

LOCAL LEADERSHIP: OH&S REPRESENTATIVE



INFORMATION & RESOURCE GUIDE



**SASKATCHEWAN
UNION OF NURSES**

Hello there!

Welcome...

... and thank you for taking on such an important role in your Local!

The cornerstone of SUN's strength, solidarity, and organizational health is you, our local leaders - and taking on ***the role of the Local OH&S Representative is no small feat!***

Enclosed you will find processes explained, helpful tips and resources to support you in your position. All the resources noted are available on SUN's website to download, save and work from.

If at anytime you need assistance, do not hesitate to call SUN Provincial for guidance.

In solidarity,

Saskatchewan Union of Nurses

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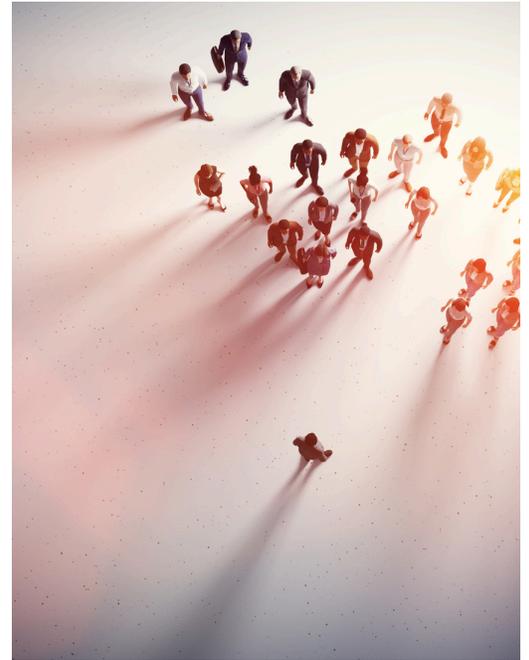
LEADERSHIP & SUPPORT

Defining Roles

At the core of SUN's strength is our elected leadership - it is their compassion for others, the dedication to protecting the professional and workplace rights of the members, and their commitment to ensuring the safety of patients, that makes our union strong.

How do we make our union stronger? We unite.

At each level of leadership, we each take on key components of providing member and union support and guidance. But with so many moving parts, it can be difficult to know whose job it is to take on which role. The following is a brief overview of key roles, that the Local, Board of Directors and SUN Staff play in addressing member concerns.



LOCAL EXECUTIVE

- Welcomes new members into SUN.
- Administers the affairs of the Local.
- First point of contact for member concerns.
- Conducts investigation into concerns raised by members.
- Conducts initial, informal meetings with Employer to resolve issues.
- Works with SUN Staff to escalate member concerns at appropriate stages.

BOARD OF DIRECTORS

- Responsible for the governance and finances of the Union.
- Sets the strategic direction of the Union on an annual basis.
- Sets key bargaining priorities for contract negotiations.
- Provides support and guidance to Locals regarding day-to-day functions of the Local.
- Maintains communication with the Locals they represent.

SUN STAFF

- Provides guidance to Locals regarding nursing concerns and day-to-day functions of the Local.
- Supports Locals in escalating members' concerns at the appropriate stages.
- Represents and protects the best interests and rights of members, with the Employer, at the appropriate stages.

LOCAL EXECUTIVE

Roles & Duties

The primary role of the Local is to provide member support.

The Local Executive is charged with the authority to administer the affairs of the Local and establish policies regarding the administration of the Local (as per Local Bylaws and the SUN Constitution and Bylaws). In addition, the Local is the first point of contact and support for their members.

The composition of each Local Executive is outlined in the Local Bylaws (Local Bylaw 6.01). Typically, executive roles include President, Vice-President, Treasurer, Secretary, and other committee chairs as required for the Local. In addition, depending on the structure of your Local, the Local NAC Chair and OH&S representatives may also be considered active members of your Local Executive.

In smaller Locals, it is common for roles to be combined such as a Secretary-Treasurer or President and Local NAC Chair. NOTE: The role of President and Treasurer, as per Canadian Revenue Agency (CRA) regulations, cannot be combined.

EXECUTIVE ROLES

The following is a guideline for determining the primary role of each position.

