

Home and Community Care

Home and Community Care -
Joint Occupational Health and Safety Committee Workshop
Final Report

March 2009

OHSAH Archive



O H S A H

Occupational Health & Safety Agency for Healthcare in BC

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A c k n o w l e d g e m e n t s

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We also wish to recognize the BC Public Service Agency and the BCGEU for sharing their original workshop and handbook materials, as well as the BCGEU for sponsoring pilot venues and printing workshop materials.

Executive Summary

In the fall of 2007, a project team from the Occupational Health and Safety Agency for Healthcare in BC (OHSAH), the BC Government and Service Employees' Union (BCGEU), and the United Food and Commercial Workers (UFCW) developed a Joint Occupational Health and Safety Committee (JOHSC) workshop to specifically address the unique Occupational Health and Safety (OHS) challenges faced by Community Health Workers (CHWs) and their employers. The 2-day workshop used interactive sessions and small-group activities to assist participants to:

- Understand their roles and responsibilities as JOHSC Members or Representatives, consistent with the Workers Compensation Act, the Occupational Health and Safety Regulation, and Collective Agreement provisions
- Become familiar with the Workers Compensation Act and the Occupational Health and Safety Regulation
- Identify OHS hazards, apply the control hierarchy, and write recommendations
- Understand the basic elements of a musculoskeletal injury prevention program and a violence prevention program
- Conduct effective JOHSC meetings,
- Conduct effective joint inspections, and
- Conduct joint incident investigations

Feedback from Home and Community Care (HCC) employers was obtained, and the workshop was piloted with JOHSCs from January to March 2008. Invitations were extended to both worker and employer representatives, and JOHSCs were encouraged to attend as a group. All participants were asked for feedback on course content, resource materials, and learning activities. To provide participants with a variety of perspectives, examples, and teaching styles, a minimum of two experienced trainers from OHSAH, the BCGEU, and UFCW facilitated the workshop. In addition, the BCGEU sponsored the venue, materials, and meals.

Participants included JOHSC members from HCC, community social services, as well as long term care and acute care. Employer representatives, and worker representatives from various healthcare unions, participated with health authority safety advisors, and industry specialists from WorkSafeBC. The sessions were well received, and wait-lists existed following the initial pilot.

Recommendations include expanding the facilitator package, creating additional HCC specific scenarios and audio visual content, providing workshop resources on OHSAH's website, and exploring opportunities to expand workshop delivery to other areas of the province.

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Introduction

In February 2007, the Occupational Health and Safety Agency for Healthcare in BC (OHSAH) hosted a Home and Community Care (HCC) Conference to seek stakeholder input and direction on future OHSAH initiatives that would be valuable for this sector. Among the recommendations presented in the final report, stakeholders identified a need for “assistance and support, including tools, resources, and education/training for JOHSC in their roles and responsibilities and specifically in conducting risk assessments for all OHS hazards, especially violence in the workplace and working alone or in isolation.” (OHSAH 2007)

In the fall of 2007, a project team from OHSAH, the BC Government and Service Employees’ Union (BCGEU), and the United Food and Commercial Workers (UFCW) developed a JOHSC workshop to specifically address the unique challenges faced by Community Health Workers (CHWs) and their employers.

The following report outlines the project scope, outcomes, and recommendations.

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Workshop Content and Resource Materials

Intended audience

The workshop is designed specifically for JOHSCs members (both employer and worker representatives) in the Community Health and Social Services sector.

Content and Delivery

Overview

The workshop is based on the 2-day JOHSC workshop previously developed by the BCGEU and the BC Public Service Agency. The project team used the framework and core concepts; adapting examples, tools, and activities to demonstrate application in a HCC setting.

The workshop is designed in modular form, each concept building on the knowledge or skills gained in the previous modules. Each module starts with a short presentation of the content. Facilitators limited the time spent presenting materials, and relied instead on asking participants questions that would allow them to: identify where the content is or could be applied at their worksite, what successes they've experienced, or what challenges they've encountered. This method engaged participants and allowed facilitators to assess participants understanding, and modify delivery throughout. Interactive sessions and small-group activities accompany each module to re-enforce the concepts, and to help participants gain confidence using the knowledge, tools, and resources.

