

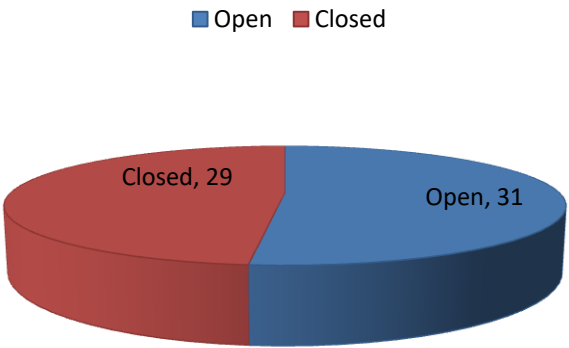
Location Status

Overdue Controls in this Location

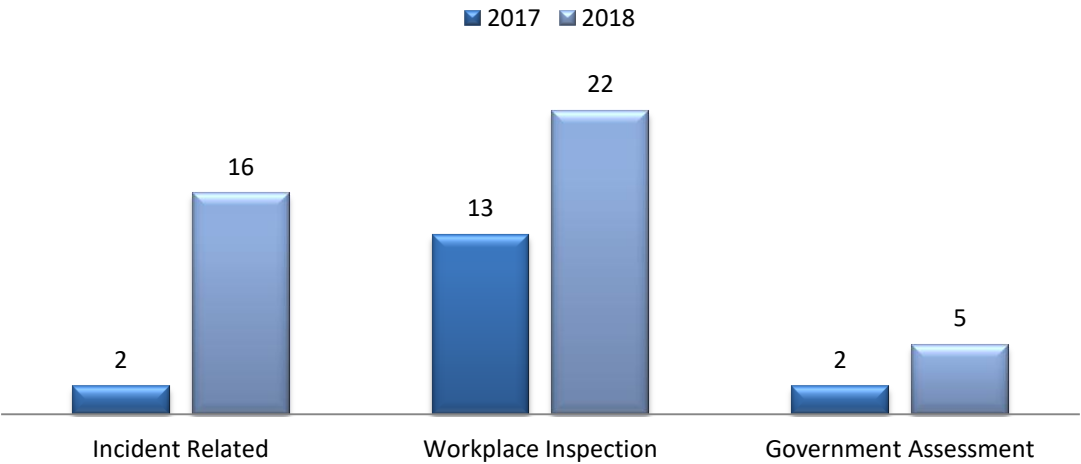
27

Range: Open vs Closed Controls for Location(s)

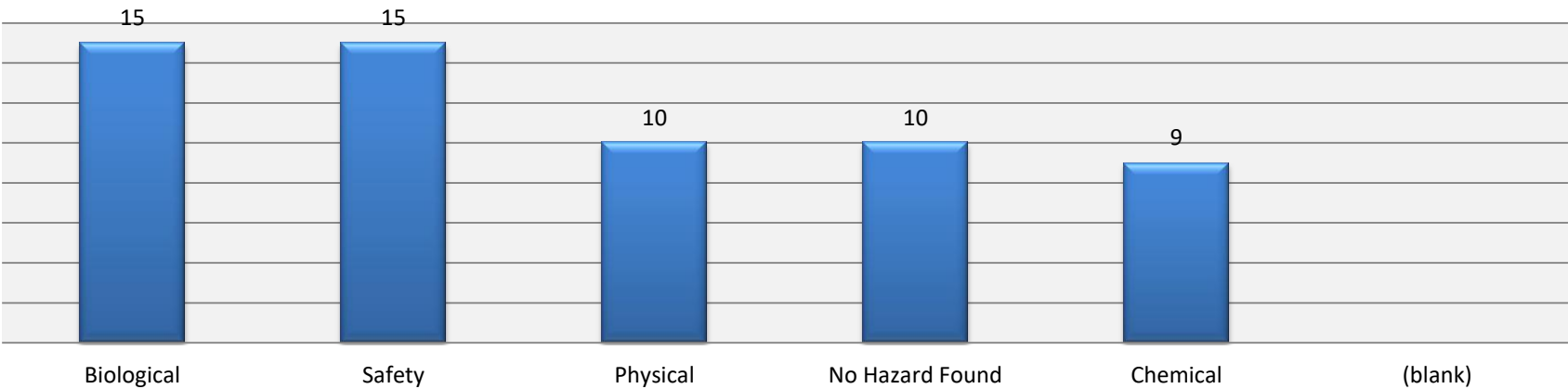
Jul-17
Dec-18



Assessments Conducted for Location in Date Range by Assessment Type



Hazard Types identified in Location



Location Status

Assessments Summary

Range:

