreted.

- Skill-based errors
  - When a person's actions are different to their intentions
  - Occur during automatic behaviours which require little conscious thought or when our attention is being diverted

- Important to note that new staff are more likely to commit knowledge-based and rule-based errors. Senior staff are more likely to commit skill-based errors.

"*You can't change the human condition, but you can change the conditions humans work under*"

Reason & Hobbs 2003

Simple choices make a big difference

Accept that humans can and will fail.

Look for where human failure will have a serious consequence.

You can do a lot to fix the problems when you find them.

Get help from specialists if a problem seems impossible to solve.

Three Buckets Model – J.Reason

- Model that helps staff evaluate perceived risk
  1. Self: concerns the staff; is he fatigued? Does she have the necessary experience and knowledge to carry out the task
  2. Context: Represents contextual factors; environmental factors (disruptions, interruptions, handovers), equipment failures, inadequate resources and time
  3. Task: factors relating to the task at hand; task complexity, duration and physical demands

Applying the model

- Staff need to evaluate the level of each bucket each time they face a complex or new task
- Each bucket will never be empty and will always contain positive and negative factors
- Error is represented by the combination of contents in all three buckets
- The amount of contents in all the buckets provides an estimation of the probability of error
- Remember back to the classifications of error; it is not always about how full or how empty the buckets are.
- Staff need to acknowledge the contents of the bucket, the risk and increase their vigilance and add additional safeguards

What now?
Choose a problem you want to fix
Choose agents for each staff group in the organization

for Everyone
I will....
- Challenge procedures that are difficult to follow
- Report any human factors concerns
- Take the time to consider how my actions and decisions can affect others now and in the future
- Report plant and equipment that is difficult to operate, maintain, inspect and test safely
- Encourage others to think about human factors

for Supervisors
I will....
- Use the case studies to identify human factors topics under my control and deal with them
- Ensure human factors topics are discussed during work planning, preparation and execution
- Incorporate human factors into my incident investigations
- Take the time to listen to and give feedback to my team on human factors topics

for Safety Representatives
I will....
- Take human factors concerns to the relevant safety forums
- Talk to my constituents about human factors issues and concerns in their areas

for Managing Directors and Management
I will....
- Appoint a Human Factors Champion
- Make a simple plan to tackle human factors issues
- Take the time to listen to the workforce
- Give feedback to the workforce

D: A LESSON ABOUT STRESS

A young lady confidently walked around the room while explaining stress management to an audience with a raised glass of water. Everyone knew she was going to ask the ultimate question, 'half empty or half full?' She fooled them all. "How heavy is this glass of water?" she inquired with a smile. Answers called out ranged from 8 oz. to 20 oz. She replied, "The absolute weight doesn't matter. It depends on how long I hold it. If I hold it for a minute, that's not a problem. If I hold it for an hour, I'll have an ache in my right arm. If I hold it for a day, you'll have to call an ambulance. In each case it's the same weight, but the longer I hold it, the heavier it becomes."

She continued, "And that's the way it is with stress. If we carry our burdens all the time, sooner or later, as the burden becomes increasingly heavy, we won't be able to carry on. As with the glass of water, you have to put it down for a while and rest before holding it again. When we're refreshed, we can carry on with the burden - holding stress longer and better each time practiced. So, as early in the evening as you can, put all your burdens down. Don't carry them through the evening and into the night. Pick them up tomorrow.

E: SOME SAFETY QUOTES/SLOGANS

Precaution is better than cure. ~Edward Coke

Safety doesn't happen by accident. ~Author Unknown

Prepare and prevent, don't repair and repent. ~Author Unknown

For safety is not a gadget but a state of mind. ~Eleanor Everet

Your safety gears are between your ears. ~Author Unknown

Safety isn't just a slogan, it's a way of life. ~Author Unknown

"OH&S is about "Change for the Future NOT Blame for the Past"

Tell me – I forget. Show me – I remember. Involve me – I'm committed.

While on a ladder, never step back to admire your work. ~Author Unknown

Safety a culture to live by: **C**ommunication **U**rge **L**eadership **T**eamwork **U**nderstanding **R**ecognition **E**mpowerment

Plan ahead, always put safety first. Because when it comes to accidents, nobody can go back and start a new beginning.

Safety is about doing the right thing, even if no one is looking, because safety starts with me!

You can't lead by example if you are a bad example! Unknown

It's easier to ask a dumb question than it is to fix a dumb mistake.

Just because you always did it that way, doesn't make it right.

Your safety is everyone's responsibility, especially yours.

Safety is everyone's responsibility.

Don't learn safety by accident.

When in doubt, check it out.

Think Safety and Act Safely.

Safety is everybody's job.

Get the safety habit