

WINDSOR ESSEX

COMMUNITY HEALTH CENTRE

VOLUNTEER AND STUDENT HANDBOOK

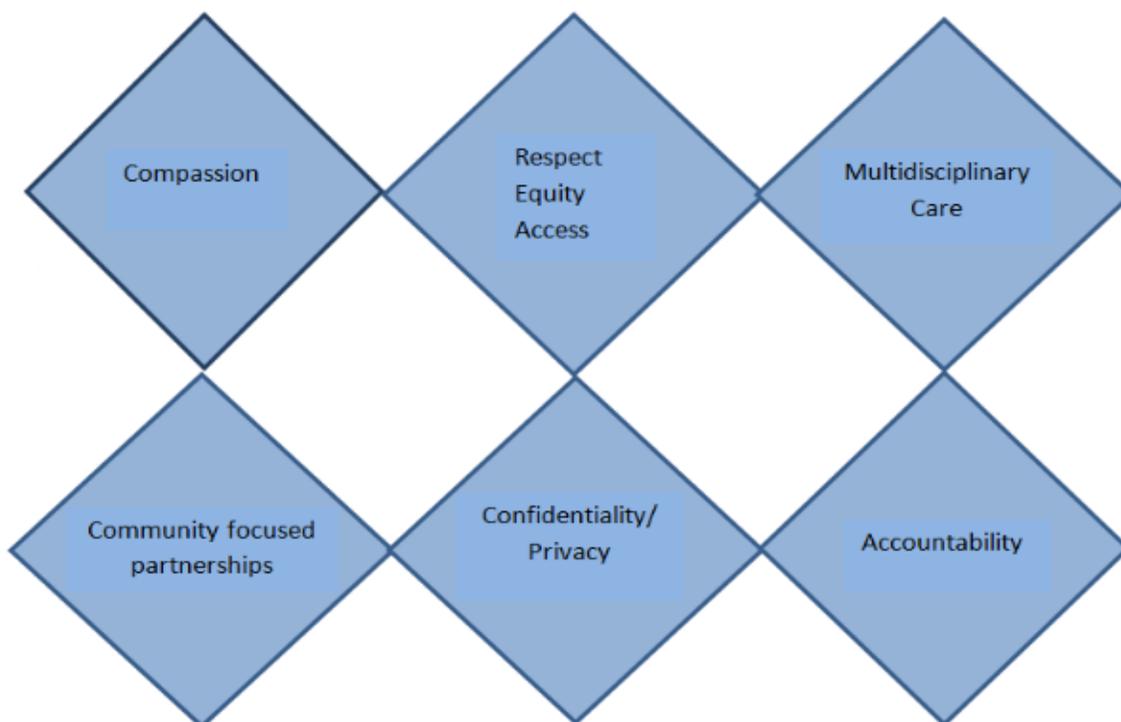
Mission

To support the health and wellness of our vulnerable population in everything we do. Vulnerable are those in need of care and system navigation due to identified risk factors.

Vision

We will achieve our Mission through health promotion, illness prevention and primary care using an integrated model in collaboration with community partnership.

Values



Windsor Essex Community Health Centre
Centre de santé communautaire de Windsor Essex

weCHC
Supporting the Vulnerable
Soutien aux personnes vulnérables

Supported by:



MESSAGE FROM THE WECHC

Welcome to the Windsor Essex Community Health Centre (WECHC). As a volunteer or student you will be part of an inter-professional team dedicated to meeting the needs of priority populations throughout Windsor & Essex County. The WECHC is an evolving Centre committed to delivering programs and services where people live, work, study, play and shop.

The Centre supports the development of volunteers or students to reach their full potential while maximizing their learning experiences. Your feedback is important to us to continuously improve the Centre's ability to respond to the changing needs of our clients. We feel every volunteer, student and employee can add to our client's experience and feel better for being a part of our Centre.

Thank you for choosing to be a part of our dream; to support the Community Health Centre (CHC) Model of Care and to deliver primary healthcare, health promotion and disease management throughout Windsor & Essex County.

Sincerely,

The WECHC Team

Windsor Essex Community Health Centre
Centre de santé communautaire de Windsor Essex



EVERY VOLUNTEER, STUDENT AND EMPLOYEE CAN
ADD TO OUR CLIENT'S EXPERIENCE AND FEEL BETTER
FOR BEING A PART OF OUR CENTRE

WINDSOR ESSEX COMMUNITY HEALTH LOCATIONS

Street Health

711 Pelissier St



Leamington

33 Princess ST. Suite 401



Pickwick Place

7621 Tecumseh Rd E.



Diabetes Wellness

2885 Lauzon Pkwy., Unit 106

Active Aging · Diabetes Wellness

Windsor Essex Community Health Centre
Centre de santé communautaire de Windsor Essex



Teen Health

1361 Ouellette Ave



Sandwich CH

3320 College Ave



<http://www.wehc.org/>

Table of Contents

Section Page

STUDENT AND VOLUNTEER POLICY 6

Student and Volunteer Bill of Rights and Responsibilities	7
Student and Volunteer Classifications	8-9
Student and Volunteer Recruitment and Selection	10-11
Student and Volunteer Screening and Placement	11-13
Student and Volunteer Orientation and Training	14-15
Student and Volunteer Re-Assignment, Dismissal, Resignation and Exit Interview	15-16
Student and Volunteer Supervision	16-17
Student and Volunteer Appreciation Recognition	18
Student and Volunteer Evaluation	18-19

WECHC POLICIES AND FORMS

Bill of Rights and Responsibilities for Clients	21
Confidentiality	22
Media Relations	23
Protection and Use of Centre Resources	24

HUMAN RESOURCES AND INFORMATION TECHNOLOGY 25

Conflict of Interest	26
Conflict Resolution	27
Dress Code	28-29
Identification Badges	29-30
Smoke Free Workplace	30
Use of Cellular Device	31
Electronic Communications	32-33
Computer Password Security	34-35

INFECTION PREVENTION & OCCUPATIONAL HEALTH & SAFETY 36

Blood-Borne, Needlestick and Body Fluids Exposure	37-38
Client Immunization	39-41
Hand Hygiene	42
Immunization and Screening	43-44
Personal Protective Equipment (PPE)	44-45
Routine Practice and Additional Precautions	45
Occupational Health and Safety Program	46
Domestic Violence in the Workplace	47
Harassment and Bullying in the Workplace	48-50
Manual Lifting Guidelines	51-52
Workplace Violence	53-55
Incident Management Process	56-58
WECHC Emergency Codes and Evacuation Procedures	59
Accessibility for Ontarians with Disabilities Act,2005	60-66

Required Tests

Accessibility for Ontarians with Disabilities Act 2005 Test	67-68
Policies Test	69-70

STUDENT AND VOLUNTEER POLICY

Scope: These Policies apply to all students and volunteers of WECHC

STUDENT AND VOLUNTEER BILL OF RIGHTS AND RESPONSIBILITIES

Volunteer and Student Rights and Responsibilities:

1. We believe students and volunteers are essential and integral partners in the work that we do.
2. We believe students and volunteers bring unique talents, skills, contacts, and knowledge that enhance and compliment our Centre's capacity to work for optimal health for all.
3. We believe students and volunteers should be provided with: meaningful assignments; regular support and supervision; involvement that maximizes their potential; recognition for their work; and a work environment of mutual respect.
4. We believe in a student/volunteer partnership based on mutual support, respect, learning, and growth.
5. We believe WECHC students and volunteers are responsible for: supporting our vision, mission, and goals; acting according to our values; respecting our policies; honouring their commitments; and performing their duties to the best of their ability.
6. We believe volunteering and student preceptoring with the WECHC enhances people's opportunities to be involved in working for their own and our community's health and well-being.
7. We accept and participate in student placements to develop and promote WECHC as a learning organization.

WECHC Principals of Student Preceptorship & Volunteering:

1. We will work to ensure that each student and volunteer's role is clear, safe, rewarding, and valued at all levels of our organization.
2. We are committed to building a student and volunteer team that reflects the diversity of our community.
3. We will strive to provide the resources needed to support our student and volunteers and make their experience valuable and fulfilling.
4. We will seek opportunities for students and volunteers to grow in their roles and responsibilities, according to their interests and the needs of the organization.
5. Where possible and appropriate, we will provide student and volunteer opportunities for people with varying abilities.

STUDENT and VOLUNTEER CLASSIFICATIONS

PURPOSE

The purpose of this policy is to outline the types of volunteer and student placements available within the WECHC.

POLICY

- The philosophy of the WECHC's Volunteer/Student Program are consistent with the Guiding Principles and Organizational Standards outlined in the Canadian Code of Volunteer Involvement.
- WECHC is committed to creating a warm, safe, and inclusive environment for volunteers and students.
- WECHC relies on volunteers and values the time, skills, ideas and service they contribute to achieving our mission, vision and values.

Volunteers

- Volunteers are essential and integral partners in the work we do and are considered a valuable resource of the WECHC.

Students

- WECHC is committed to fostering an environment for academic learning and the global dissemination of knowledge.
- WECHC provides learning opportunities for students to enhance the knowledge, skills and competencies of future professionals across a wide range of disciplines (such as health/social services, business/administration, education and human resources, etc.) and to enhance the understanding of the role and practice of community health care centres in promoting the health of individuals and communities.

PROCEDURE – Volunteers

- The WECHC may provide Volunteer Opportunities as defined by the needs and availability of the programs and services within the Centre.
- After successfully completing the Volunteer and Application process, a Volunteer is an individual who without payment or expectation of payment, contributes time and service at the direction and on behalf of the WECHC.
- Board Members are volunteers who assume a position of responsibility and leadership within the WECHC and work to help develop the organization's direction and provide governance.
- Committee Members are volunteers who give their time to help develop, implement, and oversee the implementation of specific initiatives and programs.
- Casual Volunteers typically help out with a variety of tasks on a short term basis. They may be non-registered volunteers and are assigned to meet an immediate need. These short-term assignments may provide an opportunity for people to become involved with longer term WECHC volunteer commitments.

- Program and Direct Service Volunteer make a specific commitment that involves a clear job description. They may perform clerical or fundraising jobs, or they may work directly with participants in the WECHC or out in the community.
- Peer Leaders are individuals who are trained and experienced in a certain area of expertise due to education or personal experience and are interested in helping others. This individual uses their experience to empower another person and increase his/her capacity to better health and wellbeing.
- Career Connections may be established when internal staff or external requests are made to shadow with a professional to gain more knowledge in a particular career field. Upon Director approval a connection is arranged with a mentor and can range from 4 – 8 hours, in a maximum of 2 week timeframe. This arrangement is considered a shadowing experience. The individual and the mentor will both sign a mentoring agreement.

PROCEDURE – Students

- Students are individuals placed at the WECHC by an academic institution or training program for a specific period of time for the purpose of learning specific tasks related to their education.
- A written Affiliation Agreement must be established and approved with the academic institution, prior to any student placement. This document outlines the parameters of the agreement; including the legal and liability coverage required, roles and responsibilities of the parties and will also include the course outline or similar documents identifying learning needs and /or goals and objectives of the placement.
- The Centre works with educational institutions to provide the best possible learning opportunities for students in all areas of the organization. The goal is to facilitate the introduction of students to the Community Health Centre setting. The placement has a specific start and end date.
- An observership or elective is when a student observes or shadows a professional within the organization and is arranged through a College or University. An observership provides an



STUDENT AND VOLUNTEER

RECRUITMENT AND SELECTION

PURPOSE

The WECHC offers volunteer and student placements to benefit the Centre and our clients, while at the same time providing learning and growth opportunities for matched individuals.

POLICY

- Volunteers and students will be recruited to reflect the broad diversity of cultures, capacities, and aspirations of the community. The WECHC will ensure that equity and access are reflected in the methods of recruitment and placement.

PROCEDURE

RECRUITMENT of VOLUNTEERS

- Volunteers are recruited by the Volunteer Relations/HR Coordinator or by a WECHC employee, or through general interest.
- General recruitment of volunteers will take place on an on-going basis, while focused recruitment based on the need for help with a specific function or program will take place as required.
- Recruitment strategies will be used to ensure qualified volunteers. Recruitment materials may be used to assist in recruitment of volunteers.
- Individuals interested in volunteering shall complete an application form. Applicants may complete the Volunteer Application Form on the WECHC website or complete a hard copy. All applications to volunteer will be referred to the Volunteer Relations/HR Coordinator. Potential candidates will be contacted to follow up with next steps in the application process.
- Focused recruitment will be based on specific position descriptions designed by the Volunteer Relations/HR Coordinator, the employee who requires the volunteer and Director. Job descriptions will clearly state the responsibilities, time commitment and skills/qualifications related to the position, and reporting designation.
- To request a volunteer, a staff member will contact the Volunteer Relations/HR Coordinator and provide the specifics of the request in writing, including: duties, timeframe, requirements and skill.

RECRUITMENT of STUDENTS

- Students may be recruited by the Volunteer Relations/HR Coordinator or requested by an employee through the approval of their Director.
- All requests for a practicum experience from interested schools, internship programs and universities through a College, University, School or private organization will be referred to the Volunteer Relations/HR Coordinator. The Coordinator will forward all requests to the Director of the designated program.

- Recruitment and placement of students will be based on the needs of the department or program, availability of preceptors within the organization, availability of space within our facilities or by a request made through a College, University, School or private organization.
- To request a student, a staff member will contact the Volunteer Relations/HR Coordinator and provide the specifics of the request in writing, including: duties, timeframe, requirements and skill.

STUDENT AND VOLUNTEER SCREENING AND PLACEMENT

PURPOSE

The purpose of this policy is to outline the student and volunteer screening and placement practices of the WECHC.

POLICY

- Volunteers and students shall be matched with positions that ensure the most satisfactory and mutually beneficial experience possible for the volunteer/student and the WECHC.
- Volunteers and students will not be placed in a reporting position to a WECHC staff member who is a relative or member of the same household.
- Students and volunteers will be required to submit a Police Information Check and Police Vulnerable Sector Check, prior to their placement
- The WECHC reserves the right to refuse the offer of a volunteer's services or the placement of a student if deemed unsuitable.

PROCEDURE

Screening of Volunteers

- All new volunteers are screened prior to commencing their duties.
- Volunteers must attend an interview with the Volunteer Relations/HR Coordinator.
- The interview will assist in determining the interest and suitability of the volunteer to the needs of the organization. A second interview may be required to determine suitability to the program.
- Screening ensures a suitable fit to the organization, to the specified volunteer position description as well as ensuring safety for the organization and the people it serves.

