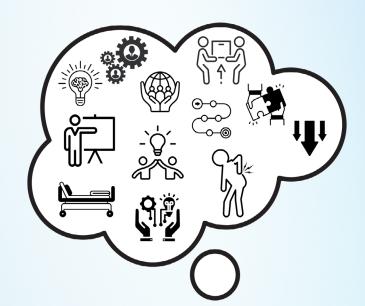
CONNECTS

Quarterly Magazine

"Innovation Reduces Injury"



2025 AGM

KEYNOTE SPEAKER:

Paul Krismer

EDUCATIONAL PRESENTATION:

Denmark Vendlet System

NEW SAFETY RESOURCE:

'SERIES OF SEVEN'

EMERGENCY RESPONSE FOR HOME OPERATORS

PREPARING FOR A SAFE YEAR IN 2025

COMPLIANCE CORNER

Addressing Frequent Contraventions in Healthcare

YOUR
TRUSTED
SOURCE
FOR SAFETY
TRAINING
AND
CONSULTING

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CEO UPDATE

want to start by extending a Happy New Year to our readers! I am so excited for the safety-focused work SASWH has mapped for the year ahead to best support our members in improving health and safety in healthcare. A few notable emerging initiatives for the Association are our communications strategy as well as a series of emergency preparedness workshops.

SASWH is currently undergoing a brand refresh as part of our communications strategy, which will be rolled out later in 2025. We are also expanding on the support SASWH currently offers to home operators, particularly in the areas of emergency preparedness and contingency planning. In January, SASWH hosted the first workshop, which was well-attended, and participant feedback shared that they came away with more knowledge on emergency planning procedures and felt better prepared to address this topic with their teams. SASWH hopes to offer more of these workshops as the year progresses. If you are a home operator in Saskatchewan interested in attending a future session, email info@saswh.ca to be added to our notification list for upcoming sessions!



One other safety topic I would like to draw attention to in this update is hazards in the workplace, and what to do about them. As a team. SASWH has been reflecting that the greatest hazard in our workplace is 'windshield time' - time spent behind the wheel while travelling on Saskatchewan roads. Our Safety Specialists travel far and wide in order to meet the needs of our members - in 2024 alone. SASWH staff travelled a collective 140.741 kilometres! To ensure worker safety, our team collects data from a variety of sources to make informed decisions about when travel is - and is not – appropriate. The Highway Hotline, road condition reports, feedback from our site contact(s) on the weather in their location all of this information is used to make the call! While it doesn't happen often, SASWH may need to reschedule training sessions which require travel when road conditions are unfavourable. We are grateful to our members for their understanding when these incidents do occur! Thanks to this focus on safety, I am proud to share that SASWH has only had one time loss injury over the past ten years.

I would encourage all employers and workers to think on the greatest hazard in your workplace, and to reflect on the controls currently in place – or controls that could be put in place – to reduce the risk of injury associated with that hazard. Addressing risks one at a time and applying safe practices is the best way to show your support for workplace safety!

One last note: please be sure to register for our upcoming virtual Annual General Meeting and Educational Presentation on March 25th, 2025! We hope everyone in attendance benefits from the theme of Innovation Reduces Injury.

I hope you enjoy this issue of SASWH Connects.

Gandra Cripps

BRAND REFRESH

Fresh new look, same trusted source.

Join us March 25th at our 2025 AGM for the official rollout

NOTICE OF ANNUAL GENERAL MEETING

SASWH will be hosting a virtual AGM on Tuesday, March 25, 2025. Participants can look forward to hearing updates on their safety association's programs and services, and can listen to two speaker presentations which highlight this year's event theme:

INNOVATION REDUCES

INJURY

POWERFUL SAFETY CULTURES IN THE MATURE ECONOMY

SPEAKER: PAUL KRISMER



You probably have a solid, well-established written safety program. Your people know what they're supposed to do – but are they doing it? Breakdowns in safety often occur because of the persistent, yet sometimes hidden, emphasis on productivity over safety, and indifference to safe job procedures. These problems can be resolved through simple, consistent actions as part of a long-term commitment to positive safety cultures.

