



MINUTES
JOINT CENTRAL COMMITTEE ON HEALTH AND SAFETY
Wednesday, September 29, 2010
10:00am-2:00pm
OPSEU Headquarters

Attendees:

Brendan Kilcline, Co-Chair
 Brenda Rantz, Co-Chair
 Caroline Van Kessel
 Robyn Fremeth
 Tim Savage
 Lisa McCaskell
 Joan Murray
 Tom LeBlanc

#		AGENDA ITEM	Speaker
		Documents referred to are: May 19, 2010 JCCHS Draft Minutes	
1.	10:15 AM	Call to order	B. Kilcline
2.	10:15 AM	Approval of Minutes of May 19, 2010 <ul style="list-style-type: none"> • Switch the Call to Order speaker to B. Rantz instead of J. Murray. • Minutes Approved. 	All
3.	10:15 AM	Review of Agenda <ul style="list-style-type: none"> • B. Rantz is speaking to Slips, Trips and Falls not J. Murray. • Move New Business item: Accident Investigation to Business Arising • Workplace Violence Assessment Reports added onto the Agenda under Business Arising 	All
4.	10:20 AM	Business Arising: <u>Workplace Violence Survey</u> <ul style="list-style-type: none"> • L. McCaskell reported that the summary of survey results was posted on the OPSEU website • T. Savage explained that there was a miscommunication between OPSEU and OHA which resulted in OPSEU posting the document before it had been reviewed by OHA internally. In future, the Committee agreed that we will take a more formal coordinated approach when posting 	L. McCaskell T. Savage

	<p>10:30AM</p>	<p>JCCHS documents.</p> <p><u>Workplace Violence Assessment Reports</u></p> <p><u>Thunder Bay Regional</u></p> <ul style="list-style-type: none"> • T. LeBlanc reported that almost all the Risk Assessment have been completed at his hospital using the PSHSA (formerly OSACH) tool. • Prior to the assessments being done, a PSHSA consultant H. Van Huille provided training an education to T. LeBlanc, a unit manager and the two JHSC co-chairs. • The Risk Assessments were performed on each unit/area by T.LeBlanc working with the manager from that area. • The JHSC, managers and T. LeBlanc are still developing controls to address the hazards identified in the Assessment • When all the assessments have been completed and the control measures developed, all this information will be posted on the hospital’s shared drive where it can be access by staff and the JHSC • Overall, T. LeBlanc found the Risk Assessment tool and process to be effective, although he noted that it is time-consuming. He plans to present the Risk Assessments and control measures to the JHSC by the end of this year. • T.LeBlanc also noted that he has been doing some education at his hospital on the role of physicians as supervisors. <p><u>South Bruce Grey Health Centre</u></p> <ul style="list-style-type: none"> • B. Rantz reported that process was positive and effective overall. • Following training of three managers by PSHSA’s H.Van Huile, the RAs have been almost completed. • During the process, it became clear that the results of the assessments were more accurate when done by trained managers. • Managers are currently developing action plans to address the identified hazards. Once these plans are drafted, managers will meet with staff to review and seek feedback. • The hospital is planning to re-assess workplace violence every three years and more often if numbers of incidents demonstrate that hazards have not been controlled. 	<p>T.LeBlanc</p>
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	<p><u>Discussion and next steps</u></p> <ul style="list-style-type: none"> • The committee agreed that it would be useful to document the Risk Assessment process and lessons learned when using the tool in these three workplaces. T. Savage suggested that report could serve as a Leading Practice Guideline • B. Kilcline stated that the document could provide advice on how to use the tool effectively. • T. LeBlanc stressed that this tool is only useful in a hospital/healthcare setting • T. Leblanc suggested that there needs to be a supervisor dedicated to safety or a member of JHSC to administer the survey. Also there is a need to explain to managers when it is appropriate to use the tool and how to use the tool/policy. Focus training for all the particular areas/units • L. McCaskell will follow up with the Toronto East General Hospital to get the results from their Workplace Violence Assessment • T. LeBlanc will document the RA experience and lessons learned at TBRHSC and then B. Rantz will add material about the experience at her facilities. <p><u>Slips, Trips and Falls</u></p> <ul style="list-style-type: none"> • B. Rantz emailed a Slips Trips and Falls draft document to the group. • L. McCaskell recommended that the document needs more thorough information and also to emphasize how the numbers of Slip, Trips and Falls are an indicator of overall Safety Culture. • T. Savage thought it was a good start which can be improved. • T. Savage reported that there is a useful UK report that tries to understand the impact of slips, trips and falls injuries • L. McCaskell stressed that the document needs to adjust its tone and not point fingers <p>T. Savage will work with the staff member at SBGHC to develop the document further.</p> <p><u>Safety Group Update</u></p> <ul style="list-style-type: none"> • T. Savage reported on the Safety Group Meeting Monday, September 27, 2010 at the Royal Ottawa Mental Health Centre • T. Savage explained that the WSIB is adding a 3rd year to the Advantage Member Safety Group 	<p>L McCaskell</p> <p>T.LeBlanc B.Rantz</p> <p>T.Savage</p>
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	<p>New Business:</p> <p><u>OAHPP Core Competencies Project</u></p> <ul style="list-style-type: none">• L. McCaskell reported that a new Advisory Committee on Infection Prevention and Control Core Competencies has been created to give OAHPP advice on what modules should be created, who they should be for and how they should be delivered. The first meeting was on September 13, 2010• L. McCaskell will report on the progress of this Advisory Committee at future meetings.	
	<p>Next Meeting Date: December 8, 2010 at OHA Headquarters</p> <p>Meeting was adjourned at 1:42pm</p>	