- The Volunteer Relations/HR Coordinator is responsible for completing the screening process which includes the following:
 - ◆ a completed Volunteer Application Form
 - ◆ an interview
 - ◆ two reference checks
 - ◆ police information or vulnerable sector check (not older than 1 year)
 - ◆ a brief orientation to the WECHC
 - ◆ current resume.
- Once the reference and police checks have been completed and the results are favourable, the volunteer is contacted to arrange a date for orientation and to process a placement (based on job description).
- Volunteer position descriptions can be developed by the Volunteer Relations/HR Coordinator, a Director and/or a staff member and will include: duties of the position, timeframe, qualifications and reporting supervisor.

Screening of Students

- Students may be interviewed by the Volunteer Relations/HR Coordinator, a staff member, or a Director to determine the suitability of a placement within the organization.
- Potential students will provide:
 - ◆ An updated resume.
 - ◆ Placement Referral from a school, College or University.
 - ◆ Course outline description from the School, College or University they are affiliated with.
 - ◆ Insurance liability forms from their school.
 - ◆ A current Vulnerable Sector Check or Police Records Check (not older than 1 year).
 - ◆ Letter of Good Standing (when applicable).
 - ◆ Health related forms (if applicable).
- Students will be provided with a course outline description from the School, College or University they are affiliated with.
- All students will be assigned a supervisor/preceptor. The student and preceptor will refer to the course guidelines when developing and implementing their work plan.
- An Affiliation agreement with the school or agency shall be in place before the acceptance of a student.

Placements for Students with Disabilities

- The placement agency is required to provide reasonable accommodations in order for students with disabilities to complete placement requirements.
- In order for accommodations to be made students must formally disclose their disability prior to the allocation of a placement and consent to the release of necessary information to placement agency staff for the purposes of making adjustments.
- The Placement agency cannot make any adjustments unless the student has provided this information and consent within an appropriate timeframe.
- The Placement Agency Supervisor (along with the Placement supervisor) will:
 - ◆ in conjunction with the agency's or educational institution's Disability Support Services, ensure that an accurate assessment of the implications of the student's disability and the requirements of the placement are conducted;
 - ◆ in conjunction with the Program Convenor, identify the inherent requirements of the placement in relation to the course and the program;
 - ◆ in conjunction with the University's agency's or educational institution's, determine how the essential requirements of the course might be achieved while accommodating the needs of the student;
 - ◆ take account of the particular needs of the student in the selection of the placement agency and the arrangements made;
 - ◆ ensure that implications for OH&S, duty of care and legal liability particularly in the context of Anti Discrimination, AODA, OH&S and Privacy legislation are assessed.
 - ◆ The educational institution and the placement agency have a right to refuse a placement if either considers that there is a danger to the student, fellow workers or clients of the agency; and
 - ◆ ensure that any additional support mechanisms or review/monitoring processes that may be required are in place.



STUDENT AND VOLUNTEER ORIENTATION AND TRAINING

PURPOSE

Volunteers and Students will receive an orientation and training to the organization to provide an understanding of the culture and operation of the Centre.

POLICY

- Volunteers and Students will receive an orientation to the organization based on the program and/or placement requirements. Welcoming new volunteers and students is everyone's responsibility.
- Orientation requirements may vary depending on the position and time commitment of the placement with the organization.
- A full orientation will be completed when the placement is a minimum of 40 hours in duration.
- Orientation will be provided by the Volunteer Relations/HR Coordinator.
- Training and support for each specific position will be provided based on program/site requirements.

PROCEDURE

- The Volunteer Relations/HR Coordinator will schedule a general orientation for volunteers and students based on availability and potential start date of placement.
- The general orientation will, at a minimum, consist of:
 - ◆ Overview of the organization including Mission, Vision & Values
 - ◆ WECHC Policy Review
 - ◆ Occupational Health & Safety policies including WHMIS
 - ◆ Accessibility for Ontarians with Disabilities Act (AODA),
- All Volunteers and Students will be assigned a liaison or preceptor (employee/volunteer). The liaison/preceptor is responsible to provide job specific training. They will act in a supportive and supervisory capacity according to the needs of their position.
- The Volunteer Relations/HR Coordinator or student preceptor shall have primary responsibility for specific program and placement orientation and for the design and delivery of appropriate training.
- Volunteers and students are required to attend any training sessions necessary to fulfill their responsibilities.
- Orientation and Training may include items such as: IT Training, NOD Training (depending on the needs of the position).
- Volunteer Liaisons and Student Preceptors are responsible for encouraging their volunteers and students to improve their level of skills and knowledge throughout their placement.

- Volunteers/Students are encouraged to identify training needs and interests they may have to their supervisor/preceptor. Internal or external training opportunities will be provided when resources allow.
- The Volunteer Relations/HR Coordinator will ensure that the Volunteer/Student Orientation Checklist has been completed and filed to ensure that the required areas of orientation have been properly covered.
- Preceptors, Liaisons, Directors and Volunteers are encouraged to provide input into the design of orientation.

Make **change** happen,
volunteer!

STUDENT AND VOLUNTEER RE-ASSIGNMENT, DISMISSAL, RESIGNATION and EXIT INTERVIEW

PURPOSE

The purpose of this policy is to outline the circumstances under which reassignment or cessation of a volunteer or student placement may occur.

POLICY

- WECHC is committed to a productive, healthy and supportive environment for all students and volunteers and will administer equitable and consistent action for unsatisfactory behaviour, conduct, performance and/or attendance in the workplace.
- Cessation of a placement is an action taken by the employer and/or the volunteer or student to end the relationship.
- WECHC will ensure fair treatment of students and volunteers and respond to requests for reassignment in a prompt, uniform, and impartial manner, where programs and services allow.

PROCEDURE

- If a placement is not mutually satisfactory, either for the volunteer, the student, the liaison, the preceptor and/or the academic institution a reassignment to a different position or termination of the placement may be recommended.
- A decision to amend the current placement must be communicated to the Volunteer Relations/HR Coordinator and recorded in the volunteer's/student's file.
- Dismissal of a Volunteer or Student may occur as result of, but not limited to, the following:
 - ◆ gross misconduct or insubordination
 - ◆ being under the influence of drugs or alcohol
 - ◆ theft of property or misuse of agency equipment or materials
 - ◆ abuse or mistreatment of clients, participants or co-workers
 - ◆ breach of confidentiality
 - ◆ failure to abide by agency policies and procedures
 - ◆ failure to satisfactorily perform assigned responsibilities
 - ◆ absent without reasonable cause
 - ◆ unethical behaviour
- Any formal meetings will be documented in the volunteer or student's file and communicated to the appropriate individuals.
- Volunteers who intend to resign should provide notice of their departure to their Liaison and/or the Director of the program.
- Upon completion of a placement (student/volunteer), for any reason, all items of any kind created, used or given to the individual to conduct their work must be returned to their immediate Director, designate or the Human Resources department, prior to their departure.
- Where possible, an exit interview will be conducted by the Volunteer Relations/HR Coordinator to discuss why the volunteer is leaving, and any suggestions the volunteer may have to improve the position.

STUDENT AND VOLUNTEER SUPERVISION

PURPOSE

The purpose of this policy is to ensure that each volunteer and student who is accepted to a position with WECHC has an assigned liaison or preceptor that is responsible for support and management of that volunteer or student.

POLICY

- All volunteer and student placements shall begin on a trial basis to ensure that the student and volunteer assignment and the working relationship between the student, volunteer and the WECHC are mutually beneficial.
- A student will be assigned to a preceptor with relevant educational qualifications and experience.

PROCEDURE

- All volunteers and students will be assigned a liaison or preceptor. This will be the person to whom they go to for the information, support, and training. This person is also their first contact in the event of a problem or concern.
- Responsibilities of a volunteer liaison/student preceptor:
 - ◆ provide specific program training.
 - ◆ provide regular monitoring, ongoing evaluation and feedback.
 - ◆ maintain on-going communication as needed.
 - ◆ provide support and guidance.
 - ◆ be available for consultation and assistance.
 - ◆ completion of evaluations, monthly reports.
 - ◆ contact Volunteer Relations/HR Coordinator or Director to report any concerns with placement.
 - ◆ inform Volunteer Relations/HR Coordinator of any substantial changes in a position or status.
 - ◆ seek assistance from the Volunteer Relations/HR Coordinator if needed.
- The Volunteer Relations/HR Coordinator may contact the liaison, preceptor and/or volunteer to assess if the placement is mutually satisfactory.
- Placement of student/observerships can vary from four hours to one year. During this time students are evaluated on an ongoing basis in accordance with the requirements of the academic institution.
- A student that encounters issue(s) that prevent him/her from continuing in a clinical placement should speak with his/her preceptor and ask for additional training or support, or for reassignment if possible.
- If a preceptor has concerns about the performance of a student, verbal feedback should be provided as soon as possible. The Director and/or the contact person from the academic institution may also need to be contacted.
- If a volunteer or student is unable to come in when expected, he/she should inform his/her liaison/preceptor as soon as possible.
- If a volunteer or student has been injured a return to work plan will be discussed.

STUDENT AND VOLUNTEER APPRECIATION RECOGNITION

PURPOSE

The purpose of this policy is to outline how the Centre recognizes the contributions made by our students and volunteers through an informal and formal strategy.

POLICY

- WECHC values the service students and volunteers contribute to achieving our mission, vision and values.
- Recognition is the acknowledgement of an individual or team's behaviour, effort and/or accomplishments that support the Centre's Strategic Priorities, Operational Plan and Mission, Vision and Values to meet the needs of the clients and the community.

PROCEDURE

- Annual recognition activities for volunteers are organized by the Volunteer Relations/HR Coordinator (in consultation with staff and volunteers).
- Volunteers and students may be invited to attend events, training sessions or other informal program or department events organized by the WECHC.
- Staff responsible for volunteer supervision are encouraged and supported to undertake non-monetary and ongoing methods of recognition of volunteer service on a regular basis throughout the year.
- Volunteers and students will have access to WECHC common areas, property and materials necessary to fulfill their responsibilities as appropriate.
- Opportunities for education and training in the operation of any equipment will be provided to students and volunteers based on program requirements.
- Property and materials will be utilized only when directly required for WECHC's purposes.

STUDENT AND VOLUNTEER EVALUATION

PURPOSE

The purpose of this policy is to outline the procedure and practices for completing student and volunteer evaluations.

POLICY

- Volunteers and Students may be asked to participate in an evaluation of their performance based on the program and/or placement requirements.
- Evaluations will be constructive, supportive, flexible and empowering.

- Evaluation requirements may vary depending on the position and time commitment of the placement with the organization.

PROCEDURE

Volunteer Evaluations:

- The immediate supervisor of each volunteer will liaise with the volunteer, providing progress reports, notice of problems or concerns, and/or input regarding volunteer work performance on a regular basis/as needed or on request.
- Volunteers shall receive periodic verbal evaluation to review their work. This will assist the volunteer to achieve his\her goals.
- The volunteer supervisor will ensure that an annual review of the volunteer's placement takes place for those volunteers who continue their placement with the WECHC for longer than a year.
- The evaluation session is utilized to review the performance of the volunteer, to suggest any changes in work style, to seek suggestions from the volunteer on means of enhancing the volunteer's relationship with the WECHC, to convey appreciation to the volunteer, and to ascertain the continued interest of the volunteers performance of position responsibilities and a discussion of any suggestions that the volunteer may have concerning the position or project with which the volunteer is connected.
- Written notes documenting this discussion will be kept in the volunteer's file.
- It shall be the responsibility of each staff person in a supervisory relationship with a volunteer to schedule and perform periodic evaluation and to maintain records of the evaluation and to pass such records on to the Volunteer Relations/HR Coordinator.

Students

- Student evaluations will be completed in accordance with the requirements of the academic institution.
- In addition students may be requested to complete a WECHC evaluation of their placement.
- All documentation including learning contracts with the educational program and evaluations must be forwarded to the Volunteer Relations/HR Coordinator to be maintained in the student's file.



General Policies & Forms

Scope: These Policies apply to all students and volunteers of WECHC

BILL OF RIGHTS & RESPONSIBILITIES

for Clients

Every individual has the right:

1. **TO BE TREATED WITH COURTESY AND RESPECT** in a manner that fully recognizes their dignity and individuality.
2. **TO PRIVACY and CONFIDENTIALITY** in all matters.
3. **TO KNOW WHO IS RESPONSIBLE FOR THEIR CARE** and who is providing their treatment.
4. **TO BE INFORMED** of their medical condition, treatment and proposed course of treatment.
5. **TO PARTICIPATE** in making any decision and in obtaining other opinions in any aspect of their care.
6. **TO GIVE OR REFUSE CONSENT** to treatment, including medications, and to be informed of the consequences of giving or refusing consent.
7. **TO HAVE A DESIGNATE** in place to receive information concerning their care.
8. **TO HAVE ACCESS** to the information retained in their file, except when it is reasonable to believe that such access would result in a substantial risk to the physical, mental or emotional health of the client or harm a third party.
9. **TO BE AWARE** of the procedures for initiating a complaint.
10. **TO A SAFE AND SECURE SERVICE ENVIRONMENT.** Standards, certifications, inspections, procedures and best practices are in place and monitored regularly.
11. **TO REASONABLE ACCOMMODATION** (for persons with special needs or disabilities) in accordance with the law.

Every individual has the responsibility:

1. **TO TREAT OTHERS** with consideration, courtesy and respect.
2. **TO PARTICIPATE** with all caregivers in their treatment, rehabilitation and care planning.
3. **TO BE RESPONSIBLE** for all personal property and valuables while at the Centre.
4. **TO RESPECT** WECHC property and its contents.
5. **TO ABIDE BY** the Centre's rules and regulations, policies and procedures.

CONFIDENTIALITY

PURPOSE

To protect confidential information related to the community, clients, employees, students, and volunteers and the operation and affairs of WECHC in accordance with the applicable federal and provincial legislation and the standards of practice for the respective professional colleges.