In this inspirational introduction to the science of positive psychology, learn about the research results that prove happiness leads to greater safety success. If your company knows "what to do", but too often finds staff and management fail to do it, you will come away with new insights about how to powerfully engage employees and create impactful, effective corporate culture.

Paul Krismer has a proven track record as an inspirational leader and spent 20 years as a Safety and Disability Management leader. As a public speaker and trainer, Paul's authentic and passionate commitment to his subject matter shines through. Each presentation is packed with useful information and practical tools on the science of positive emotions. He gets the point across that increased happiness has serious outcomes – improved safety and reduced disability.

Paul is the best-selling author of Whole Personal Happiness: How to be Well in Body, Mind and Spirit, and is a proud member of the International Positive Psychology Association and the Canadian Association of Professional Speakers.

DENMARK VENDLET TECHNOLOGY

PROMISING RESEARCH FOR INJURY PREVENTION AND THE REDUCTION OF MUSCULOSKELETAL INJURIES IN HEALTHCARE



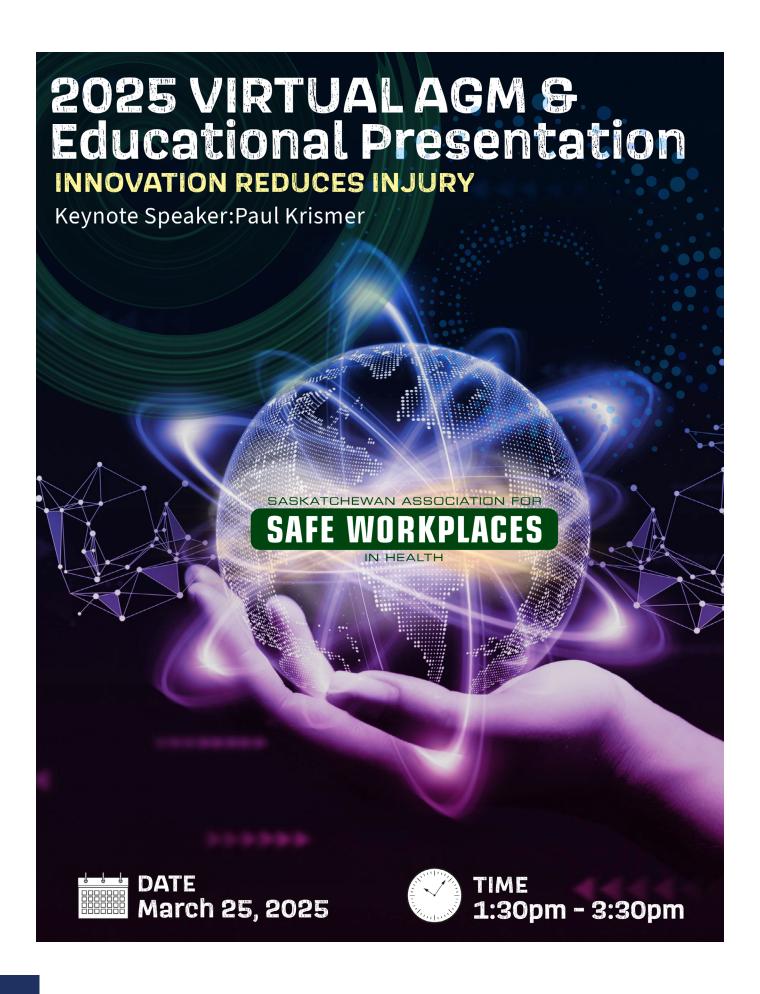
"The use of patient handling training combined with Vendlet technology could reduce the potential of an MSI from occurring and improve patient care and worker safety."



Musculoskeletal injuries account for more than half of the time loss injuries in Saskatchewan's healthcare sector. The Vendlet system is an automatic repositioning system manufactured by Direct Healthcare Group in Denmark, and research and development efforts are currently underway to bring this technology to Canada.

