

WH&S Instructions to the Learner & Objectives

- The Learner will obtain 100% to be deemed competent in this module
- The learner will watch the slide show.
- The learner will answer 12 Questions on completion of slide show.



Work Health and Safety

2019

Carole Cluff

WH&S _ Quality Coordinator

What is Work Health and Safety?

- Systems and processes put in place to define how we do things whilst minimising our exposure to risk
- The culture of the work place to be supportive of the aim to minimise harm



How does WHS Affect Me?

- Safety Australia estimates 2,500 people die each year as a result of work related injuries and illnesses
- 650,000 employees suffer serious workplace injury yearly
- WHS injuries and illnesses can affect family and friends of the affected employee
- Healthcare workers have higher risk of serious Manual Handling injuries (65%)
- NB To reduce the impact of these injuries and illnesses Australia has specific laws and regulations

Legislative Frameworks

- WHS Act (2011) - gives an overview of how to make a workplace safe
- WHS Regulations (2017) - set out standards that need to be met for specific hazards e.g. manual handling. Also licences for different activities, records & reports to be kept
- Workers Compensation Act (1987) - provides for the compensation and rehabilitation of workers in respect to work related injuries



Roles & Responsibilities

- Employer
- Employee
- WHS Committee
- The Policeman - Safe Work NSW



Duties of the Employer

- Protect employees against any harm to their health and safety
- Provide a safe workplace
- Establish **consultation arrangements**.
- Provide information, education and training to workers in relation to WHS
- Duty of care to all people within the work space
 - e.g. visitors, contractors and the general public

Employee Duties

- Take **reasonable** care for their own safety
- Take **reasonable** care to ensure that their conduct does not adversely affect the health and safety of other persons
- Co-operate with their employer to ensure safe work practices - education and training
- Participate in the WHS risk management process - i.e. incident reporting
- Assist anyone injured at work following emergency procedures i.e. calling **000**

WH&S Committee

- Ensures that workers' views are heard on WH&S matters
- A forum for management and workers to identify & resolve WH&S problems
- To develop & monitor Safe Systems and procedures



Allowah's WHS Committee

- Elizabeth McClean - CEO
- Jonathan Flick - Director of Finance and Operations
- Carole Cluff - Work Health and Safety & Quality Coordinator
- Bohan Johnston- Facilities Manager
- Jan Kavanagh - Administration Manager
- Ailene Dizon- Nursing Representative
- Ruby Wong- Allied Health
- Langi Taisia - Domestic Services

Meets every 3 months

Risk Management

- Strategies aimed at eliminating or minimising WHS related risks to a level which is as low as reasonably practicable



Hazard

- Any thing or situation that has the potential to cause harm or injury to a person, such as noise, chemicals, repetitive jobs, bullying and violence at work



Risk

- Is the likelihood or probability of harm (injury/death) occurring as a result of exposure to a hazard



Incidents, Near Misses & Hazards

- You need to report an Incident/Hazard if anything happens or may be a safety concern or you notice anything that may be a risk in the environment
- All incidents, near misses and hazards are to be reported
- The purpose of **hazard reporting** is to try to stop accidents before they occur.

What is an Incident?

- Any unplanned event resulting in injury/ potential injury, ill health or other loss

e.g. slips, falls, burns, cuts, transfer of a patient, name some more



What is a Hazard?

- You observe something that could cause injury or damage



What is a near miss?

- You had to react quickly in a way to prevent injury or damage or something happened in that moment that almost caused an accident.



How do we report these at Allowah?

- Through Tickit, our online reporting system which is on all computers. Ask your RN in charge or your Manager to guide you through the reporting process.



Allowah's WH&S Policies and Procedures

- Allowah's WH&S policies and procedures can be found on the S Drive. You can access these at the computers and tablets at the Nurses' station and by logging into the staff portal on the Allowah website.
- Safe work practices are on display throughout the hospital
- Safety Data Sheets, are located in the Treatment room, cleaners room, Laundry and kitchen



Broken Equipment

- Ensure persons and area is safe
- Attach a sign to the equipment to say it is broken
- Remove broken equipment from patient area (If a large piece of equipment ask Porter to move downstairs). Small pieces to a plastic box under the Nurses' Station.
- Notify the RN in charge
- Write in Equipment problem book or in maintenance book, which is located at the Nurses' Station.
- Complete Tickit incident



Call bells



- The **red** emergency call bells are located in the bedrooms, bathrooms, Orange Room and Front desk.
- Use the emergency call bell for when help is needed urgently e.g. child has stopped breathing, has a prolonged seizure or you need help immediately.
- These ring through the hospital and the staff downstairs will come up as well.
- A red light shows outside the room, that has activated the emergency call bell and on an indicator panel. If you hear the emergency bell – go to see if your assistance is required (Ensuring the safety of your patients first)

Call bells



- The yellow/green assistance call bells are for when help is needed, but it is not urgent e.g. another staff member needs assistance with a double lift.
- These are located above each bed, in each bathroom near the bath, near the toilets, in the Orange Room, Kitchen, laundry and Finance office
- A yellow light shows outside the room, that has activated the call bell and on an indicator panel will identify your location, example Bed 6D.
- If you hear an assistance bell please assist if able.