POLICY

- WECHC Confidentiality Statement: All confidential information, whether it is developed by the employee during his/her period of employment or by others employed/engaged by or associated with the WECHC, is the exclusive property of the Centre and shall at all times be regarded, treated and protected as such.
- Confidential information includes information and facts relating to:
 - ◆ clients, employees, students, volunteers and individuals associated with the Centre;
 - ◆ the operation and affairs of the Centre.
- Confidential information shall not be disclosed to any person or used (other than as necessary in carrying out his/her duties on behalf of the Centre or as required by law, regulation, governmental body or court order) at any time during or subsequent to his/her period of employment/association with the Centre without first obtaining the consent of WECHC.
- All reasonable precautions shall be taken to prevent inadvertent disclosure of any such confidential information.
- Unauthorized/inappropriate access or distribution of information, which is considered confidential and private, by any individual representing the WECHC will not be tolerated.
- If it is discovered and confirmed that confidential or client information was knowingly accessed by an individual, it will lead to disciplinary action up to and including termination of employment, placement or service agreement.

PROCEDURE

- Confidentiality Agreements are signed by all individuals employed/engaged by or associated with the Centre and inserted into the appropriate file, i.e., Human Resource Record, Student, Volunteer, consultant or sub-contractor files.
- Unless used for Centre-related business, the Centre prohibits the use of the camera/video function on cellular telephones in the workplace as a preventative measure to secure client and employee privacy, and other confidential information.

**PRIVATE &
CONFIDENTIAL**

MEDIA RELATIONS

PURPOSE

To ensure the WECHC's message to the public is consistent with the Mission, Vision and Values of the Centre.

POLICY

- The WECHC aims to achieve, accurate, fair, understandable and timely communications with employees, students, volunteers, clients, and the community/public.
- A prompt, courteous and accurate response is the goal for information requests.
- Any contact with the media initiated by the Centre *must* go through the respective Director.
- Unless otherwise approved, only a Director will speak to the media on behalf of the Centre.
- When attending any community or program event, where media may be present, all employees, students, and volunteers must defer any media requests/questions to their respective Director or the Executive Director.
- Employees, students, volunteers and/or clients should not use the media for their own gain.

PROCEDURE

- Any and all questions/inquiries from the media (newspaper, magazine, radio, and television) should immediately be referred to the Executive Director (ED), or designate.
- The Executive Director will discuss any media request with the appropriate Director.
- Clients must sign a Media Release Consent form prior to being photographed and/or interviewed at any WECHC event or activity. The signed consent would be added to their EMR (Electronic Medical Records).
- All consents and photographs must be sent to the Human Resources department to be kept in the employee, student, or volunteer file.
- Communication/correspondence initiated by the Centre, e.g., articles for publication, public speeches and addresses about, or related to, the WECHC must be reviewed in advance by the Executive Director or his/her designate.



PROTECTION AND USE OF CENTRE RESOURCES

PURPOSE

To define expectations for the protection and use of Centre resources.

POLICY

- WECHC resources are valuable assets funded by taxpayer dollars via the Erie-St. Clair Local Health Integration Network (LHIN), Ministry of Health Long Term Care (MoHLTC) and other funders. These assets are owned and licensed by the Centre to conduct Centre business.
- Assets with a value greater than \$500 shall be tagged and inventoried in the Pervidi asset management software.
- Centre resources shall be insured for their replacement value. An annual review of insurance coverage is to take place to ensure appropriate coverage.
- Centre resources should be properly secured to prevent theft. Additional care must be taken for assets that are vulnerable to theft such as laptops, iPads, cellular devices and other assets of this nature.
- Resources are assigned based on availability and in accordance with the requirements of the specific position.
- Centre resources should only be used for legitimate business purposes and must be used appropriately, responsibly, efficiently and ethically. The Centre reserves the right to monitor and investigate usage of resources at its discretion. The use of Centre resources that is not in accordance with WECHC policies may result in corrective action up to and including termination.
- Personal use of Centre resources is prohibited except in the event of emergencies and/or with the permission of your Director. Any costs associated with the personal use of a Centre resource shall be reimbursed by the employee.
- Centre resources include, but are not limited to:
 - ◆ Computer systems;
 - ◆ Laptop computers and FOB (Frequency Operated Button);
 - ◆ iPads;
 - ◆ Telephones;
 - ◆ Cellular devices;
 - ◆ Identification badges;
 - ◆ Panic buttons;
 - ◆ Fax machines;
 - Photocopy machine;
 - Internet bandwidth including WiFi;
 - WECHC Logo/Letterhead.

Human Resources and Information Technology

Scope: These Policies apply to all students and volunteers of WECHC

CONFLICT OF INTEREST

PURPOSE

The purpose of the Conflict of Interest policy is to ensure employees, students, volunteers, vendors and contractors (hereinafter referred to as individual) act in the best interest of WECHC and perform their duties and arrange their personal and private affairs in such a manner that the public confidence and trust in the integrity, objectivity and impartiality of WECHC are conserved and enhanced.

POLICY

- A WECHC employee shall not engage in any private work, business undertaking or volunteer or community service:
 - ◆ that is likely to result in a real or potential conflict of interest;
 - ◆ that interferes with the individual's ability to perform his or her duties and responsibilities;
 - ◆ in which an advantage is derived from his or her employment as a WECHC employee;
 - ◆ in a professional capacity that will, or is likely to, influence or affect the carrying out of his or her duties as a WECHC employee;
 - ◆ that involves the use of WECHC premises, equipment or supplies.
- Confidential Information is any information (client, contract, technology or innovation) that is not available to the public and that, if disclosed, could result in loss or damages to WECHC or could give the person to whom it is disclosed an advantage.
- Relative or family member is defined as the employee's: spouse or same sex partner, child, step child, parent, brother, sister, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent, grandparent of spouse or grandchild, aunt, uncle, niece, nephew or cousin.

Conflict of Interest definition

A situation that has the potential to undermine the impartiality of a person because of the possibility of clash between the person's self interest and professional interest or public interest

CONFLICT RESOLUTION

PURPOSE

WECHC recognizes and supports the rights of all employees, students, volunteers, contractors, clients and vendors to have access to a collaborative and fair process to manage conflicts.

POLICY

- WECHC recognizes its responsibility to ensure the well-being, safety and dignity of all Individuals and is also committed to promoting an environment of mutual respect. It is a recognized right and responsibility of every individual to bring forward concerns with respect to the work and service environment where conflicts may exist in relation to:
 - ◆ harassment, discrimination or bullying,
 - ◆ interpretation or administration of a policy or procedure, and/or
 - ◆ interpersonal conflict.
- WECHC encourages individuals to problem-solve and work collaboratively toward a resolution where a conflict or perceived conflict exists. In instances where personal resolution is not achieved or possible, individuals should follow the conflict resolution process. Information shared during the conflict resolution process is confidential. Based on the severity of the conflict, corrective action up to and including termination may result.
- The Concern/Complaint Form is utilized to report and document the conflict. Documentation of the conflict is filed in the Human Resource file(s) of the individuals involved. In situations where internal resolution is not reached individuals will be offered an opportunity to participate in an external mediation process. This is a voluntary and non-adversarial resolution process.
- In addition to the practices outlined in this policy, an individual has the ability to file a complaint with the Human Rights Tribunal of Ontario under the prohibited grounds.
- The conflict resolution process is intended to be a respectful, safe and fair process where all parties can take part in the resolution of the conflict. Any reprisal or retaliation against an individual making a complaint in good faith is not tolerated by the Management or the Board of Directors. False or malicious accusations deliberately made against an individual or group may lead to corrective action up to and including termination.



DRESS CODE

PURPOSE

The purpose of this policy is to define the minimum expectations related to the dress code for those working at WECHC.

POLICY

- WECHC is a “Scent Free” environment and as such low scent/scent-free/unscented products should be worn.
- All employees, students and volunteers are expected to maintain an image of professionalism through appearance, grooming, and conservative clothing.
- WECHC reserves the right to implement additional regulations regarding dress code or regulations specific to particular departments, where client and staff safety is affected.
- No dress code can cover all contingencies; a certain amount of judgment must be used in the choice of clothing worn to work. Individuals who are uncertain about acceptable attire for work should consult their Director.
- In the event that a disability, religion or cultural tradition prevents an individual from complying with this dress code, WECHC will make every effort to accommodate unless the accommodation interferes with the safety of individuals. Individuals requiring accommodation should consult their Director.

PROCEDURE

This policy will be administered according to the following steps:

- Directors are responsible for monitoring and enforcing this policy in accordance with the philosophy and details of this policy.
- If questionable attire is worn while performing the work of WECHC, the Director will hold a personal, private discussion with the employee, sub-contractor, student or volunteer to counsel the individual regarding the inappropriate attire.
- If an obvious policy violation occurs, the Director may ask the individual to change, or go home and change his/her attire immediately.
- Repeated policy violations will result in corrective action, up to and including termination.

Employees, students and volunteers must ensure the following:

- Name badge provided by WECHC to be worn in accordance with the policy.
- Shoes appropriate for the type of work performed.
- Fingernails are clean with length appropriate for the job. Artificial nails of any kind are not permitted in areas that provide direct client care, provide lab services, prepare food or medications.
- Individuals wearing jewelry that may impact their safety, or the safety of other individuals may be asked to remove it.
- Attire needs to be neat and clean.

- Closed toe shoes are a requirement in a clinic setting.
- Any clothing displaying inappropriate or potentially offensive words, terms, logos, pictures, cartoons, or slogans will not be tolerated.

IDENTIFICATION BADGES



PURPOSE

All employees, volunteers, students, vendors, sub-contractors and other individuals associated with the work of the WECHC must be readily identifiable to clients and other employees. In addition, appropriate identification will assist in the overall building safety and security plan for all WECHC sites.

POLICY

- Each employee shall be issued a WECHC photo-identification badge at the time of hire.
- Identification badges are required to be worn at all times.
- Volunteers and other individuals who perform roles associated with the work of the Centre shall be issued WECHC identification badges.
- Students shall wear their student identification badges, approved by WECHC, or shall be issued WECHC identification badges if a badge has not been issued by the educational institution.
- All visitors to the premises of any WECHC location are required to wear VISITOR identification.
- All forms of identification that are worn or presented by individuals involved in the work of WECHC, to demonstrate association with WECHC, i.e., students, must be approved by the immediate Director, Human Resource Department, or Executive Director (ED).
- All WECHC issued badges remain the property of WECHC and must be returned when the employee, student, volunteer, contractor or vendor takes an extended leave of three (3) months or longer, or terminates his/her association with WECHC.

Volunteers

- Volunteers are issued identification badges by the HR department.
- When a volunteer is issued a WECHC identification badge, the badge shall identify him/her as a “volunteer”.
- Lost or damaged volunteer WECHC issued identification badges must be reported immediately to the HR department.

Students

- Students shall wear their student identification badges as issued by their affiliated educational institution during their placement hours at WECHC.
- Such identification shall identify the individual as a “student”.

- All student identification badges must be approved by WECHC. In the event that the student has not been issued an identification badge by the affiliated educational institution, the HR department will provide the student with a WECHC issued identification badge.
- Lost or damaged WECHC issued identification badges must be reported immediately to the preceptor of their placement, or the Director.

SMOKE FREE WORKPLACE

PURPOSE

The purpose of this policy is to address the WECHC's commitment to a smoke free environment.

POLICY

- The WECHC is a smoke free workplace and supports the mandate of the Smoke-Free Ontario Act, 2006 (as amended).
- No-smoking signs shall be posted at each entrance and exit.
- Smoking is prohibited in the area within a nine (9) metre radius surrounding any entrance or exit of all WECHC sites.
- WECHC employees will not smoke while visiting a client's home or in the presence of a client.
- No person shall smoke while inside any vehicle owned by or being used on behalf of the WECHC.
- WECHC provides assistance for those who wish to quit smoking by facilitating access to recommended smoking cessation programs and materials.
- WECHC acknowledges the reality that clients have the right to make unhealthy choices that affect their own lives, such as smoking and does not discriminate against clients or refuse service for making unhealthy choices. Instead, WECHC provides support and assistance to help clients find, understand and use health information to make sound healthcare decisions. Employees are role models for healthy lifestyle choices and should therefore not be smoking with clients or providing clients with cigarettes.
- Clients requiring home visits will be informed about the policy related to smoking during a home visit - they and/or any family members in the home are requested to refrain from smoking one (1) hour prior to and during the provision of services. Failure to comply may result in the termination of the home visit.



USE OF CELLULAR DEVICE

PURPOSE

The purpose of this policy is to outline expectations for the use of cellular devices in the workplace.

POLICY

- Employees, students and volunteers are expected to be respectful of others when using cellular devices (both Centre-owned and/or personal) in the workplace. Care must be taken to limit disruptions in meetings and the workplace.

PROCEDURE

- Conversations related to clients and/or the business of the Centre should take place in private, i.e., not in an elevator or a public space, as the conversation may be overheard jeopardizing the privacy and confidentiality of the information.
- Do not use cellular devices while operating a motor vehicle in accordance with the Distracted Driving Law (2009). The [distracted driving law](#) makes it illegal for drivers to talk, text, type, dial or email while using hand-held devices.
- Personal cellular devices (including texting) should not be used during work hours **except for** a personal emergency, health and/or safety concern.
- Personal cellular devices should only be used during breaks and/or lunches (except in the instances referred to above).
- WECHC is not responsible and will not be liable for the loss or damage of personal cellular devices brought into the workplace.
- Unless used for Centre-related business, the Centre prohibits the use of the camera/video function on cellular devices in the workplace as a preventative measure to secure client and employee privacy, and other confidential information.



Electronic Communication

PURPOSE

The purpose of this policy is to outline expectations for the use of electronic communications. Electronic communication includes and is not limited to faxing, email and texting.

POLICY

- It is the Centre's expectation that all electronic communication must be used appropriately, responsibly, and ethically ensuring privacy and confidentiality at all times, and limiting liability to the Centre, its staff, volunteers and students.
- Discretion and utmost care should be exercised when accessing or transmitting confidential or sensitive documents.
- The Centre's Internet access shall not be used for any illegal or unlawful purposes. Examples include, but not limited to the transmission of violent, harassing, discriminatory, offensive, defamatory, threatening, defrauding, pornographic, obscene or otherwise illegal or unlawful materials.
- All electronic communication messages and information transmitted by, received from, or stored on company systems are the sole property of WECHC.
- Privacy cannot be expected with respect to anything created, sent or received using WECHC electronic communication resources. I.e: email and texting
- Any violation of the terms of this policy constitutes misconduct and will result in disciplinary action up to and including termination.
- Access to WECHC Wi-Fi is for WECHC purposes only, it is not meant for public use.