The introduction of some promising research out of the University of Moncton by researchers, Dr. Michelle Cardoso and Dr. Wayne Albert, suggests that the use of patient handling training combined with Vendlet technology could reduce the potential of an MSI from occurring and improve patient care and worker safety.

Dr. Cardoso and Dr. Albert have applied a multi-disciplinary approach to achieving their research goal of implementing evidence-based solutions into practice. To do this, it is first important to understand the underlying injuries in the workplace and the potential areas of concern. This requires an epidemiological investigation of the work environment and its employee injury trends. The key evidencebased injury research is embedded in the ergonomic assessment of everyday tasks and the interaction with workplace equipment to determine the demands on human physical, physiological and cognitive abilities, and the potential for risk of injury.



REGISTRATION IS REQUIRED TO ATTEND THIS EVENT. FOR MORE INFORMATION OR TO REGISTER, PLEASE CLICK THE LINK BELOW.

REGISTER NOW

CONTINUING DUCATION CREDITS

any healthcare workers are required to continue developing their skills and knowledge to maintain designations or certification as a regulated professional. Some of the training programs offered by SASWH have been approved for continuing education credits (CEC).

The Saskatchewan College of Paramedics has approveded the Defensive Driving Train the Trainer Program for eight CECs. To clarify which SASWH programs are eligible for CECs, contact your regulatory body or SASWH at info@saswh.ca.





EMERGENCY RESPONSE FOR HOME OPERATORS

According to the Federal Emergency Management Agency (FEMA), the definition of an emergency is "an unexpected event which places life and/or property in danger and requires an immediate response through the use of routine community resources and procedures." Emergency response planning for private care homes is crucial to ensure the health, safety, and well-being of residents and workers. Challenges that must be addressed as part of an Emergency Response Plan will depend on the residents of a facility: elderly clients, residents with mobility issues or cognitive issues must be considered during the development and implementation of the Plan.

The Emergency Management Continuum (see diagram below) is a tool used to help communities, facilities and organizations prepare for and mitigate the damage from emergencies. The continuum is made up of four parts: Prevention and Mitigation, Preparedness, Response, and Recovery.



PREVENTION AND MITIGATION

Risk Assessment: Conduct a thorough assessment to identify potential risks specific to the care home's location and population (i.e. fire, flood, medical emergencies, power outages).

Emergency Plan Development: Develop a comprehensive emergency plan that outlines procedures for different types of emergencies, ensuring it's specific to the facility's layout and resident needs.

Resident Risk Profiles: Create risk profiles for each resident that detail their mobility, cognitive status, and any special medical needs to aid in personalized emergency planning.

Evacuation Routes and Exits: Design and regularly update evacuation routes to account for residents with limited mobility or cognitive challenges. Ensure exits are clearly marked and accessible.

Resident Tracking: Implement a tracking system to account for all residents during an evacuation, ensuring no one is left behind.

Transportation Arrangements: Establish agreements with transportation providers (ambulances, wheelchair-accessible vans) for quick assistance in evacuating residents if needed.

PREPAREDNESS

Regular Drills: Conduct regular emergency drills that include fire, earthquake, and other scenario-based evacuations. Adapt drills to address the specific challenges of a care home environment.

Staff Training: Train staff on emergency response procedures, evacuation protocols, first aid, CPR, and the use of fire extinguishers. Make sure they know how to respond to residents with specific needs.

Collaboration With Local Emergency Services: Coordinate with local emergency responders, such as fire departments and Paramedics to familiarize them with the facility layout and resident needs, improving response times.

RESPONSE

With a well-developed Emergency Response Plan in place, as well as staff who are prepared to react thanks to regular drills and relevant training, the facility should be able to provide a competent and effective response to incidents.

RECOVERY

Home care operators and workers often work on tight deadlines and under heavy workloads, and training can fall by the wayside. However: letting essential training and emergency planning go unaddressed will have a significant impact on the time it takes a facility to recover from an emergency situation. According to FEMA, 40% of companies do not re-open after a disaster, and another 25% fail within a year of re-opening. Taking proactive steps to mitigate the impact of a disaster is the best way for home operators to reduce these risks and keep their workers and residents safe.