Jul-17

Dec-18

| Count of Risk Date | | | | Asst Type | | | |
|--------------------|-----------------------------|-----------------------|------------------------|------------------|----------------------|-----------------------|-------------|
| Years | Location | Sub Location 1 | Sub Location 2 | Incident Related | Workplace Inspection | Government Assessment | Grand Total |
| 2017 | | | | 2 | 13 | 2 | 17 |
| | Admin Building | Floor 1 | Conference Room | 0 | 3 | 0 | 3 |
| | | | Human Resources | 0 | 1 | 0 | 1 |
| | | | Men's Washroom | 0 | 4 | 0 | 4 |
| | | | Room 101 | 0 | 1 | 0 | 1 |
| | | | Women's Washroom | 0 | 1 | 0 | 1 |
| | | | Room 103 | 0 | 1 | 0 | 1 |
| | Cardinal Carter Wing | North | Room 102 | 2 | 0 | 0 | 2 |
| | | | Administrator's Office | 0 | 2 | 0 | 2 |
| | North Building | H&S Policies | M&P 1 | 0 | 0 | 1 | 1 |
| | Arenas | Hanson Arena | Policies | 0 | 0 | 1 | 1 |
| 2018 | | | | 16 | 22 | 5 | 43 |
| | A Building | Floor 1 in A Building | Assessed room 1 | 0 | 3 | 0 | 3 |
| | | Floor 3 in a building | not assessed room f3r1 | 0 | 1 | 0 | 1 |
| | | | assessed room f3r1 | 0 | 1 | 0 | 1 |
| | Admin Building | Floor 1 | Men's Washroom | 0 | 2 | 0 | 2 |
| | | | Room 101 | 1 | 4 | 0 | 5 |
| | | | Room 102 | 0 | 6 | 0 | 6 |
| | | | Women's Washroom | 0 | 1 | 0 | 1 |
| | | | Room 103 | 2 | 2 | 0 | 4 |
| | | | Lobby | 1 | 1 | 0 | 2 |
| | | Floor 2 | Room 204 | 2 | 0 | 0 | 2 |
| | | | Room 205 | 0 | 1 | 0 | 1 |
| | | Floor 3 | Supply closet room 301 | 3 | 0 | 0 | 3 |

Location Status

| | | | | Incident Related | Workplace Inspection | Government Assessment | Grand Total |
|-------------|--------------------|----------------|---------------------------|---------------------|-------------------------|--------------------------|-------------|
| Years | Location | Sub Location 1 | Sub Location 2 | | | | |
| 2018 | Building 2 | Shuter Wing | Floor 2 | 1 | 0 | 0 | 1 |
| | West Park Hospital | 2EB - TB | Reception | 4 | 0 | 1 | 5 |
| | | | Resident Rooms | 1 | 0 | 3 | 4 |
| | | | 2EC - Functional Enhancem | Reception | 1 | 0 | 1 |
| Grand Total | | | | 18 | 35 | 7 | 60 |

Location Status

Overdue Controls in this Location

27

Dates in red are overdue open controls

Range:

Jul-17

Dec-18

| | |
|----------------|-------|
| Location | (All) |
| Sub Location 1 | (All) |
| Asst Type | (All) |
| JHSC | (All) |
| JHSC 2 | (All) |

| Count of Control Status | | | | Control Status | | Grand Total |
|-------------------------|---|---|------------------|----------------|------|-------------|
| Sub Location 2 | Hazard description | Recommendation | Control due date | Closed | Open | |
| Conference Room | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| | Patch of what appears to be black mold dfaafdafadfa | Contact safety to clean wall retyertw | 13-Jul-17 | 1 | 0 | 1 |
| | | | 15-Jul-17 | 0 | 1 | 1 |
| Conference Room Total | | | | 2 | 1 | 3 |
| Human Resources | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| Human Resources Total | | | | 1 | 0 | 1 |
| Men's Washroom | (blank) | (blank) | (blank) | 2 | 0 | 2 |
| | fdsafa | fdasfaf | 11-Aug-17 | 0 | 1 | 1 |
| | | fdsafa | 11-Aug-17 | 0 | 1 | 1 |
| | jhklhjkl | dfadfadad | 27-Oct-17 | 1 | 0 | 1 |
| | fgsgs | dafaa | 30-Apr-19 | 0 | 1 | 1 |
| Men's Washroom Total | | | | 3 | 3 | 6 |
| Room 101 | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| | No indicator that surface is hot. Staff can easily be burned. | Post bright sign that surface may be hot. | 25-Sep-18 | 1 | 0 | 1 |