PROCEDURE

- The employee's Director shall determine the requirement for access and use of Centre owned electronic equipment and access to electronic communication resources to conduct Centre business. Electronic communication resources include the following eg: cell phones, FOBs, laptops, rocket sticks
- Electronic communication resources are monitored to ensure the Centre is properly protected.
- Passwords must be safeguarded, as the registered user will be responsible for all actions completed under that password. The Information Technology department reserves the right to change the user's password to gain access to their account in the event of an emergency or absence.

Electronic Mail (E-Mail)

- Internal electronic mail is a secured source of data transmission. Sending an email from a WECHC email address to an external email address is **NOT** a secure source of data transmission'

- Sending an email from one WECHC email address to another WECHC address is considered secure.
- Within the internal e-mail system, sensitive and/or confidential information must be shared only with others on a “need to know” basis.
- Confidential or sensitive information regarding WECHC business, clients, employees, students, volunteers and others associated with the work of the Centre must not be shared with external e-mail addresses without the consent of the owner of that information and must be approved by the immediate Director or Executive Director.
- Personal information/client identification (e.g. name) should not be sent via email to external sources. Email is not a secure channel and should only be used in extenuating circumstances.
- When there are extenuating circumstances the provider will consult with their director to ensure all other communication options have been exhausted. The privacy officer may be consulted in these situations.

Fax Communication

- Faxing personal health information between health care providers and/or health care institutions is an acceptable method of communication
- When sending personal health information by fax a WECHC Fax Cover Sheet shall be used.
- Successful transmission of the information should be verified with the individual/organization receiving the information.
- Pre-set (“speed dial”) fax numbers should be utilized as much as possible to reduce the potential for faxes inadvertently being transmitted to the wrong number.

Electronic Communication with Clients (emailing and texting)

- Some clients request communication by email or text messaging.
- The provider is expected to discuss with the client the reason for the request. When there are extenuating circumstances the provider will consult with their director to ensure all other communication options have been exhausted. The privacy officer may be consulted in these situations.
- In the event the Director approves e-communication with the client, documentation in the client’s health record must be completed to indicate the client’s request and reason to utilize email or texting as a form of communication. The note must also indicate that the provider has discussed the risks to the clients PHI when using electronic communication and that email is not monitored on a regular basis.
- The content of the e-communication is to be limited to appointment scheduling, and will be performed during business hours only.
- Providers will NOT send health information to clients in emails/text messages.
- Providers will use WECHC cell phones to text clients under exceptional circumstances only.
- If the client wishes to communicate via text message, the appropriate box is selected on the Client Registration form and the form is signed.
- The client should sign a consent providing WECHC with permission to utilize email as a form of communication.

Computer Password Security

PURPOSE

The purpose of this policy is to establish a standard for the creation of strong passwords, the protection of the passwords, and the frequency with which password change is required to ensure the security (confidentiality and integrity) of the Windsor Essex Community Health Centre (WECHC) corporate network and information available on the network.

POLICY

Passwords are an important aspect of computer security. They are the first line of protection for user accounts. Passwords are used for various purposes at WECHC, some of the more common uses include: user level accounts, web accounts, email accounts, screen saver protection, voicemail password, and local logins. A poorly chosen password could result in a compromise of the WECHC corporate network.

Password Security

- All passwords are to be treated as sensitive, **Confidential** WECHC information.
- All WECHC employees, students and volunteers, as well as all contractors, sub-contractors, vendors and external agents with a personal workstation connected to the WECHC network are responsible for taking the appropriate steps to select and secure their passwords:
 - ◆ All system-level passwords (e.g., root, administrator, application administration accounts, etc.) should be changed on a semi-annual basis (some exceptions apply).
 - ◆ All user-level passwords (e.g., email, web, desktop computer, etc.) must be changed at least every forty-two (42) days. This is automatically requested through the existing server policy.
 - ◆ All user-level and system-level passwords must conform to the guidelines described below.
- Any employee found to be in violation of this policy may be subject to corrective action, up to and including termination of employment.
- Any contractor, sub-contractor, vendor or external agent found to be in violation of this policy may be subject to further investigation and possible cancellation of their contract based on the terms of the existing contract.

General Password Construction Guidelines

- Strong passwords have the following characteristics:
 - ◆ Contain both upper and lower case characters (e.g., a-z, A-Z);
 - ◆ Have digits and punctuation characters as well as letters e.g., 0-9, !@#\$%^&*()_+|~-=\`{}[]:~<>?,./);
 - ◆ Are at least fifteen alphanumeric characters long and is a passphrase (Ohmy1stubbedmyt0e);
- Passwords should never be written down, stored anywhere in your office or stored on-line. Do not store passwords in a file on ANY computer system (including a cell phone or similar device).
- Try to create passwords that can be easily remembered. One way to do this is create a password based on a song title, affirmation, or other phrase. For example, the phrase might be: "This May Be One Way To Remember" and the password could be: "TmB1w2R!" or "Tmb1W>r~" or some other variation. **NOTE:** Do not use either of these examples as passwords!

Password Protection Standards

- To ensure the security of passwords:
 - ◆ Do not use the same password for WECHC accounts as for other non-WECHC access (e.g., personal ISP account, benefits, etc.).
 - ◆ Do not share WECHC passwords with ANYONE, including co-workers, Management, the Information Technology (IT) Department, family members or friends.
 - ◆ Do not reveal a password over the phone to ANYONE.
 - ◆ Do not reveal a password in an email message or other forms of electronic communication. (Exceptions apply for temp passwords)
 - ◆ Do not talk about a password in front of others.
 - ◆ Do not hint at the format of a password (e.g., "my family name").
 - ◆ Do not reveal a password on questionnaires or security forms.
 - ◆ If someone demands a password, refer them to this policy and have them call their Director immediately.
 - ◆ Do not use the "Remember Password" feature of some software. This could allow your passwords to be compromised.
 - ◆ If an account or password is suspected to have been compromised, report the incident to your Director and work with them to change all passwords.
 - ◆ Automatic "cracking or guessing" may be performed on a periodic or random basis by IT. If a password is guessed or cracked during one of these scans, the user will be required to change it.



INFECTION PREVENTION AND OCCUPATIONAL HEALTH & SAFETY

Scope: These Policies apply to all students and volunteers of WECHC

BLOOD-BORNE, NEEDLESTICK AND BODY FLUIDS

EXPOSURE

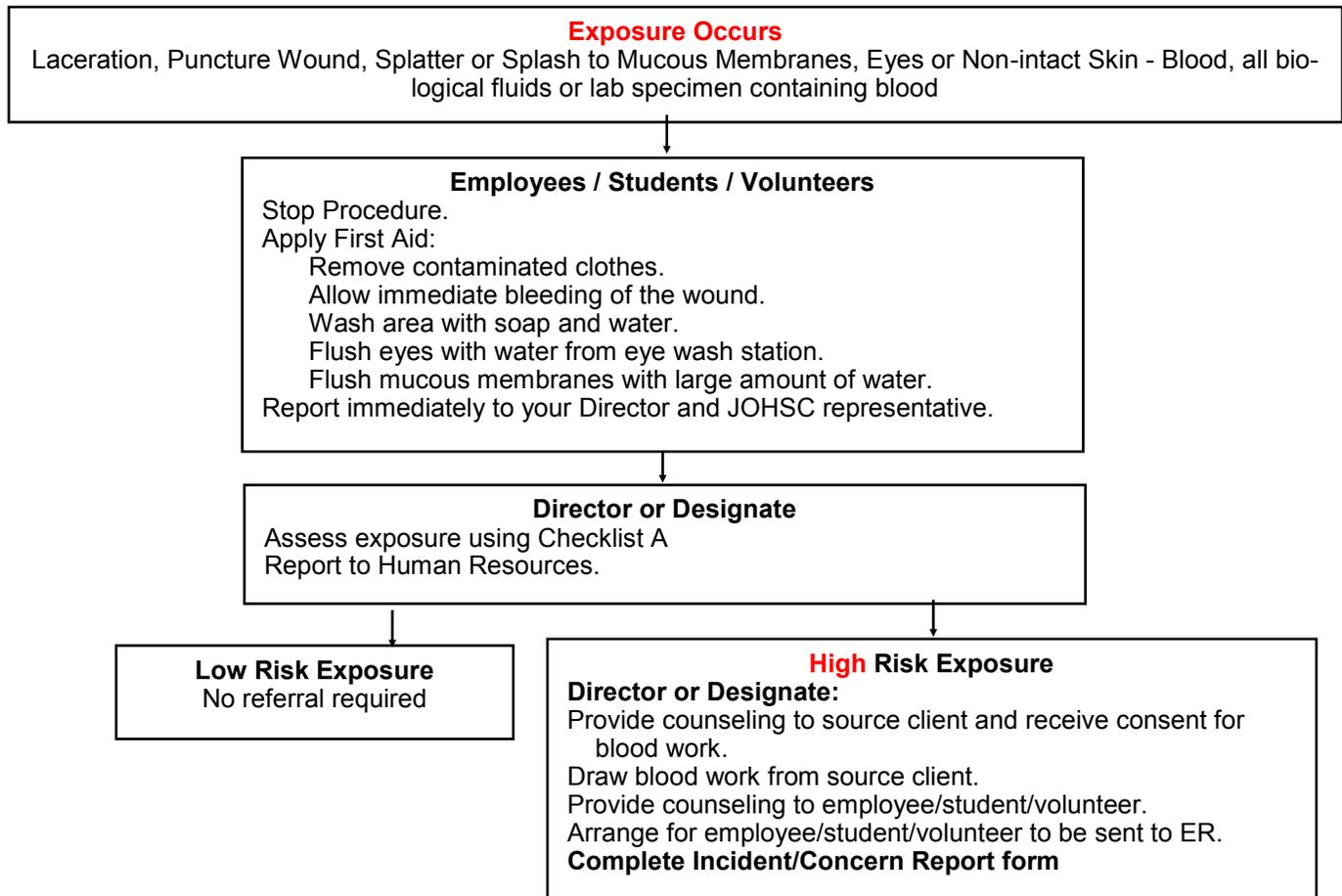
PURPOSE

The purpose of this policy is to prevent the transmission of blood-borne pathogens.

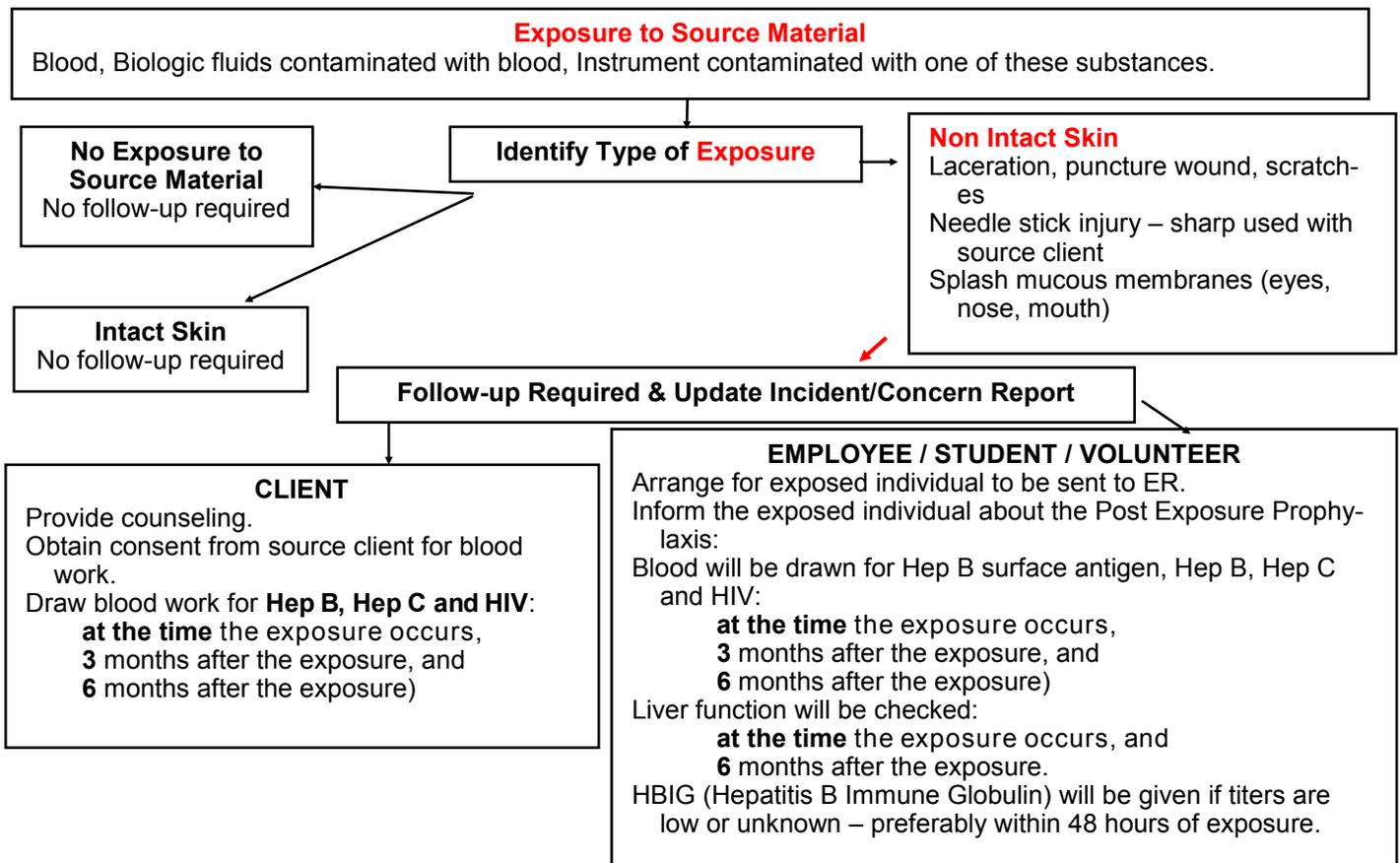
POLICY

- All employees shall follow routine practices and additional precautions at all times and report immediately in the event of an exposure. Primary care providers shall keep the clients' profiles updated and educate client/family on the risk of blood and body fluids exposure.
- Health care workers (HCWs) are encouraged to be vaccinated for HBV and provide the Human Resources department with documentation.
- At any encounter with the potential for blood or body fluids exposure HCWs shall:
 - ◆ Choose and wear personal protective equipment (PPE) located at the point of care, if necessary.
 - ◆ Follow procedures when preparing or administering injections, collecting laboratory specimens and performing venipunctures.
 - ◆ Place all sharps in the sharps containers and all soiled materials in the proper disposal unit.
- If a needlestick injury, blood-borne or body fluid exposure occurs, the incident must be documented on an Incident/Concern Report form. The HCW, student, volunteer or client will then be directed to seek further care from the nearest emergency department if applicable as per protocol.
- When a HCW has been potentially exposed to a blood-borne pathogen, consent to testing should be obtained from the client. If the client does not consent to be tested, the HCW may apply to the Medical Officer of Health who may make an order requiring the client to be tested to determine whether he/she carries a virus that causes a prescribed communicable disease.
- If the exposed HCW is not willing to be tested:
 - ◆ a written statement must be completed that is dated, signed and witnessed;
 - ◆ the client is not tested (when the exposed HCW is not tested, there is no value in testing the client source); and
 - ◆ counseling is provided for the exposed HCW about the risk of becoming infected and the implications for his/her behavior in the follow-up period.
- If a student, volunteer or contract worker suffers possible exposure to a blood-borne disease the Director and/or Human Resources must notify the respective school/agency that the individual has been exposed and that the agency/school is required to follow up on the case. If required, the Medical Officer of Health will provide advice.
- HCWs, students and volunteers will receive education during orientation and annually thereafter. The education will cover the prevention and management of exposure and will be documented in the human resource record.
- Refer to Resource Guide – Infection Prevention and Control for more detailed information.

