

# FOCUS ON: Safety Issues & Regulation in the Healthcare Industry



At first glance, it may seem surprising to hear the healthcare industry described as hazardous for workers. But according to the Association of Workers' Compensation Boards of Canada (AWCBC), workers in the health and social services industries suffered 41,111 time-loss injuries in 2015—more injuries than any other industry sector. So although working in healthcare may not be as deadly as other industries, it's most certainly one of the most dangerous overall. That's why it's surprising that the healthcare industry isn't as highly regulated in terms of workplace health and safety as other sectors such as construction and mining. This edition of FOCUS ON looks at the safety hazards workers in the healthcare industry typically face and explains how the jurisdictions regulate healthcare safety and hazards in their OHS laws.

## Defining Our Terms

In this article, when we talk about the healthcare industry and workplaces in that industry, we mean not only hospitals, clinics, and doctors' and dentists' offices but also nursing homes, medical labs, psychiatric facilities, home healthcare service providers, ambulances and other workplaces where physical or mental healthcare is provided.

## THE SAFETY HAZARDS

Healthcare workers face a variety of safety hazards on the job, including:

**Violence.** Workplace violence has become an increasing concern in the healthcare industry. Patients may act aggressively due to their medical condition, medication they're taking, difficulty communicating their needs or frustration with their circumstances. Family and friends of patients may similarly act out with violence. According to the AWCBC, there were more than 4,000 reported incidents of workplace violence against nurses between 2008 and 2013. And in the past decade in BC, nurses had more than 40% of all injuries as a result of violence in the workplace—and more than 80% of these injured nurses were female.

Government is starting to respond to this concern. For example, on Jan. 20, 2017, Nova Scotia announced that it had accepted 12 recommendations to improve safety and security in community emergency rooms, including having the Nova

Scotia Health Authority and unions work together on ways to reduce workplace violence and implementing a provincial workplace violence prevention program. Other jurisdictions such as MB, NT, NU and SK have specifically addressed healthcare workplaces in their workplace violence requirements.

**Needlesticks.** One hazard that's unique to the healthcare industry is exposure to 'needlesticks,' that is, the danger of being stuck by a needle or 'medical sharp,' particularly one that's been used on a patient with a bloodborne infectious disease, such as hepatitis C or HIV.

**Infectious diseases.** Needlesticks aren't the only way that healthcare workers can be exposed to infectious diseases. Such workers also face the risk of infection from various diseases due to their exposure to blood and other bodily fluids from direct contact with patients, their dirty linens and medical equipment. Workers can also be exposed to airborne infections, such as tuberculosis and the flu, simply by breathing the air in the workplace.

**Insider Says:** Healthcare workers can not only catch diseases from patients but also spread diseases to those for whom they care and to co-workers. That's why some healthcare facilities have tried to compel certain healthcare workers to get flu vaccines'with mixed results.

**Ergonomics-related hazards.** Healthcare workers face a number of ergonomics hazards, most notably when handling or moving patients, which can result in musculoskeletal injuries. For example, improperly lifting a patient from a hospital bed and onto a gurney can cause back strains. In fact, the most common injuries healthcare workers suffer are related to patient handling (see, model safe patient handling policy). OHS regulators are focusing more on safe patient handling. For instance, from March to June 2016, the OHS Division of Nova Scotia's Department of Labour and Advanced Education conducted targeted inspections of 36 facilities providing long-term healthcare with a focus on patient lift and transfer.

**Radiation.** The use of certain equipment, such as X-ray machines, can expose healthcare workers to radiation'a particular hazard for pregnant workers.

**Lasers.** Lasers are being used more and more in healthcare. The laser beam shining on a person's body can cause eye and skin burns. In addition, workers may be exposed to hazardous substances released from the laser equipment and fumes emitted from materials exposed to laser beams, such as laser-plumes produced during surgery (see, laser safety toolbox talk handout).

**Cytotoxic drugs.** Cytotoxic drugs, which are used to treat cancer and conditions such as rheumatoid arthritis, multiple sclerosis and auto-immune disorders, are highly toxic to the body's cells. Because these drugs are so toxic, worker exposure to them through skin contact, skin absorption, inhalation of aerosols and drug particles, ingestion and needlestick injuries can result in:

- Abnormal formation of cells and mutations;
- Abnormal blood cell counts;
- Foetal loss in pregnant women and birth defects in their offspring;
- Abdominal pain, hair loss, nasal sores and vomiting;
- Liver damage; and
- Contact dermatitis, local toxic or allergic reaction.

## REGULATION

Canadian jurisdictions take a few different approaches to regulating the OHS hazards that healthcare workers are exposed to (see, this chart on how workplace safety in healthcare is regulated in each jurisdiction's OHS laws):

**Regulation devoted to healthcare.** Ontario has a regulation devoted to workplace safety in healthcare and residential facilities as well as a separate regulation on needle safety. Nova Scotia's *Safer Needles in Healthcare Workplaces Act* and related regulation addresses the use of safety-engineered needles in healthcare workplaces.

**Healthcare section of general regulations.** A few jurisdictions have sections in their general OHS regulations specifically devoted to healthcare safety and hazards. For example, in Alberta, Part 36 of the *OHS Code, 2009* applies to healthcare and industries with biological hazards. And Part 31 of the newly adopted *OHS Regulations* for Nunavut and the Northwest Territories provides additional protections for healthcare workers.

Some of the areas addressed in the healthcare-specific regulations and healthcare-specific sections of the general regulations include:

- Ventilation;
- Hygiene facilities;
- Compressed gas cylinders, such as oxygen tanks;
- Anaesthetic gases;
- Cytotoxic drugs;
- Laundry and waste;
- Needles and 'medical sharps';
- Infectious or biohazardous materials;
- Patient handling; and
- Lasers.

**Specific requirements for healthcare workplaces.** Several jurisdictions have safety requirements scattered throughout their OHS laws that specifically reference healthcare or apply to healthcare-specific hazards. For example, BC's *OHS Regulation* addresses specific healthcare industry hazards in its sections on safety-engineered needles and medical sharps, and cytotoxic drugs.

**General OHS regulations.** Although the remaining jurisdictions don't specifically address healthcare safety and hazards in their OHS laws, healthcare employers in these jurisdictions still have a duty to take reasonable steps to ensure the health and safety of their workers and to protect them from workplace safety hazards.

## BOTTOM LINE

According to Statistics Canada, there were 2,339,300 people employed in the healthcare and social assistance industry in 2016. This industry accounts for a high percentage of workplace injuries, although not fatalities. So if you're the safety coordinator of a healthcare workplace, it's critical that you're familiar with any OHS requirements that specifically relate to healthcare hazards and take adequate measures to ensure compliance with these requirements and protect workers from these hazards.