Location Status

| Sub Location 2 | Hazard description | Recommendation | Control due date | Closed | Open | Grand Total |
|------------------------|---|---|------------------|--------|------|-------------|
| Room 101 | Bleach is left in open bucket with no lid creating toxic fumes to fill small closet. | Dispose of bleach safely and replace with new container with cap. | 25-Sep-18 | 1 | 0 | 1 |
| | describe the hazard | write the recommendation | 13-Nov-18 | 1 | 0 | 1 |
| | Broken sharps container... | Post a sign | (blank) | 0 | 1 | 1 |
| | | Make you recommendation here | 31-Jan-19 | 1 | 0 | 1 |
| Room 101 Total | | | | 5 | 1 | 6 |
| Room 102 | Shelving unit not affixed to wall | Affix shelving to wall | 4-Sep-18 | 0 | 1 | 1 |
| | | Leave sign warning people to not to use shelf until affixed to wall. | 4-Sep-18 | 0 | 1 | 1 |
| | Top heavy bookcase is not affixed to wall. This could fall over and crush someone. | Affix bookcase to wall | 28-Feb-18 | 1 | 0 | 1 |
| | | Put up a sign stating that bookcase is not to be used until further notice. | 28-Nov-17 | 1 | 0 | 1 |
| | Computer network cords are running loose across floor in front of storage closet. | Tape down cords | 8-Sep-18 | 0 | 1 | 1 |
| | Sharps container past fill line | Dispose | 12-Oct-18 | 1 | 0 | 1 |
| | | Post a sign | 12-Oct-18 | 0 | 1 | 1 |
| | | Replace | 12-Oct-18 | 0 | 1 | 1 |
| Room 102 Total | | | | 3 | 5 | 8 |
| Assessed room 1 | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| | Type in the description | Make their recommendation. | 15-Jul-18 | 0 | 1 | 1 |
| | | fdafda | 15-Jul-18 | 1 | 0 | 1 |
| Assessed room 1 Total | | | | 2 | 1 | 3 |
| Women's Washroom | (blank) | (blank) | (blank) | 2 | 0 | 2 |
| Women's Washroom Total | | | | 2 | 0 | 2 |
| Room 103 | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| | Staff put boxes of paper on top of light shelf which cannot handle wait and does not fit completely | Store paper boxes eslewhere on a low shelf. | 10-Apr-18 | 1 | 0 | 1 |
| | | Have shelving unit bolted to the wall. | (blank) | 0 | 1 | 1 |

Location Status

| Sub Location 2 | Hazard description | Recommendation | Control due date | Closed | Open | Grand Total |
|------------------------------|---|--|------------------|--------|------|-------------|
| Room 103 | Dust is accumulating in offices due to open window and construction and is affecting breathing. | Shut window and lock until construction is complete. | 28-Feb-19 | 0 | 1 | 1 |
| | Yoga ball and other exercise equipment is blocking emergency exit. | Relocate yoga ball and equipment. | 30-Nov-18 | 0 | 1 | 1 |
| Room 103 Total | | | | 2 | 3 | 5 |
| M&P 1 | Reviewed by the XYZ committee | (blank) | (blank) | 0 | 1 | 1 |
| M&P 1 Total | | | | 0 | 1 | 1 |
| Policies | Safety Policy #8855 | Review Safety Policy #8855 | 5-Aug-18 | 0 | 1 | 1 |
| Policies Total | | | | 0 | 1 | 1 |
| Administrator's Office | Bleach has spilled and bottle has no cap | Properly clean bleach and dispose of container | 17-Nov-17 | 0 | 1 | 1 |
| | | Install a chemical cupboard. | 30-Dec-17 | 0 | 1 | 1 |
| Administrator's Office Total | | | | 0 | 2 | 2 |
| Lobby | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| | Boxes left in the hallway risks staff tripping. | Remove boxes from hall. | 8-Jan-18 | 1 | 0 | 1 |
| Lobby Total | | | | 2 | 0 | 2 |
| Room 204 | Copy machine on the floor caused a slip trip. | Have engineering build a stand for copy machine. | 11-Jul-18 | 0 | 1 | 1 |
| | | Place an orange pylon in front of machine. | 30-Sep-18 | 0 | 1 | 1 |
| Room 204 Total | | | | 0 | 2 | 2 |
| Floor 2 | Staff member was recapping needles and pricked her finger. | Retrain employee on needle safety | 27-Sep-18 | 0 | 1 | 1 |
| Floor 2 Total | | | | 0 | 1 | 1 |
| Supply closet room 301 | Bleach is left in open bucket with no lid creating toxic fumes to fill small closet. | Replace bleach with one with lid | 24-Sep-18 | 0 | 2 | 2 |
| | | Put sign on wall reminding people to keep bleach in air tight container. | 26-Sep-18 | 0 | 1 | 1 |
| Supply closet room 301 Total | | | | 0 | 3 | 3 |
| Room 205 | In the corner near the closet there is some blood that has not been cleaned. | fdafa | (blank) | 1 | 0 | 1 |