Protocol to Manage Blood-Borne or Body Fluids Exposures



Checklist A - To Assess Exposure for Risk of Infection



CLIENT IMMUNIZATION

(pertains to clinical students)

PURPOSE

To prevent infectious disease through immunization and provide WECHC clients and community members with appropriate vaccines as recommended by the National Advisory Committee on Immunization (NACI).

POLICY

- WECHC is committed to promoting and delivering publicly funded vaccines and prescribed vaccines for preventable diseases to WECHC clients and community members through an outreach immunization program.
- The Centre promotes the Universal Influenza Immunization Program (UIIP) and is committed to delivering publicly funded seasonal Influenza vaccines to clients and community members. WECHC will partner with community stakeholders to immunize and promote Influenza immunization in the community through outreach immunization clinics and health promotion.
- All employees handling vaccines (ordering, transporting, and cleaning the vaccine fridge) will have access to educational resources to ensure the safety and efficacy of the vaccines is maintained.
- Regulated Health Professionals and students will receive information from the NACI guidelines regarding recommended vaccines.
- Vaccine preventable disease information will be provided for clients and community members to ensure they have the necessary information to make an informed decision including, but not limited to:
 - ◆ the importance of compliance with the immunization schedule,
 - ◆ awareness of adverse reactions that can occur,
 - ◆ when to seek assistance, and
 - ◆ how to manage possible expected minor reactions.
- If the client or substitute decision-maker refuses to give consent for the recommended immunization(s), a Refusal to Vaccinate form is completed, signed and filed in the client's health record. A copy of "Immunization Your Best Protection" (Ministry of Health publication) is given to the client/guardian.
- Refer to the Glossary of Terms and Resource Guide – IPAC.

PROCEDURES

Safety Measures

- Two health care providers will be available during immunization in case of an emergency. Emergency procedures and supplies including Epinephrine will be available at all immunization areas.

- Aseptic technique is utilized and used safety engineered needles and syringes are disposed in biohazard waste container (sharps).
- Vaccine Monographs, Immunization Guide and the Health Unit must be consulted to confirm the right immunization is given to the client.
- Vaccine fact sheet is given to client and substitute decision-maker prior to immunization.
- The parent or substitute decision-maker should hold a child with specific instructions on restraint positioning. Failed restraint can result in an inaccurate dose, inappropriate depth of injection or injury to the individual being immunized and/or the vaccine provider.

Vaccine Preparation

- Vaccines are stored in accordance with Public Health Guidelines and Vaccine Monographs. Most vaccines should be stored at **+2°C to +8°C** and should not be frozen.
- Vaccines should be administered using the recommended dose, route, site and schedule to optimize vaccine effectiveness and reduce the risk of local reactions or other adverse events.
- Before use, vaccine vials should be inspected for any irregularities, e.g., particulate matter, damage or contamination. The vaccine identification label and expiry date on the vaccine vial or package should be checked by the vaccine provider before administration. If only the month and year are provided for the expiry date, the vaccine can be used to the end of that month. Multi-dose vials should be labelled with the date of first entry into the vial and, unless otherwise specified by the manufacturer, should be discarded after 30 days.
- Vaccines requiring reconstitution, i.e., a lyophilized product that is mixed with a diluent, should be mixed only with the diluent supplied for the vaccine unless otherwise permitted by the manufacturer. Vaccines should be mixed with a careful swirling motion until a uniform suspension is achieved prior to administration.
- Ideally, a vaccine should be withdrawn from the vial by the vaccine provider administering the vaccine. Preloading syringes with vaccine is discouraged because of the uncertainty of vaccine stability in syringes, risk of contamination, increased potential for vaccine administration errors and vaccine wastage. However, to facilitate timely and efficient administration of a single vaccine to a large number of people in an immunization clinic setting, pre-loading of syringes may be considered.

Preparation for Vaccine Administration

- There are no contraindications to giving multiple vaccines at the same clinic visit, and all opportunities to immunize should be utilized. Giving multiple injections at one visit helps to ensure that children are up to date with the vaccines required for their age.
- A separate, sterile syringe should be used for each injection, and different vaccines should not be mixed in the same syringe unless specified by the manufacturer as part of the reconstitution and administration procedure.

- Safety engineered needle selection is based on the route of administration, individual's age, size of the muscle mass and viscosity of the vaccine. A larger bore needle (e.g., 22 gauge) may be required when administering viscous or larger volume products such as immune globulin.
- Vaccines and other biologic products are injected via ID, SC or IM routes. Immunogenicity is lower to hepatitis B and rabies vaccines if given in the buttock, probably because of injection into adipose tissue where the vaccine is not well mobilized.

Vaccine Administration

- Obtain consent from client or substitute decision-maker.
- Perform hand hygiene.
- Remove vaccine from fridge or cooler bag (return to fridge after use when multivial is used).
- Prepare vaccine.
- Clean injection site with alcohol swab and allow it to dry.
- Administer vaccine as per proper route.
- Dispose of safety needle and syringe, in sharps container.
- Assess site, apply cotton ball and tape.
- Perform hand hygiene.
- Record the immunization in the client's health record. The Personal Immunization Record card and vaccine fact sheet are given to the client for their personal records.
- Remind client or substitute decision-maker to remain in the clinic for at least 15 minutes after immunization.
- Assess site after 15 minutes and discharge client.
- Adverse events that occur following immunization are reported in accordance with the Adverse Events Following Immunization (AEFI) policy.
- In the event an error occurs during administration of a vaccine:
 - ◆ Assess client for signs of an adverse effect to the vaccine;
 - ◆ Report immediately to the primary care provider;
 - ◆ Call the Windsor Essex County Health Unit for guidance;
 - ◆ Provide the client with appropriate medical care;
 - ◆ Complete an Incident/Concern Report form.

HAND HYGIENE

PURPOSE

The purpose of the Hand Hygiene policy is to ensure the effective use of the **right** product in the **right** place at the **right** time to prevent the transmission of microorganisms throughout the continuum of care and to reduce the health care-associated infections.

POLICY

- The hand hygiene program, based on the most current national and provincial standards and best practice guidelines available, includes: administrative leadership, safety culture, education and training of employees, students and volunteers, procedures, education and engagement of clients, family, and community, system support, monitoring and evaluation and health and safety requirements.
- The WECHC has developed and implemented a training program for employees, students, and volunteers, which includes orientation and continuing education.
- Educational material such as the Hand Care Guide for Clients will be provided, explained and promoted throughout the Centre to the clients, family members and community programs.
- There is a budget to cover the cost of supporting the hand hygiene program within the Centre that includes purchasing, maintenance of dispensers and products.
- In order to evaluate hand hygiene practice, and ensure the sustainability of the program, audits will be conducted a minimum of once a year or more frequently based on results obtained or if new best practices become available.
- Refer to Glossary of Terms and Resource Guide – IPAC for more detailed information.



IMMUNIZATION AND SCREENING

PURPOSE

To prevent the transmission of infectious disease through immunization and screening for employees, students and volunteers with the recommended protection available against infections.

POLICY

- The WECHC supports and recommends that all employees, students and volunteers complete and maintain up to date immunization and screening. All screening and immunizations are to be performed as recommended by Public Health and by the individual's own health care provider.
- Hepatitis B immunization and Hepatitis B antibody titers are required for all employees who are responsible for cleaning and sterilization of equipment.
- All employees, students and volunteers are encouraged to receive the annual influenza vaccine.
- The Communicable Diseases - Immunization and Screening Form is used to gather pertinent information related to the history of infectious diseases, immunization and screening. The form is completed at the start of employment or placement and filed with the Human Resources (HR) department.
- Refer to the Glossary of Terms and Resource Guide – IPAC.

PROCEDURES

Health Records

- The HR Department maintains a health record for each employee, student and volunteer. All information in the health record is confidential and will be managed in accordance with the Centre's Confidentiality and Privacy policies.

On-going Screening

- TB Screening (TST) is recommended for employees, students and volunteers after unprotected exposure to a client with TB.
- Any blood borne pathogen screening is recommended and will be facilitated as part of follow up after a needle stick injury or mucous membrane exposure to blood and/or body fluid.

Occupational Exposure

- All documents relating to work related injury or exposure and subsequent treatment should be maintained as part of the individual employee, student or volunteer's health record (i.e., incident/concern reports) for their protection.
- The Infection Prevention and Control Committee (IPACC) and Joint Occupational Health and Safety Committee (JOHSC) will make recommendations regarding specific exposures or unsafe conditions to the Centre.
- All occupationally acquired diseases will be reported by the Centre to WSIB and the Ministry of Labour through the incident/concern reporting system.

- The Centre will provide educational resources, policies, equipment and supplies to protect the health of employees, students and volunteers from the risks of occupational exposure.
- Compliance with routine practices and additional precautions is mandatory

PERSONAL PROTECTIVE EQUIPMENT (PPE)

PURPOSE

Personal Protective Equipment (PPE) is used to prevent the transmission of microorganisms.

POLICY

- WECHC is committed to providing a safe and healthy work environment in accordance with the Occupational Health and Safety Act and Regulations.
- WECHC will provide educational resources, and sufficient supplies of PPE to prevent the spread of infectious disease(s) between clients, employees, students, volunteers and the community any time care or treatment is provided.
- The Director shall ensure that whoever is exposed to an occupational health hazard wears or uses the appropriate PPE - used alone or in combination to prevent exposure by placing a barrier between the infectious source and one's own mucous membranes, airways, skin and clothing. Selection of the appropriate PPE is based on the risk assessment (e.g., interaction, status of client and environment) that dictates what is worn to break the chain of transmission.
- Refer to Resource Guide – Infection Prevention and Control for more detailed information.

PROCEDURE

- HCW are responsible for observing precautions to prevent exposure to blood and body fluids, and when exposure occurs should inform their Director.
- If exposed or suffering from any known communicable disease, acute or chronic, all employees, students and volunteers are expected to take appropriate action to protect the health of others and their own health.
 - ◆ **Gloves** must be used to reduce the risk of exposure to blood, moist body substances, mucous membranes or non-intact skin and during environmental cleaning, decontamination and disinfection of medical devices when there is risk of exposure to chemical, corrosive and infectious substances. Gloves are task-specific and single-use for the task.
 - ◆ **Gowns** used as PPE should be cuffed and long-sleeved, and offer full coverage of the body front, from neck to mid-thigh or below. Long-sleeved, water resistant gowns are worn to protect the forearms and clothing of staff to protect from splashing and soiling from body substances. Gowns are recommended during routine client care activities in which this is likely to occur.

- ◆ **Masks** should be worn where appropriate to protect the mucous membranes of the nose and mouth during procedures and client care activities likely to generate splashes or sprays of blood, body fluids, secretions or excretions.
- ◆ **Eye protection** is used by HCW (in addition to a mask) to protect the mucous membranes of the eyes when it is anticipated that a procedure or care activity is likely to generate splashes or sprays of blood, body fluids, secretions or excretions, or within two (2) metres of a coughing client.

ROUTINE PRACTICE AND ADDITIONAL PRECAUTIONS

PURPOSE

To prevent and control the transmission of microorganisms in the WEHC.

POLICY

- Routine practices and additional precautions prevent and control the spread of infectious diseases in all settings where health care or treatment is provided.
- WEHC is responsible for ensuring training and educational resources are available, the three (3) levels of control that comprise routine practices (engineering, administrative and personal protective equipment [PPE]) are in place and additional precautions are being followed.
- Employees, students and volunteers are responsible for keeping clients, themselves and co-workers safe by working in compliance with routine practices and additional precautions.
- All clients will be screened for communicable diseases at each visit. **Active screening** involves the receptionist and/or HCW asking clients about possible symptoms. **Passive screening** involves signage at the entrance of the Centre that asks clients to self-assess and self-identify if presenting with symptoms of an infectious illness, to the receptionist.
- A risk assessment will be done before each interaction with a client and his/her environment and appropriate risk reduction strategies will be implemented.
- Audits will be completed annually to measure compliance with routine practices and additional precautions.



OCCUPATIONAL HEALTH AND SAFETY PROGRAM

PURPOSE

The purpose of this policy is to outline the Occupational Health and Safety (OHS) Program.

POLICY

- The goal of the OHS Program is to provide a safe and healthy work environment.
- WECHC is dedicated to the enforcement of its Occupational Health and Safety Policy. The WECHC Occupational Health and Safety Policy is reviewed and signed by the Executive Director (ED) on an annual basis and is posted on health and safety bulletin boards at each site and the WECHC website.
- The OHS Program for WECHC complies with the Occupational Health & Safety Act (1990) and regulations, reflects current research and best practices, and upholds the Mission, Vision and Values and Strategic Priorities of the Centre.
- The OHS Program includes the following elements:
 - ◆ Investing in OHS:
 - * resources are available to support the Program, i.e, educational resources, personal protective equipment, preventive maintenance, etc.;
 - * a designated Joint Occupational Health and Safety Committee (JOHSC) oversees the program;
 - ◆ OHS training and communication:
 - * orientation and ongoing training and education;
 - * posting information in accordance with the Occupational Health & Safety Act (1990);
 - * annual review of policies, procedures and safe work practices;
 - ◆ Keeping people safe:
 - * the ongoing recognition, prevention and/or control of hazards;
 - * development and implementation of safe work practices when required;
 - * Monthly workplace inspections.
 - ◆ Understanding and adhering to the obligations and responsibilities for OHS in accordance with the Internal Responsibility policy.
 - * Being prepared for emergencies - risk management processes to prevent/reduce the risk of emergencies and proactively plan for the possibility of an emergency.
 - * Evaluating our strategies - measure and monitor indicators to ensure the effectiveness of the OHS Program, i.e., monthly workplace inspections, incident/Concern reports, monitoring compliance with established policies and procedures;
- Refer to the Glossary of Terms and Resource Guide – OHS for more detailed information.