COMPLIANCE CORNER

Addressing Frequent Contraventions in Healthcare

In the safety world, the word contravention is often used in conversation. Contravention means an action that violates the law. So, when an employer receives a notice of contravention dealing with safety, they are being told they are not following employment law; namely *The Saskatchewan Employment Act* and *Occupational Health and Safety Regulations*, 2020.

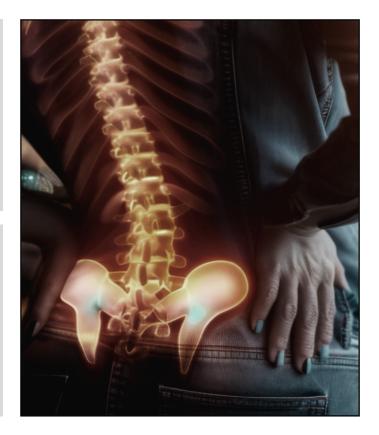
Contraventions can be filed against employers in every industry, but healthcare faces unique challenges which are reflected in the sector's commonly issued notices. SASWH has tailored our offerings to address the most frequently cited contraventions in the G22 (healthcare) rate code.

"CONTRAVENTIONS
CAN BE FILED
AGAINST EMPLOYERS
IN EVERY INDUSTRY"

FREQUENT OHS REGULATION CITATIONS FOR G22

1
OHS REG 31-4
Patient Moving and Handling





PREVENTION SERVICES OFFERED BY SASWH



TRANSFERRING LIFTING REPOSITIONING (TLR®)

TLR training emphasizes minimal use of manual effort with the maximum use of equipment to reduce the risk of injury to workers and their clients. This program is interactive, informative, and requires students to demonstrate appropriate moving techniques and an understanding of safe body mechanics. SASWH offers TLR in several formats to best suit the needs of the participants:

- TLR Object Moving Only for workers who lift or transfer materials as part of their job.
- TLR Client & Object Moving for workers who provide care to patients as part of their job.
- TLR EMS for EMS workers who deal with patients in uncontrolled environments.

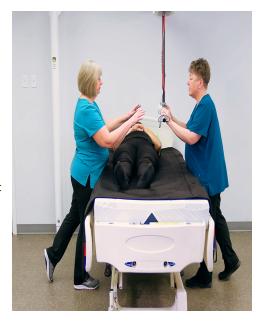


LEFT PHOTO:

Power Lift - One Worker

RIGHT PHOTO:

Repositioning with Mechanical Lift



SAFETY TALKS

Safety Talks are available on proper body mechanics, environmental services best practices, safe patient handling and equipment, object moving, and more. Delivering a Safety Talk during a team-wide "huddle" is one method to remind workers of best practices and reinforce that safety is everyone's responsibility.



PREVENTION SERVICES OFFERED BY SASWH

OCCUPATIONAL HEALTH COMMITTEE (OHC) LEVEL I

All committee members should complete OHC Level I. This program provides information on the legislated requirements and duties of an OHC, how to conduct and record meetings, the identification, assessment and control of hazards, and how to create recommendations for corrective actions.

OCCUPATIONAL HEALTH COMMITTEE (OHC) LEVEL II

Managers, supervisors and committee members who participate in workplace inspections and investigations should complete OHC Level II. This program trains participants on finding the root cause(s) of incidents and what steps must be taken to prevent similar incidents from happening in the future.

SAFETY FOR SUPERVISORS

This training provides supervisors with the information they need to create and promote a safe environment, prevent workplace injuries and illnesses, and enhance their facility's safety culture. Participants must be supervisors as outlined in the legislation: "A person who is authorized by an employer to oversee or direct the work of workers."



PREVENTION SERVICES OFFERED BY SASWH

PART®

PROFESSIONAL ASSAULT RESPONSE TRAINING

PART training provides workers with the understanding of, and ability to assess, potentially violent situations and a means to manage, reduce or eliminate risks. PART interventions can be used when the primary and back-up treatment/ care plans fail, and workers are faced with an immediate threat of injury. PART is not a self-defence program. SASWH offers PART in various levels depending on the level of risk a worker may be exposed to on the job:

PART Basic focuses on the identification of potentially violent situations, basic verbal techniques (e.g., validation, de-escalation, redirection), and the importance of proper documentation and communication.