PRESIDENT

- Chairs all meetings of the Local, enforces SUN's Constitution, Provincial and Local Bylaws, and policies, rules and regulations enacted by the Union and the Local.
- Primary role is to provide members with advice about workplace issues and problems, to represent members' best interests when meeting with the Employer, and to supply information and answer questions about SUN.
- Responsible for conducting the initial investigation regarding member concerns/issues, and/or referring and escalating labour relations and practice concerns to SUN Staff as appropriate for support and guidance.
- Actively participates in low-level resolution meetings to address member concerns.
- Link between SUN Provincial and members in the Local.

VICE-PRESIDENT

- Assists the President in carrying out their duties and performs them in their absence.

TREASURER

- Responsible for all the financial affairs of the Local, which includes ensuring the Local has a bank account, depositing cheques, monitoring direct deposits, ensuring proper signing authority is in place, payment of approved bills, and recording all transactions.
- Provide financial reports at all Local meetings.
- Maintain financial records for seven years.
- Track and submit Local Request for Payment(s) (eg: local executive wages and/or honourariums)

SECRETARY

- Creates agendas in concert with the Local Executive.
- Keeps minutes of all meetings of the Local.
- Handles the correspondence of the President and Executive, keeps the Local's mailing list up to date and maintains contact with the SUN offices.
- Submits Local Bylaws to SUN Provincial.

LOCAL NAC CHAIR

- Actively participates in low-level resolution meetings to address professional practice concerns.
- Actively participates in initial NAC meetings with the Employer.
- Upon receipt of WSRs from members:
 - investigates the WSRs,
 - ensures the employer has received a copy,
 - submits a copy to SUN Provincial,
 - coordinates NAC meetings,
 - ensures minutes are taken and submitted to SUN Provincial, and
 - maintains a record of the disposition of the WSRs.
- Collaborates with SUN Provincial in the escalation of WSRs via the NAC Process within the Collective Agreement.

LOCAL OCCUPATIONAL HEALTH AND SAFETY (OH&S)

REPRESENTATIVE

- Represents SUN members at facility OH&S meetings.
- Participates in network OH&S committees & facility OH&S investigations.
- Identifies and controls safety hazards.
- Communicates OH&S concerns raised at the Local to SUN Provincial.
- Promotes OH&S education and knowledge in the workplace.

EXECUTIVE DUTIES

Within the role of the Local Executive there are a number of duties. To work effectively and efficiently, a Local Executive should divide the duties among their elected members, where appropriate. The following is a list of duties the Local Executive is responsible for.

ADMINISTRATION

- Review membership lists with SUN Provincial.
- Update Local Executive changes with SUN Provincial and Employer.
- Submit Local Bylaws annually to SUN Provincial.
- Take Local meeting minutes.
- Ensure Local election happens annually and follows process outlined in Local Bylaws.
- Track and maintain records for Local union leave forms and expense forms.
- Track and submit Local Request for Payment(s) (eg: local executive wages and/or honourariums)
- Authorize Local union leaves.
- Conduct frequent audits of Local dues reports from Employer.

COMMUNICATION

- Notify members of upcoming meetings and/or elections.
- Notify members of upcoming employer meetings.
- Provide members with agenda for upcoming meetings.
- Communicate employer information with members.
- Communicate concerns/issues to other levels of union.
- Share provincial communication with members.
- Meet with Local members to discuss resolutions submitted to Provincial Annual Meeting.
- Share Local concerns with BOD/Network Lead/Staff as appropriate.

FINANCES

- Maintain Local financial records.
- Conduct a yearly audit/review of the Local's financial records.

MEMBER SUPPORT

- Welcome new members.
- Escalate member concerns as appropriate.
- Listen to member concerns.
- Initial meetings with management.
- Initial grievance investigations.
- Directs members with benefits, Long Term Disability (LTD), or WCB claims/forms to contact SUN Provincial.