DOMESTIC VIOLENCE IN THE WORKPLACE

PURPOSE

The purpose of this policy is to outline the Centre’s obligations related to domestic violence in the workplace in accordance with relevant legislation and professional practice standards.

POLICY

- WEHC is committed to supporting individuals who are victim-survivors of domestic violence, and to creating a safe and supportive environment. WEHC will to the fullest extent possible take active measures to increase the safety of individuals who request assistance because they are victim-survivors of domestic violence. The requests for assistance will be confidential making information available on a “need-to-know” basis, as required by the particular circumstances and only to the extent necessary to ensure the safety of all individuals and in compliance with applicable legislation.
- WEHC recognizes that home and work issues cannot always be separated and domestic violence can impact greatly on the working life of someone who is being abused.
- WEHC will utilize early prevention strategies to avoid or minimize the occurrence and effects of domestic violence in the workplace – individual safety plans to manage the risk to the individual and workplace safety and security plan to ensure the safety of employees, students, volunteers, clients and the public utilizing the services of WEHC.
- Refer to Resource Guide – Workplace Violence for more detailed information.



HARASSMENT AND BULLYING IN THE WORKPLACE

PURPOSE

In compliance with Bill 168, “An Act to amend the Occupational Health and Safety Act with respect to violence and harassment in the workplace and other matters”, and Bill 132, the Sexual Violence and Harassment Action Plan”, the purpose of this policy is to foster a safe and healthy environment for employees, contractors, sub-contractors, students, volunteers, clients and the public utilizing the services of WECHC.

POLICY

- WECHC recognizes its responsibility to ensure the well-being, safety and dignity of all individuals and is committed to promoting an environment of mutual respect and a safe environment free from threats of harassment, and sexual harassment, or bullying as is reasonably possible.

PROCEDURE

- Harassment, sexual harassment, or bullying is considered inappropriate behaviour and all reported incidents of harassing or bullying behaviour are viewed as serious offences.
- WECHC recognizes that individuals may be subjected to harassment, sexual harassment, or bullying by clients or others with whom we conduct business or associate with in fulfilling our mandate. In these circumstances, the WECHC acknowledges its responsibility to do all in its power to support and assist the individual subject to such harassment or bullying.
- It is a recognized right of every individual to bring forward concerns with respect to the work and service environment where harassment, sexual harassment, and/or bullying of any individual is alleged.
- Individuals shall report incidents of harassment, sexual harassment, or bullying without fear of embarrassment or reprisal. Any reprisal or retaliation against an individual making a complaint in good faith is not tolerated by leadership or the Board of Directors. If the perpetrator is in a position of direct power over the complainant, the incident should be reported to another member of the leadership team.
- Every incident of harassment, sexual harassment, or bullying (real or perceived) is reported and documented to ensure that leadership is aware and in the event another incident occurs.
- In accordance with Bill 168 and Bill 132 repeated incidents or patterns of behaviour (regardless of whether or not they are resolved) that are intended to intimidate, offend, degrade or humiliate an individual or group of people becomes workplace harassment, sexual harassment, or bullying.
- WECHC will not tolerate harassment, sexual harassment, or bullying behaviour and will ensure that individuals are given an opportunity to seek a remedy through the various processes established.
- Each complaint will be investigated to determine whether corrective action is warranted, up to and including termination.

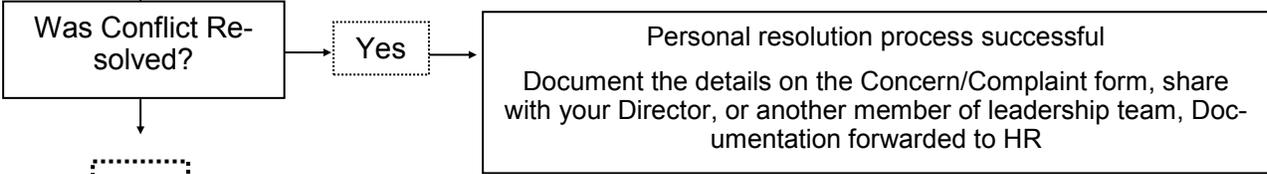
- False or malicious accusations can have serious repercussions on innocent individuals. The willful misuse of policy or deliberately made, false accusations is not supported by leadership or the Board of Directors. If, after an investigation, it is determined that a report of harassment, sexual harassment, or bullying is malicious in nature, corrective action shall be taken against the complainant up to and including termination.
- The WECHC understands how difficult it can be for an individual to come forward with a concern that harassment or bullying has occurred and is committed to maintaining confidentiality throughout the process to the greatest extent possible. It is recognized, however, that in some instances absolute confidentiality cannot be guaranteed. The individual against whom the complaint is made must be made aware of the allegations against him/her. All records of complaints, including contents of meetings, interviews and results of investigations are kept confidential except where disclosure is necessary for corrective action of an individual who committed the harassment or bullying, or other investigative procedures. Please refer to the process for reporting/addressing harassment/sexual harassment/bullying.
- All documentation of the complaint and the investigation of the outcome of the investigation are kept in a confidential file in Human Resources.

Reporting Harassment, Sexual Harassment, and/or Bullying in the Workplace

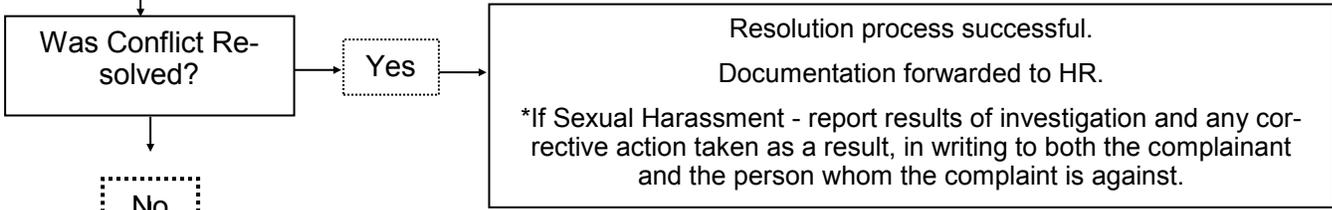
- All incidents of harassment, sexual harassment, and/or bullying in the workplace must be reported within twenty-four (24) hours or one (1) business day, and will be investigated by the Director and/or the Director, Corporate Services. Although there is no time limit to report a sexual harassment complaint against a person of power, it is encouraged to be reported promptly.
- Incidents/concerns of harassment, sexual harassment and/or bullying in the workplace will be managed in a way that is responsive to the immediate circumstances of the incident/concern, the rights of those involved, and the need to ensure that any risks of recurrence are minimized as far as possible.
- All reports and records of investigations of harassment, sexual harassment, and/or bullying in the workplace at WECHC will be kept for at least five (5) years after the employees have left the Centre.
- Sexual harassment – In the case of a complaint, a written response will be provided to the complainant and person whom the complaint is against informing them of the results of the investigation and of any corrective action taken.

PROCESS FOR REPORTING/ADDRESSING HARASSMENT/SEXUAL HARASSMENT/BULLYING

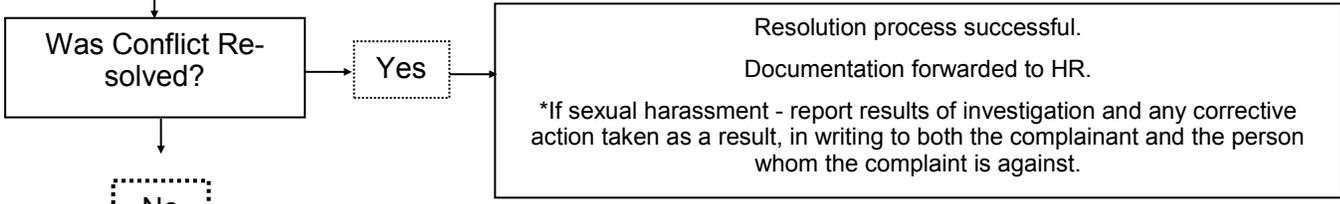
Personal Resolution – Speak with the individual(s) responsible when the harassment/bullying occurs and let them know that the behaviour is unwelcome and offensive and must stop.
 EAP should be considered throughout the process. If the person is a direct supervisor the complainant is encouraged to speak with another member of the leadership team.



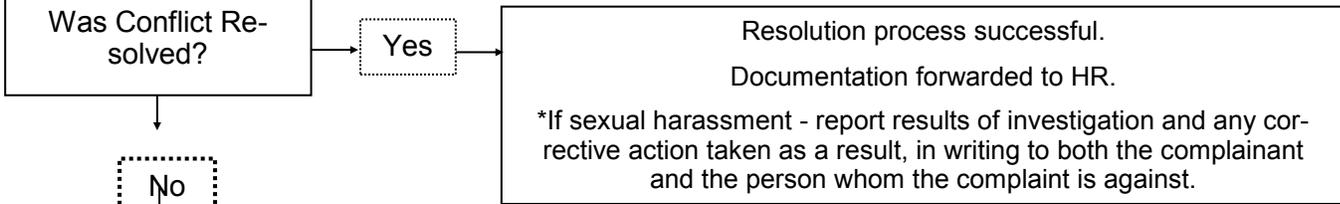
Immediately speak with your Director for guidance and/or HR to assist with facilitation and/or to review options to collaboratively resolve the conflict.



HR and/or respective Director will coordinate independent meetings within two (2) business days with individuals to investigate concerns and facilitate a resolution.



HR and respective Director and/or Executive Director will seek assistance from the *Board President, Vice President* or outside expertise as required to resolve the conflict within five (5) business days.
 Document the details on the Concern/Complaint form.



Mediation may be offered as a voluntary and non-adversarial resolution process within ten (10) business days following the date from the outcome above.
 Education, coaching and/or counselling may be required as part of the final resolution.

MANUAL LIFTING GUIDELINES

PURPOSE

To prevent injury (acute and/or chronic) to employees, students and volunteers as result of improper lifting techniques.

POLICY

- Employees, students and volunteers shall adhere to the guidelines outlined below when lifting.

PROCEDURE

RULES FOR SAFE LIFTING

Use the following acronym as a guide when engaging in lifting a client or an object:

- **Back Straight** - Discs can tolerate larger compressive loads when the back is straight. Discs are weaker when lifting in a flexed position. Maintain the spine's neutral curves. Keeps the spine aligned and moving smoothly. Minimizes stress on the spine.
- **Avoid Twisting** - Discs are weaker when lifting is combined with twisting. Joints are designed to prevent rotation. If you twist when you lift the joints become inflamed and sore.
- **Close to Body** - If the client or an object is at a greater distance from your body for lifting, your back muscles and joints have to work harder to lift the weight creating greater stress on your back. If you keep the exact same load close to your body, the lesser distance creates a lighter load and less stress on your back.
- **Keep Smooth** - Jerking increases the load on the discs.

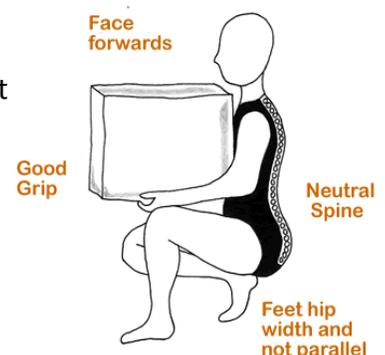
Proper Lifting Techniques

- Improper lifting technique can lead to back, leg and arm strain/pain. Poor technique can cause both acute injury, and serious chronic effects. Improper lifting techniques can result in injury to clients and employees.
- Utilizing carts, lifting devices or the assistance of another person should always be considered prior to lifting to avoid an injury.
- Completing an assessment before lifting a client or an object is important because it:
 - ◆ Helps to determine the risk for injury.
 - ◆ Promotes continuity of care.
 - ◆ Helps you to be prepared for possible risks.
 - ◆ Helps to minimize the risk of injury for the employee and the client.
- Assessing the weight of the client or object to be lifted is imperative to avoid injury. Employees should not lift anything weighing over fifty (50) pounds – the assistance of another person is required to avoid an injury.

- Plan ahead before lifting and knowing how much something weighs - Knowing what you're doing and where you're going will prevent you from making awkward movements while holding something heavy. Clear a path, and if lifting with another person, make sure both of you agree on the plan.
- Lift close to your body - You will be a stronger, and more stable lifter if the client or object is held close to your body rather than at the end of your reach. Make sure you have a firm hold on the client or object you are lifting, and keep it balanced close to your body.
- Feet shoulder width apart - A solid base of support is important while lifting. Holding your feet too close together will be unstable, too far apart will hinder movement. Keep the feet about shoulder width apart and take short steps.
- Bend your knees and keep your back straight - Practice the lifting motion before you lift the client or object, and think about your motion before you lift. Focus on keeping your spine straight - raise and lower to the ground by bending your knees.
- Tighten your stomach muscles - Tightening your abdominal muscles will hold your back in a good lifting position and will help prevent excessive force on the spine.
- Lift with your legs - your legs are many times stronger than your back muscles - let your strength work in your favor. Lower to the ground by bending your knees, not your back. Keeping your eyes focused upwards helps to keep your back straight.
- Avoid reaching over your head to prevent strain on joints located along your spine.
- Lift in stages if you need to. If the person or object slips, lower them gently to the floor while tightening your abdominal muscles and avoid rotation.
- If you think an object is too heavy, is over fifty (50) pounds or awkward in shape, make sure you have someone who can help you lift.

'Ground rules' for lifting safely and preventing back injuries.

- Bend your knees and get a good grip on the load.
- Keep your spine in a neutral position; in a mid position between flexed and straight, this lets the supportive abdominal muscles do their job more effectively.
- Keep your head up and chin slightly tucked, this will help you keep your spine nice and straight.
- Tighten your abdominal muscles.
- Lift the weight from your legs; don't lift from your back.
- Keep looking straight ahead and try not to twist and turn (move your feet)
- Put the object down by bending your knees while keeping your back in as neutral a position as possible



WORKPLACE VIOLENCE

PURPOSE

In compliance with Bill 168, “An Act to amend the Occupational Health and Safety Act with respect to violence in the workplace and other matters”, the purpose of this policy is to foster a safe and healthy environment.