While the workshop is intensive, time is included for questions and discussion during each module. The timeline has some flexibility built in, allowing facilitators to extend or compress modules based on the needs of the group.

To provide participants with a variety of perspectives, examples, and teaching styles, a minimum of two experienced trainers from OHSAA, the BCGEU, and UFCW facilitated the workshop. Comments from participants in the evaluations, as well as in person following the sessions, showed that participants saw an advantage to having two facilitators. They cited value in having different teaching styles, a variety of perspectives, and a smoothly run workshop.

Participant feedback:

“...multi instructors and experiences & examples made the course more interesting”

Multiple facilitators allowed one facilitator to prepare upcoming activities while the other presented content, creating a seamless transition, and ensuring the agenda timelines were met. More than one facilitator also ensured participant questions were answered quickly during activities. From an internal capacity building perspective, facilitators also learned from each other during the sessions.

Content and Activity Summary

The workshop objectives were to assist participants to:

- Understand their roles and responsibilities as JOHSC Members or Representatives, consistent with the Workers Compensation Act (WC Act), the Occupational Health and Safety Regulation (OHSR), and Collective Agreement provisions
- Become familiar with the WC Act and the OHSR

- Identify OHS hazards, apply the control hierarchy, and write recommendations
- Understand the basic elements of a musculoskeletal injury prevention program and a violence prevention program
- Conduct effective JOHSC meetings,
- Conduct effective joint inspections, and
- Conduct joint incident investigations

Table 1 and table 2 summarize the topics, facilitation methods, and learning activities used to accomplish the workshop objectives.

Table 1: Summary of day 1 topics, facilitation methods and learning activities

Topic	Facilitation methods and learning activities
<ul style="list-style-type: none"> • Basic rights • Right to refuse discussion • History of OHS Legislation 	<ul style="list-style-type: none"> • Facilitator led discussion, and question and answer period (Q&A), with HCC examples and applications. The time was divided between facilitator provided information, and questions to the participants to generate discussions around application of the information.
<ul style="list-style-type: none"> • The WC Act and OHSR • JOHSC Roles and Responsibilities 	<ul style="list-style-type: none"> • Introduction to the WC Act and OHSR and how to navigate the paper and online versions. • Divided into teams, participants competed in a bingo style game to find the correct WC Act or OHSR references to answer questions in five OHS categories.
OHS Hazards and Controls	<ul style="list-style-type: none"> • Following discussion of the definitions of occupational hazard and risk, participants worked in teams to identify OHS hazards in a poster of a HCC setting. • Following a discussion of the sequence for applying control measures, the teams chose a hazard identified in the poster and outlined possible control measures at each step in the sequence.
How to prepare recommendations	<ul style="list-style-type: none"> • Facilitator led discussion on writing recommendations: what to include, who to send them to, and typical format. • Provided with an example and template, participants wrote a recommendation to implement a control measure for one hazard on the poster.
Problem solving; effective JOHSC meetings	<ul style="list-style-type: none"> • Facilitator led discussion or question and answer period based on the needs of participants. • This section can include strategies for running effective meetings, presented in the John Cleese video “More Bloody Meetings”.
Ergonomics	<ul style="list-style-type: none"> • Introduction to ergonomics: risk factors, signs and symptoms, elements of an ergonomics program and the role of the JOHSC, as well as the resources available for additional information and support. • Using stickers, participants identified pain and discomfort while working (and later signs and symptoms) on two full size body diagrams. The mapping activity was followed by a facilitator led discussion on the mapping results: causes of discomfort, and potential systems oriented solutions.