PART Intermediate includes all content covered in Basic as well as the principles of effective breakaway and evasion techniques.

PART Advanced includes all content covered in Basic and Intermediate as well as the principles of effective manual restraint techniques.



TOP PHOTO: Rear Forearm Choke BOTTOM PHOTO: Knee to the Groin



Workplace Violence Prevention Resources are available at no cost on SASWH's website with the goal of preventing injuries in healthcare caused by violence and acts of aggression and building a stronger culture of safety. Employers can access resources such as:

- Workplace Violence Risk Assessment (WVRA) toolkit;
- Individual Client Risk Assessment (ICRA) toolkit, and;
- Personal Safety Response System (PSRS) toolkit.

SASWH would like to thank our partners in Ontario, PSHSA, for sharing these resources with Saskatchewan!

FOR MORE INFORMATION ON TRAINING SERVICES AND OTHER RESOURCES, CONTACT SASWH AT INFO@SASWH.CA.

PREPARING FOR A SAFE YEAR IN 2025

SAFETY MINUTE



SAFETY CHECKLIST

SAFETY CHECKLIST				
	ITEM	DONE	NOTES	
1	Verify all workers are trained according to the risk of their roles prior to starting work or taking on new responsibilities.			
2	Review Job Safety Analysis (JSA) with all workers. New hires should review the JSA for their role prior to starting work, and existing staff should review the JSA for their role annually or more frequently if there is a change in their job responsibilities.			
3	Audit training requirements and status for all staff, and ensure staff are trained to risk of role as defined in their JSA and schedule training sessions as needed.			
4	Conduct regular preventive maintenance on all patient lifting equipment as per manufactures recommendations and guidelines.			
5	Set regular equipment inspection reminders.			
6	Check expiration dates on products in the workplace, such as: first aid kits, AED kits, and disposable respirators.			
7	Audit the organization's Safety Data Sheet binder.			
8	Schedule annual maintenance inspections for fire extinguishers and emergency lighting systems, as well as monthly fire extinguisher inspections by a manager.			
9	Evaluate the Emergency Response Plan to ensure information is still current and accurate, and schedule a team-wide meeting to review the updated Plan and ensure all staff understand their roles in an emergency situation.			
10	Set dates for workplace fire drills and emergency preparedness drills (minimum frequencies for conducting fire drills are regulated by the Fire Code) and, if available, include local fire departments for some drills.			
11	Conduct root cause investigations on incidents and keep workers informed on how the risk has been eliminated, and/or ways the risk of reoccurrence has been reduced.			

NEW RESOURCE

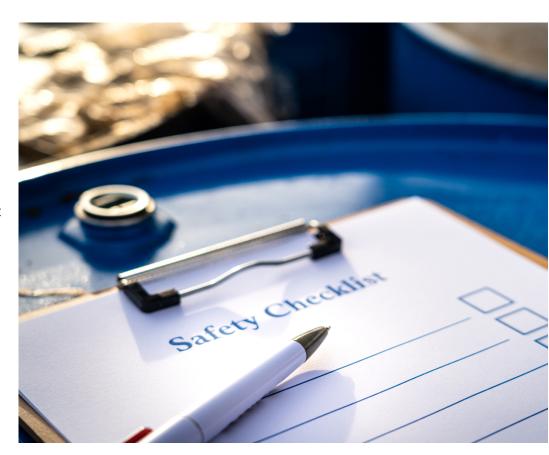
Series of SEVEN

SASWH is pleased to announce the release of a new online resource available to our membership free of charge!

OHS 101: Series of Seven

is a sequence of modules which contain supplemental information intended to support new hires, home operators, managers, or supervisors who may be new to the healthcare sector.

These modules are educational in nature and are not a substitute for the required safety education and training a worker needs for their role.