POLICY

- WECHC will not tolerate workplace violence.
- WECHC recognizes its responsibility to ensure the well-being, health and safety of all individuals and is committed to taking every precaution reasonable in the circumstances to protect individuals in the workplace, including protecting them against the risk of workplace violence. This includes, but is not limited to:
 - ◆ ensuring all employees, students and volunteers are aware of and follow safety practices to prevent and respond to violent incidents;
 - ◆ training employees to diffuse or de-escalate difficult situations (Non-Violent Crisis Intervention training (NVCI) through the Crisis Prevention Institute (CPI)), and when police or other emergency response persons should be called;
 - ◆ advising individuals if there is a potential for violent behaviour in the course of work;
 - ◆ endeavoring to protect individuals when they are aware, or ought reasonably to be aware, that domestic violence may occur.
- Workplace violence is considered inappropriate behaviour and all reported incidents are viewed as serious offences.
- It is a recognized right of every individual to bring forward concerns with respect to the work and service environment where workplace violence is alleged.
- Individuals shall report incidents of workplace violence without fear of embarrassment or reprisal. Any reprisal or retaliation against an individual making a complaint in good faith is not tolerated by leadership or the Board of Directors.
- Every incident of workplace violence (real or perceived) is reported and documented to ensure that leadership is aware of the concerns.
- WECHC will ensure that individuals are given an opportunity to seek a remedy through the various processes established where such conduct exists. Each situation will be reviewed on a case by case basis to determine whether corrective action is warranted, up to and including termination.
- False or malicious accusations can have serious repercussions on innocent individuals. The willful misuse of policy or deliberately made, false accusations is not supported by leadership or the Board of Directors. If, after an investigation, it is determined that a report of workplace violence is malicious in nature, corrective action shall be taken against the complainant up to and including termination.
- WECHC shall endeavour to keep confidential all reported incidents of workplace violence, and involve only those necessary to resolve the issue.

- Under the Occupational Health and Safety Act, an employee can refuse to work if he or she has reason to believe they may be endangered by workplace violence. All work refusals will be dealt with on a case by case basis, including the potential for suspension of work during the investigation process.
- Refer to Resource Guide – Workplace Violence for more detailed information.

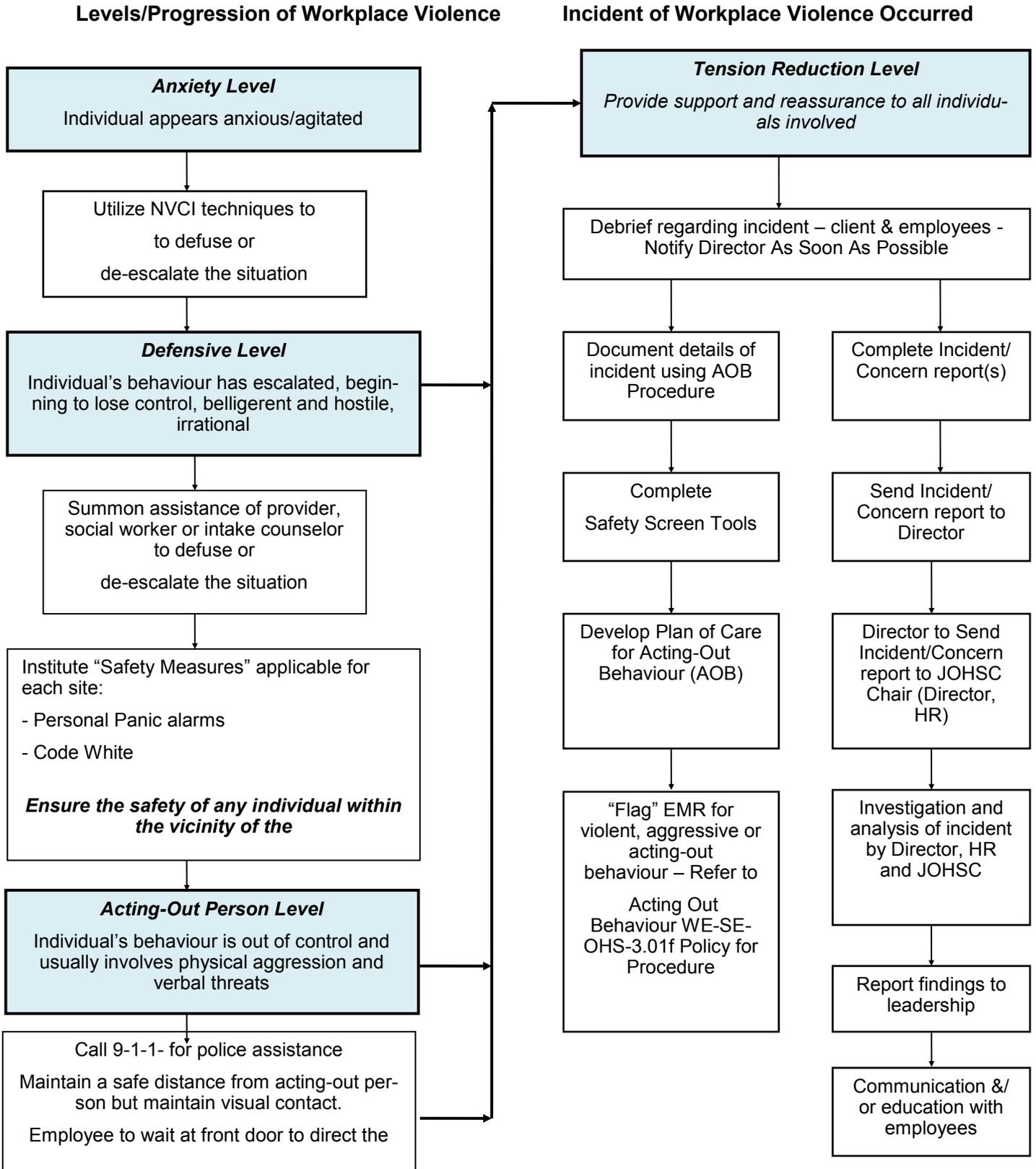
Reporting Workplace Violence

- All incidents of workplace violence must be reported within twenty-four (24) hours or one (1) business day, and will be investigated by the Director, the Director, Human Resources and the Joint Occupational Health and Safety Committee (JOHSC).
- Incidents/concerns of workplace violence will be managed in a way that is responsive to the immediate circumstances, the rights of those involved, and the need to ensure that any risks of recurrence are minimized as far as possible.
- All reports and records of investigations of workplace violence at WECHC will be kept for at least five (5) years after the employees have left the Centre.
- If the incident of workplace violence involved a client the EMR is “flagged” to alert employees to clients assessed as being at risk for acting out, aggressive or violent behaviour.
- A consistent “flag” in the EMR is utilized at all WECHC sites. The EMR is “flagged” by adding the word “white” in the alert section of the registration screen.



Zero
Tolerance of
Workplace
Violence

Appendix 'A' Procedures for Addressing Workplace Violence



Incident Management Process

PURPOSE

The purpose of the incident management process is to outline the reporting, documentation, investigation and analysis of incidents, concerns and near misses. This process will facilitate and support individual and organizational learning, as well as continuous quality improvement.

POLICY

- WECHC is committed to providing a *safe environment* and will take appropriate action in response to incidents/concerns which affect, or have the potential to affect, the health, safety or wellbeing of employees, contractors, students, volunteers, clients, and the public.
- Incidents/concerns must be appropriately reported and managed in a way that is responsive to the immediate circumstances of the incident/concern, the rights of those involved, and the need to ensure that any risks of recurrence are minimized as far as possible.
- WECHC acknowledges the four (4) principles that form the foundation for effective incident management – safe and just culture, consistency and fairness, team approach and confidentiality.

PROCEDURES

- It is the responsibility of all employees, students, and volunteers to immediately report any incident/concern, including near misses, to their Director and follow the incident/concern reporting process identified below.
- Incident management is a ***systems-based process*** exploring how and why the systems failed, or in the case of a near miss – how and why the systems succeeded, rather than just the actions of individuals.
- Refer to the Resource Guide – Incident Management for more details.

PREVENT the Incident from Occurring

- Policies, procedures and processes have been developed and implemented to prevent incidents from occurring, i.e., health and safety policies, infection prevention and control policies, etc.

PREPARE for an Incident Occurring

- The procedures to be used in the event of an incident occurring are outlined below and in the Resource Guide – Incident Management.

RESPOND to the Incident

- The first priority is to ensure the individual(s) involved is safe and that necessary steps are taken to support and treat the individual(s) and prevent injury to that person and others.

REPORT the incident

- In all instances, a Director or designate must be notified of an incident/concern and documentation submitted the day the incident/concern, or near miss occurs.
- Incidents must first be reported *verbally* to the Director or designate the day they occur.
- If the incident is of a serious/critical nature the Director will notify the Executive Director (ED), the Director Corporate Services, and the Joint Occupational Health and Safety (JOHSC) Chair.
- If the incident involves a work-related accident, injury or illness the Director will notify the Human Resources Department, as soon as possible.

INVESTIGATION , FACT-FINDING and ANALYSIS

- The Director or designate will review the incident/concern report and determine if further investigation or fact-finding is required.
- The Director, or designate will be responsible for facilitating, conducting, coordinating and reporting on the analysis, as required.
- If Director or designate determines that the initial investigation or fact-finding results require an in-depth analysis the steps outlined in the Resource Guide – Incident Management may be implemented.
- If the incident involves a client/family member the appropriateness/requirement for disclosure is determined by the Director or designate.

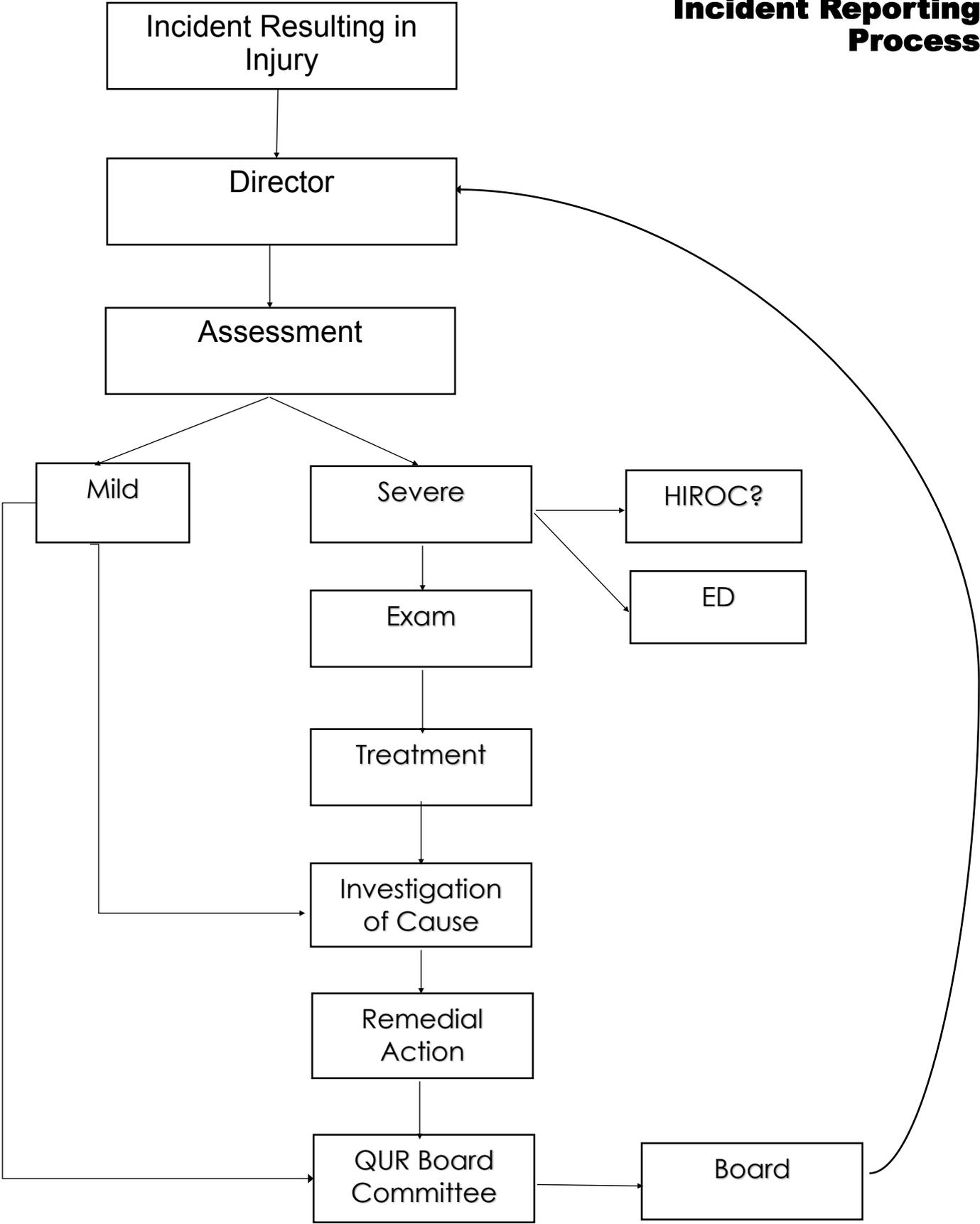
IMPROVEMENT and/or RECOMMENDATIONS

- Findings identified are reviewed and actions proposed to address the contributing factors to the occurrence of the incident.
- In some cases corrective actions may be simple and easy to implement, but in other cases the need for a quality improvement initiative may be identified.
- The effectiveness of the improvement initiative must be monitored to determine if the changes helped make the system safer.

SHARE THE LEARNING (Close the Loop)

- Sharing the learning is key to preventing additional harm and making care safer.
- Statistics related to incidents are maintained and shared quarterly with the JOHSC, Quality Excellence and Innovation (QEI), Quality, Utilization and Risk Committee (QUR), the Board and employees.
- The WECHC embraces the Canadian Patient Safety Institute (CPSI) Canadian Disclosure Guidelines and is committed to open, honest, respectful and effective communication between healthcare providers and their clients (and/or families), as required.