Table 2: Summary of day 2 topics, facilitation methods, and learning activities

Topic	Facilitation methods and learning activities
Violence prevention and working alone	<ul style="list-style-type: none"> Facilitator led discussion on what workplace violence is. Introduction to elements of a violence prevention program, and the role of the JOHSC.
Indoor air quality (IAQ)	<ul style="list-style-type: none"> Facilitator led discussion on indoor air quality issues in HCC settings, including what factors influence it, the health effects associated with IAQ issues, and the role of the JOHSC when investigating IAQ concerns.
Inspections	<ul style="list-style-type: none"> Facilitator led Q&A on inspections in HCC settings, and a discussion on “how to” for a JOHSC. Divided into groups, participants were asked to “inspect” (on paper) a home they were familiar with. The assignment required participants to apply what they have learned throughout the workshop, as they identified and mapped the hazards in the home, found the regulation(s) that applied to the hazards, identified a control measure for a hazard or group of hazards, and prepared a written recommendation for presentation.
Investigations	<ul style="list-style-type: none"> Facilitator led discussion on investigations for JOHSCs with a focus on “how to” conduct an investigation that looks at sequence of events and systems based contributing factors. Following a video cartoon called “Special Delivery”, participants discussed as a group their perception of whether 10 statements about the video were “fact, false, or assumption”. The goal is to increase awareness around the importance of asking questions to establish the facts. Participants then “investigated” an incident presented on video: discussing sequence of events, contributing factors, and corrective actions. To maintain participants’ interest and focus at this point on the second day, this activity was done in larger groups with structure provided by facilitators.

Resource Materials

Workshop participants were provided with a wide range of materials in their workbooks including,

- power point slides
- worksheets for all activities (such as forms, and checklists)
- handouts and resource sheets for modules (such as sample recommendations)
- the WC Act and OHSR on CD
- the Community Health Worker Handbook (a WorkSafeBC and OHSAH publication)
- the Joint Occupational Health and Safety Handbook for HCC (a BCGEU publication).

Sample guidebooks and resource materials from OHSAH, WorkSafeBC, the BCGEU, and UFCW were available for participants to review. Ordering information was also provided. Health Authority Workplace Health and Safety contact information was provided on request to CHWs who were employed by health authority home support programs.

Development Process

The project team and workshop facilitators consisted of staff from OHSAH, the BCGEU, and the UFCW. Once the workshop materials were developed, two HCC employers who attended the initial pilot session reviewed the materials and provided feedback that was incorporated into subsequent workshops. Facilitators also critiqued each session, fine tuning both the order of the modules, as well as the presentation of the modules, to improve delivery and reduce duplication. In addition, all participants were asked for feedback on course content, resource materials, and learning activities. The participant evaluations were screened following each session to capture concerns or suggestions that could be addressed in subsequent sessions.

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Logistics

Marketing

To advertise, OHSAH created flyers announcing the workshop planned for each geographic region. The flyers (See Appendix A for a sample):

- highlighted the workshop content and its focus on HCC
- provided venue and registration information, and
- encouraged whole JOHSCs to attend

OHSAH mailed the flyers to the JOHSC Co-chairs at each HCC organization listed in an extensive in-house HCC contact list. The BCGEU and UFCW also distributed the flyers throughout their communication networks.

Venues

Workshops were hosted in locations that were easily accessible to the largest number of HCC organizations in each region (see Table 3: Session Dates, Locations, and Number of Participants). In all cases, the workshops were held at BCGEU area offices. In addition to the venue, the BCGEU coordinated and sponsored food for participants.

Registration

OHSAH and the BCGEU offered participants the option to register via email, phone, or through OHSAHs online course registration system. Support staff from the BCGEU coordinated registrations for all five workshops.

The original intent was to pilot the workshop four times, once for each geographic region (Northern BC, the Interior, the Lower Mainland, and Vancouver Island). The demand in the Interior was sufficient to run an additional workshop in Kelowna. Including the additional session, a total of 91 people participated in the workshops. The breakdown by session is shown in Table 3, below. While the target audience was JOHSC members from HCC and Social Service organizations, there were also participants from long term care and acute care. Employer representatives and worker representatives from various healthcare unions participated, as well as health authority safety advisors, and industry specialists from WorkSafeBC.