MODULE 1

LEGISLATIVE COMPLIANCE AND ROLE CLARITY Module 1 introduces learners to various aspects of legislation and provides a clearer understanding of the responsibilities an employer bears in fostering a safe and secure working environment.

MODULE 2

VIOLENCE PREVENTION

Module 2 highlights the online tools and resources available to healthcare workers in Saskatchewan, as well as how employers can build a Workplace Violence Program and implement Workplace Violence Risk Assessments in their organization.

MODULE 3

SAFETY MANAGEMENT SYSTEM

Module 3 is an introduction to the six key elements of a Safety Management System (SMS). This tool is used to identify hazards for the health and safety of workers, and to put in place a process and/or policy to control those hazards.

MODULE 4

EXPOSURE CONTROL PLAN

An Exposure Control Plan is a detailed plan for reducing and eliminating risks within the workplace. Module 4 outlines the essential topics that must be assessed when developing or updating an Exposure Control Plan.

MODULE 5

EFFECTIVE OCCUPATIONAL HEALTH AND SAFETY COMMITTEE WORK

A well-developed and functional Occupational Health and Safety Committee is imperative to workplace safety and wellness. Module 5 explains what makes for an effective committee.

MODULE 6

SAFETY FOR SUPERVISORS

Module 6 outlines supervisors' legal responsibilities regarding health and safety in the workplace, and instructs learners on how to locate information relevant to their workplace in the Saskatchewan legislation.

MODULE 7

SYSTEM PARTNERS IN SAFETY

Module 7 provides additional clarity regarding the roles of system partners as they pertain to safety.

MENTAL HEALTH FIRST AID

The statistics around mental health are daunting: the Mental Health Commission of Canada has found that one in five people in Canada live with a mental illness each year, and that by age 40, one in two people will have – or have had – a mental illness. Along with its impact on the affected individual and their loved ones, poor mental health can lead to negative effects in the workplace, including interpersonal conflicts, reduced productivity, increased

absenteeism and long-term disability claims, and a higher risk of unsafe work behaviours. One resource available to SASWH's membership is Mental Health First Aid, a two-day program delivered in an SASWH classroom or at an employers' workplace. Mental Health First Aid is a globally recognized, evidence-based program which provides participants with a baseline knowledge of common mental health issues and effective interventions.



Workers and managers who complete this training should leave feeling more confident in their ability to:

- Reduce the stigma around mental illnesses in their workplace;
- Recognize the signs of common mental health problems;
- Open lines of communication; and
- Determine the best approach if they are concerned about a co-worker, family member or friend.

Contact SASWH at info@saswh.ca for more information on Mental Health First Aid training.

RESOURCES FROM THE MENTAL HEALTH COMMISSION OF CANADA

HOW TO SUPPORT HEALTHCARE WORKERS AT WORK

COMMON MENTAL HEALTH MYTHS AND MISCONCEPTIONS

BEING A MINDFUL EMPLOYEE

MENTAL HEALTH FIRST AID "ALGES" REFERENCE TOOL

TRAINING SPACES



SASWH strives to work with our members to provide training in a comfortable environment for instructors and participants. Our Safety Specialists are available to hold closed training sessions at an employers' worksite, but arrangements can also be made to use an SASWH training room in Regina or Saskatoon. If you are tight on space, don't have the necessary equipment available, or just want one or two students to complete training, contact our Training Coordinators at info@saswh.ca to inquire about sessions held at SASWH facilities in Regina or Saskatoon!

UPCOMING EVENTS

HEALTH AND SAFETY EVENTS

SASWH ANNUAL GENERAL MEETING MARCH 25, 2025 VIRTUAL

CCOHS FORUM
THE CHANGING WORLD OF WORK
MAY 27-28, 2025
CALGARY, AB

HEALTH AND SAFETY DAYS

DAY OF MOURNING - APRIL 28

SAFETY AND HEALTH WEEK - MAY 5-10

MENTAL HEALTH WEEK - MAY 5-11

NATIONAL NURSING WEEK - MAY 12-18

SAFE WORKPLACES IN HEALTH