Incident Reporting Process



WECHC EMERGENCY CODES

RED	Fire Emergency 	If the fire alarm sounds, evacuate immediately to an area of safety outside the building.
BROWN	Severe Weather Emergency 	Take shelter as directed.
GREEN	General Emergency Evacuation 	Relocate as directed.
WHITE	Threatening Behaviour 	Follow directives of Code White Response team.
PURPLE	Intruder with Weapon Inside or Outside Facility 	Remain in a safe area and await further direction.
BLUE	Medical Emergency Adult 	Engage Code Blue Response by dialing 911.
PINK	Medical Emergency Baby/Child 	Engage Code Pink Response by dialing 911.
BLACK	Bomb Threat 	Remain in a safe area, avoid using electronic devices and await further direction.
ORANGE	Community Disaster 	Take direction as per the broadcast announcement.

EVACUATION PROCEDURES

You should familiarize yourself with the relevant process and codes immediately upon starting your position. Be aware of where fire and pill stations, fire extinguishers and emergency exits are located in the:

SITE EVACUATION AREAS	
Diabetes Wellness (2885 Lauzon Pkwy.)	Parking Lot
Leamington (33 Princess St., Suite 401)	Parking Lot
Pickwick Place (7621 Tecumseh Rd E.)	Parking Lot
Sandwich CH (3320 College Ave.)	Parking Lot
Street Health (711 Pelissier St.)	Side Parking Lot
Teen Health (1361 Ouellette Ave.)	Back Parking Lot

Accessibility for Ontarians with Disabilities Act, 2005 (AODA)

Accessible Customer Service Training

The purpose of this Act is to ensure that, by the year 2025, the Province of Ontario is totally accessible and barrier free for persons with disabilities. WECHC provides Accessible Customer Service training to volunteers, students and staff.



“How can I help you?”

This document is designed to provide an overview of the training required under the Accessibility for Ontarians with Disabilities Act, 2005 (AODA).

What is accessibility? It simply means giving people of all abilities opportunities to participate fully in everyday life.

The AODA is a law in Ontario that allows the government to develop specific standards of accessibility and to enforce them.

People with Disabilities:

- Did you know that just over 15.5% of Ontarians have a disability? That's 1 in every 7 Ontarians and as the population ages that number will grow.

What are barriers?

- A barrier is anything that keeps someone with a disability from fully participating in all aspects of society because of their disability. Barriers can be both visible and invisible.

Barriers may include:

- Attitude
- Architectural/Structural
- Information and communication
- Technology or
- Systemic.

The Purpose of the Accessibility for Ontarians with Disabilities Act:

- To achieve an accessible Ontario by 2025
- To develop accessibility standards
- To enforce the standards

The AODA applies to public, non-profit and private sectors.

Accessibility standards:

Ontario has accessibility standards in five areas:

1. Customer service
2. Employment
3. Information and communications
4. Transportation
5. Built Environment

Customer Service Standard (also known as Ontario Regulation 429/07)

- This standard is now law in Ontario.
- The standard requires that organizations have:
 - ◆ Accessible customer service policy, procedures and practices
 - ◆ Training for all individuals who interact with the public on their behalf
 - ◆ A Feedback method to address concerns/complaints
 - ◆ Alternative communication methods
 - ◆ Provide Notice of service disruptions in a timely manner



Principles of Accessible Customer Service

Services should be provided in such a manner that they promote:

- ***Dignity and Respect***
- ***Independence***
- ***Integration*** and
- ***Equal Opportunity***

Terminology is Important!

When referring to someone with a disability it is important that you put the person **FIRST!** It is proper to say “person with a disability”, rather than “disabled person”. Use “disability” or “disabled”, not “handicap” or “handicapped”.

- A person with a physical disability
- A person with a hearing impairment
- A person with a vision impairment

If you are assisting an individual with a disability and are unsure how to help,
your first question should be:

“How can I help you?”

Assistive Devices

An assistive device is a tool, technology or other mechanism that enables a person with a disability to do everyday tasks and activities such as moving, communicating or lifting. Assistive Devices can include wheelchairs, scooters, canes, walkers, braces, computer software programs, TTY machines, and many more.



Service Animals

Service animals accompanying persons with disabilities are welcome on WECHC premises unless the animal is excluded by law.



Under the Customer Service Standard, an animal is a service animal if it is readily apparent that the animal is used by the person for reasons relating to his or her disability, or if the person has a letter from a physician or nurse verifying that the animal is required for reasons relating to his or her disability.

Remember that a service animal is not a pet – it is a working animal. Avoid touching or addressing service animals. They are working and have to pay attention at all times. Avoid making assumptions about the animal. Not all service animals wear special collars or harnesses.

Support People

A support person is an individual hired or chosen to accompany a person with a disability to provide services or assistance with communication, mobility, personal care, medical needs or access to goods or services. The support person can be a paid personal support worker, volunteer, a friend or a family member.

It is the WECHC's policy that a support person, when assisting a person with a disability to access client services, will be permitted to attend at no charge where an admission fee is applicable.



Customer Service Tips

People with disabilities know if they need accommodations and will work with you. Just ask how you can help.

For additional information review the Government of Ontario Website: at <http://www.accesson.ca>.



To communicate by phone with a person with a hearing impairment, Bell Relay Service is available to placing or receiving calls to/from persons who use a TTY telephone. There is no charge for local calls. To place a call through the BCRS (Bell Canada Relay Service) call: 1-800-855-0511.

Book a Sign Language Interpreter through the Canadian Hearing Society at: 519-337-8307.

This resource is provided to assist you in delivering service to persons with disabilities. Speak to your Preceptor, Mentor, and/or Director if you would like additional information, or if you encounter a client who is having difficulty accessing our programs and services.

The table below provides tips for providing services for persons with disabilities.

<p>Vision Loss Definition:</p>	<p>Tips For Providing Service for Persons with Vision Loss</p>
<ul style="list-style-type: none"> • Most individuals who are legally blind have some remaining vision • Low or no vision can restrict ability to read signs, locate landmarks, or see hazards • May use guide dog or white cane • May need to view written documents in large print, or with a magnifier 	<ul style="list-style-type: none"> • Speak directly to the individual • Offer your elbow to guide • Walk at an appropriate pace for the environment • Identify landmarks, be precise • Let the person know if they have to walk up or down if you are guiding them towards stairs • Don't leave the person without letting them know • Let the person know your name • Don't touch or talk to a guide dog (remember it is working)
<p>Hearing Loss Definition:</p>	<p>Tips For Providing Service for People with Hearing Loss</p>
<ul style="list-style-type: none"> • Deaf - severe to profound hearing loss • Hard of Hearing - a person who uses their residual hearing and speech to communicate • Deafened – Hears poorly or not at all 	<ul style="list-style-type: none"> • Attract an individual's attention before speaking with a gentle touch on the shoulder or wave of your hand • Look directly at the person • Pen and paper are great ways to communicate • Speak clearly, keep your hands away from your face • Reduce background noise • Ensure appropriate lighting
<p>Culturally Deaf Definition:</p>	<p>Tips For Providing Service for People who are Culturally Deaf</p>
<ul style="list-style-type: none"> • The Deaf community is a healthy sociological community of Deaf people who have been Deaf since birth. They are cultural linguistic minority whose prime language is American Sign Language / ASL 	<ul style="list-style-type: none"> • Written English is a 2nd language and in complex situations an ASL Interpreter provides the best quality access for communications.
<p>Deaf-Blind Definition:</p>	<p>Tips For Providing Service for People who are Deaf-Blind</p>
<ul style="list-style-type: none"> • Cannot see or hear to some degree • Most individuals will be accompanied by a support person 	<ul style="list-style-type: none"> • Speak directly to your customer, not the support person • Identify yourself to the support person • Some may wish to take your hand and finger spell

Intellectual or Development Definition:	Tips For Service for Persons with Intellectual Disabilities
<ul style="list-style-type: none"> • Intellectual development is below average • Can mildly or profoundly limit ability to learn, communicate, do everyday activities and live independently • May be an invisible disability • They may understand more than you know 	<ul style="list-style-type: none"> • Don't assume what an individual can or cannot do • Use plain language • Take your time, be patient • Ask: "Do you understand this?" • Provide one piece of information at a time – step-by-step • Offer information in simpler concepts
Learning Definition:	Tips For Service to Persons with Learning Disabilities:
<ul style="list-style-type: none"> • Affects how a person acquires, interprets, retains or takes in information • In many cases the individual has average or above-average intelligence • May affect: language based learning, mathematics, writing, or fine motor skills 	<ul style="list-style-type: none"> • Take extra time, be patient • Demonstrate a willingness to assist • Speak normally, clearly and directly to the individual • Provide information in a way that works for the individual (i.e. pen and paper) • Be prepared to explain any materials you provide
Mental Health Definition:	Tips For Service for Persons with Mental Health Disabilities:
<ul style="list-style-type: none"> • The absence of psychological well-being and satisfactory adjustment to society • Some common features of mental health disabilities are: phobias, panic attacks, hallucinations, mood swings, or bipolar disorders (depression & manic phases) 	<ul style="list-style-type: none"> • Treat customer with the same level of respect and consideration • Be confident and reassuring • Do not be confrontational • If the customer is in crisis, ask how best to help • Take the individual seriously • Don't take things personally
Speech or Language Definition:	Tips For Service for Persons with Language Difficulties:
<ul style="list-style-type: none"> • May have problems communicating • May have difficulty to pronouncing words, slurring, or stuttering • May use communication boards or other assistive devices 	<ul style="list-style-type: none"> • Don't make assumptions • Give whatever time they need to get their point across • Ask questions that can be answered 'yes' or 'no' • Don't interrupt or finish the individual's sentences • May have to use pen and paper • Say: "I don't understand, can you repeat that?"

Physical or Mobility Disability Definition:	Tips For Service for Persons with Physical Disabilities:
<ul style="list-style-type: none"> • May restrict a person in the following ways: • Control or speed of movements • Coordination and balance • Ability to grasp same objects • Ability to walk long distances • Ability to sit or stand for prolonged periods • Can be present at birth, result from disease, injury or be temporary 	<ul style="list-style-type: none"> • Speak directly to the individual • Ask before you help • Respect the individual's personal space • Don't move any items they may have • Describe what you are going to do beforehand • Don't leave a person in an awkward, dangerous or undignified position

Accessibility for Ontarians with Disabilities Act (AODA), 2005 / Ontario Regulation 429/07

Accessible Customer Service Training Compliance Quiz

To ensure that the Windsor Essex Community Health Centre (WECHC) is meeting its obligations under the Accessibility for Ontarians with Disabilities Act, 2005, Ontario Regulation 429/07, please complete this quiz and return it to the Human Resources department for your human resources file.

Please circle the correct answer.

1. The Accessibility for Ontarians with Disabilities Act (AODA) was passed in what year:
 - a. 2000
 - b. 2003
 - c. 2005
 - d. 2011

2. When you are approaching a person with a disability and you are unsure if they need help, you should:
 - a. Go ahead and help them – if they don't like it, they will say so.
 - b. Ignore them until they ask for help.
 - c. Ask them "May I help you?"

3. Which of the following statements is always true?
 - a. Older people are all hard of hearing.
 - b. Avoid touching a service animal without permission.
 - c. Support people are paid employees of persons with disabilities
 - d. People who are blind cannot see anything

4. Which statement about persons with disabilities is true?
 - a. Their disability might or might not affect how they interact with you.
 - b. They all have assistive devices like a wheelchair or a hearing aid.
 - c. Their disability affects them with the same severity at all times.
 - d. All people with the same disability are affected in the same way.

5. If you need to communicate by phone with a person with hearing loss you can use the Relay Service. Their number is
 - a. 911
 - b. 411
 - c. 1-800-855-0511
 - d. 311

6. Some of the key areas of AODA where standards have been set include:

- a. Goods and services
- b. Employment and accommodations
- c. Facilities and buildings
- d. All of the above

7. The vision behind the Act is to achieve accessibility for Ontarians with disabilities by:

- a. 2020
- b. 2025
- c. 2035
- d. 2005

8. Accessibility Standards for Customer Service is also called Ontario Regulation 429/07

- a. True
- b. False

9. You have to shout when speaking to customers who are deaf, oral deaf, deafened, or hard of hearing.

- a. True
- b. False

10. Deaf-blind people usually travel with an intervener. When communicating with the client:

- a. **You have to speak to the intervener**
- b. **You have to speak to both of them**
- c. **You have to speak directly to the client**
- d. **None of the above**

Please Print Your Name: _____

Signature: _____ Date: _____

Department: _____ Date Training Completed: _____

Volunteer and Student Policies Quiz

Please complete the listed questions. The completed test is to be submitted to the Volunteer Relations/HR Coordinator for your file.

1. You can give interviews to the media regarding the Windsor Essex Community Health Centre and the volunteer work you are doing.
a) True b) False

2. You acquire an injury on site while on placement. You go home without reporting it to anyone in the organization. Have you followed the proper process?
a) True b) False

3. All students and volunteers are expected to maintain an image of professionalism through appearance, grooming and conservative clothing.
a) True b) False

4. Identification badges are not required to be worn at all times.
a) True b) False

5. WECHC is a smoke free environment.
a) True b) False

6. It is acceptable to use your cellular device to make calls, send text messages and update social media during placement hours.
a) True b) False

7. All electronic communication messages and information transmitted by, received from, or stored on company systems are the sole property of WECHC.
a) True b) False

8. Personal Information/client identification (e.g. name) can be sent via email to external sources.
a) True b) False

9. Hand Hygiene is not important.
a) True b) False

10. A risk assessment will be done before each interaction with a client and his/her environment and appropriate risk reduction strategies will be implemented.
a) True b) False
11. Harassment, sexual harassment or bullying is considered inappropriate behaviour and all reports are viewed as serious offences.
a) True b) False
12. False reporting of harassment, sexual harassment or bullying is not taken seriously.
a) True b) False
13. B.A.C.K is the acronym for safe lifting.
a) True b) False
14. WECHC will tolerate some forms of work place violence.
a) True b) False
15. You recognize your next door neighbour in the waiting room while on placement. You are encouraged to tell your family.
a) True b) False
16. A volunteer or student can be dismissed from their placement.
a) True b) False
17. All Volunteers and students will be assigned a preceptor or liaison/supervisor.
a) True b) False

Next Steps:

Complete the AODA Customer Service Training and WECHC Policy Quizzes and forward to Dodie Wilson at dwilson@wechc.org or print and submit at upcoming orientation.