Table 3: Session Dates, Locations, and Number of Participants.

HCC Pilot JOHSC Workshop			
Location	Dates	Venue	Number of participants
Burnaby	January 28 and 29, 2008	BCGEU Headquarters	17
Victoria	February 4 and 5, 2008	BCGEU Victoria Area Office	13
Kelowna (1)	March 4 and 5, 2008	BCGEU Okanagan Area Office	20
Prince George	March 11 and 12, 2008	BCGEU Prince George Office	19
Kelowna (2)	May 4 and 5, 2008	BCGEU Okanagan Area Office	22
		Total	91

Feedback and Discussion

At the start of each session, facilitators drew participants' attention to the workshop evaluation forms. Facilitators suggested that participants record what they liked, as well as recommendations for improvement, as they progressed through the workshop.

The evaluation form (see Appendix B) asked participants to rate the overall effectiveness of the workshop, facilitators, and facilities from "excellent" to "poor". Participants were then asked to rate statements regarding workshop content, design, relevance to their work, and helpfulness to their work from "strongly agree" to "strongly disagree". Open comment sections asked participants why they attended the workshop, what the best part was, how the workshop could be improved, and what workshop they planned to take next. They were also provided with an "additional comments" section.

Limitations: The feedback presented here is from the four sessions in the original pilot plan (Vancouver, Victoria, Kelowna (1), and Prince George). Evaluation forms from the second Kelowna session [Kelowna (2)] were unavailable for analysis. In addition, the OHSAH evaluation forms from Prince George were misplaced; however, Northern Health shared the evaluation forms they collected following the session.

The data from the following questions were combined in this report:

OHSAH Evaluation Form	Northern Health Evaluation Form
The best part of his course was:	What did you like most about the workshop?
This course could be improved:	What did you like least about the workshop?
	In what ways could this workshop be improved?
Additional Comments.	Additional comments are welcome

Data from questions that were distinctly different are presented separately.

A total of 44 evaluation forms were returned for all four sessions. Thirty-one respondents completed the OHSAH evaluation form, and 13 completed the Northern Health forms.

Feedback exclusively from OHSAH evaluation forms

The majority of participants agreed or strongly agreed with the statements regarding workshop content, design, relevance to their work, and helpfulness to their work, as well as facilities, facilitators, and the workshop overall. Five neutral rankings related specifically to the facilities, parking, and directions. Only one neutral ranking was related to workshop design and facilitation.

Sixteen participants listed what workshops they'd like to attend in the future, for a total of 22 individual workshops. These included:

- Violence prevention (or related) (six participants)
- Ergonomics (three participants)
- Inspections (two participants)
- Investigations (one participant)
- General risk assessment (five participants)
- Other (five participants)

Of the 26 responses to the question “I attended this course because:”, 19 could be categorized into one of two themes: either a desire to (1) “have a more effective committee” or be a more effective JOHSC member, or to (2) expand their knowledge. The remaining eight statements indicated that the participant attended because they were a JOHSC member.

Feedback exclusively from the Northern Health evaluation forms

For the Prince George session, everyone agreed or strongly agreed that the workshop content was appropriate and informative. All respondents indicated that the workshop was too short; however, they would recommend the workshop to someone else, and would, in their next shift, apply something they'd learned at the workshop. The majority also indicated that they would attend again if offered.

Of the 11 comments related to the skills respondents would apply next shift, seven indicated that they would be more aware of their surroundings. Two others stated that they would apply their new knowledge to investigations and inspections.

Combined OHSAH/Northern Health Feedback Data

Participants provided 45 comments on the best part of the workshop or what they liked most, which were organized into the categories listed below. “N” is the number of comments in that category.

- All of it (N=5)
- Application or empowerment (N=2)
- Facilitators (and learning atmosphere) (N=7)
- Learning activities (N=8)
- Networking (N=3)
- Resource and content specific (N=20)

Several comments, while about a specific learning activity or content area also mentioned an appreciation that the content was tailored specific to HCC. This was also shared verbally with facilitators during and after sessions.