General Safety Practices

- The speed limit on the hospital grounds is 5km/h. There are designated entry and exit driveways from the hospital – please adhere to these for the safety of other people coming and going.
- Footwear to be worn is leather shoes covering the foot with non slip soles
- No running in the hospital. There may be a child or toys on the floor, you could easily trip. Be aware of your surroundings, clean up after yourself and pick up toys and other items on the floor to prevent trip hazards.



General Safety Practices

- Allowah abides by the NSW Health regulations no smoking on the grounds. If you do need to smoke, there is a designated place - on the curb beside the exit driveway. There is a bench and bin in that space.
- No hot drinks in patient areas – this includes the Orange Room. (When special morning tea and lunch is on it is well supervised)



Hospital Security

- The Hospital has a system with video intercom for after hours entry and exit.
- Night staff are aware of the hospital security system and how to use it. If you are doing night duty you will be oriented to night time security
- We have a number of CCT monitors: at the front door, downstairs near the lift, rooms 4, 5, 6, 10, 12 and 13



Maintenance Book

- This book is for maintenance type issues e.g. light not working
- The Facilities Manger monitors this book and organises the correct personnel for each job



Manual Handling

- Hoist system in all bedrooms and mobile hoist for Orange Room. (You will be shown how to use the system)
- On each child's care plan it tells you what size sling to use
- Only Children under 10kg are a single person lift
- All other Children hoist only
- Always check each sling for its integrity and safety before using them to lift the child. Any signs of wear and tear please remove them, place a broken equipment sign and tell the RN in charge



Patient Safety

- Some patients bite or hit staff and other children. If a child is known for these behaviours they are identified as a risk on the childcare management plan. Be aware of where you are place your children making sure they can't access immobile patients, never leaving them unsupervised on the floor.
- Also be aware some children have unpredictable or sudden body movements. Take extra care when handling these children as they as they may suddenly roll, wave their arms or kick.

Patient Safety

- Electrical safety caps are used when the power point is not in use. So please replace them if point is empty. Most of the time they are sitting above the point
- Cot and bed rails must be up at all times even if the child is not in the bed, the reason being some children are mobile and like to climb. (M thinks all beds are trampolines)



Patient Safety - Beds

- Lower the side rails to place the child into bed or when attending to the child, don't work over the top of the rail - not good for your back. Never leave a child unattended on the bed with side rails down.
- When a child is put to bed and you have settled them, beds must be lowered to the lowest level. Floor line /kangbo beds must have crash mats either side of the bed
Floor line bed rails are to be down once at floor level. They are the only beds that have the side rails down and only when at floor level.



Patient Safety - Beds

- All children have a BAS completed which indicates which type of bed suits that child. Can be found at Nurses' Station and list in Treatment Room.
- Beds and cots need to be away from the wall in line with the lockers to help prevent equipment being broken by the bed or the children that can reach out.
- Never walk away from a child in the bathroom, call for assistance if you require anything.



Supervision of children

- Supervision of patients at Allowah is essential at all times as the children are unable to cry out, tell us or push a call bell to get our attention if they are in difficulty.
- It is the responsibility of each staff member to properly supervise children under their care. If leaving your room for more than two minutes or going on a meal break, you need to handover care of your children to your partner or RN in charge. And being the nurse taking over the care of those children you are now responsible for their safety



Wheelchairs and Harnesses

- Most children have their own wheelchair (except some mobile children). The seating is set up for each child individually. It is vital for their safety that they are put in their chairs correctly and all straps, lateral supports or harnesses are done up, this includes placing their feet on foot plates and doing up the straps.
- General rule if a strap is on a chair it needs to be done up.



Wheelchairs and Harnesses

- Equipment brakes must be on at all times unless you are moving the equipment, this includes wheelchair brakes especially when transferring a child in and out of their chair when feeding them etc. If brakes are not on, equipment can suddenly move or be knocked by another person or child.
- Anti-tips also need to be on all wheelchairs for the child's safety so they can't be tipped backwards (always check on admission).



Thank you

Remember