Location Status

| Sub Location 2 | Hazard description | Recommendation | Control due date | Closed | Open | Grand Total |
|---------------------------------|--|---|------------------|----------|----------|-------------|
| Room 205 Total | | | | 1 | 0 | 1 |
| not assessed room f3r1 | (blank) | (blank) | 18-Jun-18 | 0 | 1 | 1 |
| not assessed room f3r1 | | | | | | |
| Total | | | | 0 | 1 | 1 |
| assessed room f3r1 | (blank) | (blank) | (blank) | 1 | 0 | 1 |
| assessed room f3r1 Total | | | | 1 | 0 | 1 |
| Reception | Area not accessible to the public, doors to unit are locked. Double entry to unit. emergency response in patients room activated to other rooms | Educate staff and provide practice opportunities around - Resident-centered care - Recognizing triggers that escalate behaviours - De-escalation and communication techniques | 19-Jun-19 | 1 | 0 | 1 |
| | | Implement risk-appropriate safety measures - Implement a sign-in process for visitors - Minimize staff working alone, and if they must, implement a personal alarm system - Implement protective barriers for workers at higher-risk, and to separate dangerous residents from other residents and the public - Ensure staff are aware of any restraining orders or visitation restrictions for residents, family members, or visitors - Make copies available at interdisciplinary team stations and visit | 14-Oct-18 | 0 | 1 | 1 |
| | | Educate staff on Code White and other relevant emergency procedures (e.g. lock down) and implement regular mock Code Drills | 23-May-19 | 1 | 0 | 1 |
| | | Implement regular security patrols | 14-Oct-18 | 0 | 1 | 1 |

Location Status

| Sub Location 2 | Hazard description | Recommendation | Control due date | Closed | Open | Grand Total |
|----------------------|---|---|------------------|--------|------|-------------|
| Reception | Area not accessible to the public, doors to unit are locked. Double entry to unit. emergency response in patients room activated to other rooms Open access to public. No panic button, Phone for security | Implement safety principles for reception, interdisciplinary team station, and waiting areas - Prevent unauthorized entry where possible, and have a secondary entry / exit point that is key card access controlled. - Implement layout giving staff direct line of sight / clear observation of residents, visitors, and public - Ensure height and depth of desk / counter provide adequate physical barrier between staff and public. Depending on level of risk identified, additional enclosure options | 14-Oct-18 | 0 | 1 | 1 |
| | | Educate staff on Code White and other relevant emergency procedures (e.g. lock down) and implement regular mock Code Drills | 23-May-18 | 0 | 1 | 1 |
| | | Assess the need to install an alarm system - e.g. personal or panic buttons | 23-May-18 | 1 | 0 | 1 |
| | | Reception Total | | | 3 | 4 |
| Resident Rooms | Rooms are isolated in this unit. Patients with dementia and mental health issues.Doors are usually closed | Implement a check-in / check-out as well as buddy system for co-worker safety awareness | 17-May-18 | 1 | 0 | 1 |
| | | Consider fixed or personal safety alarms with secondary notification features such as audible alarms that also initiate flashing light on outside of patient room | 17-May-18 | 0 | 1 | 1 |
| | | Educate and train staff on Code White (including the role of security) and other relevant emergency procedures (e.g. lock down), and implement regular mock Code Drills | 17-May-18 | 1 | 0 | 1 |
| | | Post clear signage for - Code of conduct and expected behaviours (make staff aware of sanctions) - Organizational policy on workplace violence | 17-May-18 | 0 | 1 | 1 |
| Resident Rooms Total | | | 2 | 2 | 4 | |
| Grand Total | | | 29 | 31 | 60 | |