Participant feedback:

“[I liked] that it was targeted mostly for CHWs.”

“[It was] nice to have it tailored to health care.”

All but two of the learning activity comments related to group work and interaction, which when combined with the networking category, indicate that opportunities to share are important to participants.

Statements categorized as application or empowerment demonstrated synthesis of the concepts in the workshop and a recognition of potential application beyond the workshop.

Participant feedback:

“...emphasized how important the OHS committee contribution is to everyday health and safety of workers and employers.”

“...explanations of what is appropriate and not appropriate. Some things are just accepted.”

“realizing we are not doing things right”

Participants offered a number of ways to improve the workshop, the majority of which related to adding more HCC specific content in the form of additional resources, activities, or examples. Concrete examples included adding videos, and HCC scenarios, and examples of “how effective committees are created” or “providing some examples of JOSHC structure in organization”. Many of these suggestions can be incorporated into the workshop through augmenting facilitator examples.

Additional suggestions for improvement related to the duration of the workshop. Most indicated that more time for various activities or a more in depth look at a topic would be appreciated. Facilitators recognized that the workshop was an intensive overview of the key competencies for JOHSC members, and often premised each section with a discussion that the presentation was a high level overview which should be supplemented with a more in-depth follow up workshop on the topic specifically. Based on the feedback, this message could be strengthened.

A few comments provided suggestions to facilitators on guiding discussions and keeping participants on task. This was related to one session with a diverse mix of JOHSC member skill set and JOHSC functioning. It was a challenging experience for facilitators to meet the needs of those new to a JOHSC, or on a JOHSC that was struggling with foundation requirements as well as the needs of those with JOHSC experience or who are from a well established JOHSC. A variety of examples and activities for facilitators to choose from will assist with achieving this balance, as would ensuring the workshop is marketed to those interested in refreshing skills or those new to JOHSC work.

Most of the additional comments reflected the themes in “the best part of this workshop” and “what could be improved”. Of interest were the repeated expressions of confidence and empowerment to move forward as a JOHSC or JOHSC members, and the contrast with other comments which showed the workshop itself, or the new knowledge of their role as a JOHSC member, overwhelmed a few participants.

Participant feedback:

“[I] feel very confident now that we can go forward & be [a] functional committee”

“Overwhelming amount of work on top of my fulltime job ...”

“[I] feel a little overwhelmed - but will overcome”

“Being on the JOHSC we have a big responsibility”

“Empowering”

Since the workshop, participants have contacted facilitators with follow up requests for assistance, such as finding regulation references, providing template forms for use at their organizations, as well as sending further publications, and organizing additional workshops.

Participants have also shared with facilitators, and project team members, that they felt much more informed and empowered to become a more active and contributory participant of their JOHSC; and that they felt that more sessions such as this one would be very helpful.

In addition, observed examples of knowledge application included a JOHSC changing the format of their meeting minutes based on workshop templates, and another organizing an information session for their staff and employer with various OHS resources, such as WorkSafeBC, in attendance.

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Sug g e s t i o n s f o r I m p r o v e m e n t

Ensure future workshops continue to incorporate dedicated opportunities for participants to network and problem solve as a group.

For application throughout the workshop modules consider:

- creating HCC specific audio visual content including videos and photographs
- developing additional HCC specific scenarios for each topic area
- adding a separate best practices section with examples of implementation in HCC settings, and include template resources such as policies, procedures, forms, and guidelines

Create a facilitator package that includes HCC specific examples, stories, and scenarios that illustrate successful application of topic materials in the home setting. Ensure the package includes a variety of activity options that facilitators can choose from to match participant skills and needs.

Strengthen the message in both the workshop materials and the presentation that the workshop is a high level overview of topics that should be supplemented with additional education and training.

Clearly identify the target audience in workshop advertising as those interested in refreshing skills or who are new to JOHSC work.

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Recommendations

Consider implementing the suggested improvements for the workshop.

Provide workshop resource materials, such as templates and example forms, on the OHSAH website.

Offer the workshop throughout the province as part of OHSAH's Education and Training portfolio.

Explore sustainable workshop delivery models such as train-the-trainer, video conferencing, online learning, and combinations of ½ day, one day, and 2-day workshops.

Provide participants with information on who delivers advanced OHS workshops in the province, and explore opportunities where OHSAH may be able to address additional education and training needs, such as the workshop topics participants identified on their evaluation forms.

OHSAH Archive

References

1. OHSAH 2007. Home & Community Care Conference Report. Retrieved from <http://www.ohsah.bc.ca/552/868/>

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APPENDIX A: Sample Flyer

Joint Occupational Health & Safety Committee Workshop for Community Health and Social Services

- **FREE TRAINING OPPORTUNITY** -

OHSAH and its project partners are pleased to invite your organization's Joint Occupational Health and Safety Committee (JOHSC) to a workshop that specifically addresses the unique challenges faced by Community Health Workers and their employers. We strongly encourage the entire committee to attend!

At the end of this 2-day session, participants will be able to:

- Understand the roles and responsibilities of JOHSC Members or Representatives;
- Effectively perform the role of a JOHSC consistent with the Workers Compensation; Act, the Occupational Health and Safety Regulation, and Collective Agreement provisions;
- Engage in problem-solving and issue resolution;
- Identify hazards and recommend corrective action;
- Conduct an accident investigation;
- Conduct effective inspections; and
- Conduct effective JOHSC meetings

Dates: Monday, January 28th, 2008 and Tuesday, January 29th, 2008

Time: 8:30 am – 4:30 pm (both days)

Where: BCGEU Headquarters, 4911 Canada Way, Burnaby, BC

Cost: Venue, materials, and trainers will be provided free of charge. Organizations are responsible for providing the leave of absences for the JOHSC members to attend.

Register for this unique program:

- on the web at: www.ohsah.bc.ca/community
- or contact:

Debbie Craig
Phone: 250.388.9948
Email: debbie.craig@bcgeu.ca

Registration deadline: January 18th, 2008



Space is limited. Reserve today!

APPENDIX B: Evaluation Form

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LEVEL 1 COURSE EVALUATION (FEEDBACK) FORM

Course Name: - 2 Day Joint Occupational Safety & Health Committee	Date:
Location:	Employer (Optional):
Instructor:	Participant Name (Optional)

Your feedback is important. By completing this form you will help Learning Services evaluate this course. Please circle the number that best represents your opinion on each item below. Feel free to expand on your responses in the comment section below or on the back of the page.

	Excellent ↓ 5	4	3	2	Poor ↓ 1	N/A ↓
Overall assessment of this course?						
Overall effectiveness of the instructor(s)/facilitator(s)?						
Overall assessment of the facilities?						
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
The purpose of this course was clear						
The learning objectives were met						
The course was relevant to me in my job						
The course was well designed						
The course materials were helpful						
The pre-course information (registration, location, parking etc.) was clear and helpful						
The pre-course assignment/reading was relevant and helpful						

This course is part of my learning plan Yes No N/A

Comments section on reverse

I attended this course because: _____

The best part of this course was: _____

This course could be improved by _____

The next course I plan to take is _____

Additional Comments _____

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ABOUT THIS DOCUMENT

The Occupational Health and Safety Agency for Healthcare (OHSAH), which operated from 1998-2010, was a precursor to SWITCH BC. Conceived through the Public Sector Accord on Occupational Health and Safety as a response to high rates of workplace injury, illness, and time loss in the health sector, OHSAH was built on the values of bipartite collaboration, evidence-based decision making, and integrated approaches.

This archival research material was created by OHSAH, shared here as archival reference materials, to support ongoing research and development of best practices, and as a thanks to the organization's members who completed the work.

If you have any questions about the materials, please email hello@switchbc.ca or visit www.switchbc.ca