CONTRACT COMPLIANCE/LABOUR RELATIONS

- Ensure contract compliance in workplace.
- Review changes to employer policies for appropriateness.
- Review new employer policies for appropriateness.
- Review posting notifications for appropriateness.
- Review successful applicant notifications for appropriateness.
- Communicate posting concerns to SUN Provincial.
- Communicate technological changes to SUN Provincial.
- Communicate return for service agreements to SUN Provincial.
- Communicate layoff notices to SUN Provincial.
- Maintain records of consecutive weekend waivers.
- Maintain records of standby waiver.

NURSING ADVISORY PROCESS

- Submit WSRs to SUN Provincial.
- Submit NAC meeting minutes to SUN Provincial.
- Track and maintain records for WSRs filed, including meeting minutes.
- Initial Nursing Advisory Meetings.
- Escalate WSRs via NAC process.

OCCUPATIONAL HEALTH & SAFETY

- Maintain OH&S records and meeting minutes.
- Work to resolve members' safety concerns.
- Report to Executive on OH&S issues

WHEN YOUR LOCAL EXECUTIVE CHANGES

Whether it be following an election or when someone vacates a position, you are obligated to advise the following groups of changes to the Local Executive:

1. Your members
 - Post the new executive on your bulletin board or [private] social media group
2. SUN Provincial
 - Update your local executive on SUN Link or email database@sun-nurses.sk.ca
3. Your Employer
5. Your bank to update/change the signing authorities for the Local finances



WHAT IS OCCUPATIONAL HEALTH & SAFETY?

Occupational health and safety (OH&S) concerns health, safety, and welfare in the workplace. OH&S includes laws, standards, and programs aimed at improving the workplace for workers, co-workers, family members, patients, and other stakeholders.

Occupational health and safety is concerned with addressing many types of workplace hazards, such as:

- Chemicals
- Physical hazards
- Biological agents
- Psychological factors
- Ergonomic issues
- Accidents



Occupational health and safety standards are in place to mandate the removal, reduction, or replacement of job site hazards. OH&S programs should also include material that helps minimize the effects of the hazards.

Workplace safety is very important for each and everyone because all employees desire to work in a safe and protected atmosphere. Health and safety is the key factor for all industries in order to promote the wellness and well-being of both employees and employers. It is the employer's duty and moral responsibility to ensure the employee's protection.

The human suffering and financial loss caused by accidents and illnesses at work each year in Saskatchewan is tremendous. Accident statistics and their financial costs are set out in Saskatchewan Workers' Compensation Board (WCB) figures. Every statistic represents incalculable human suffering. The suffering of the injured is often intensified by the knowledge that most accidents are preventable.

OH&S involves more than simply correcting unsafe actions and conditions; it is about prevention, not blame and is not personal. The importance of an effective OH&S program should not be underestimated. It allows your workplace to systematically eliminate the possibility of accidents, illness, injury or fatality caused by workplace hazards.

Effective OH&S programs focus on:

- The promotion and maintenance of the highest degree of physical, mental and social well-being of workers.
- **The prevention of workplace violence and harassment.**
- The prevention among workers of ill health caused by their working conditions.
- The protection of workers in their employment from factors adverse to their health.
- The placement and maintenance of workers in working environments that are adapted to their individual physiological and psychological conditions.
- The promotion and maintenance of a working environment that is free from harassment.

SASKATCHEWAN EMPLOYMENT ACT (SEA)

Health and safety in Saskatchewan workplaces is governed by The Saskatchewan Employment Act and regulations and applies to employers, supervisors, workers, self-employed persons, contractors, suppliers, and owners and requires everyone to work together.

Part III of the Act sets out general duties for occupational health and safety. It states **what** workplaces must do to comply with the minimum standards for occupational health and safety in Saskatchewan.

The **Occupational Health and Safety (OH&S) Regulations** set the standards for **how** workplaces must comply with the Act.

Codes of practice are documents that provide information that help an employer comply with certain parts of the regulations. Codes of practice are guidelines based on best practices in the industry at the time of publication. The director of OH&S, after consultation with interested persons or associations, may issue, amend or repeal a code of practice.

MINISTRY OF LABOUR RELATIONS AND WORKPLACE SAFETY

The Ministry of Labour Relations and Workplace Safety (LRWS) encourages healthy, safe, and productive workplaces by setting, promoting, and enforcing employment and occupational health and safety standards outlined within the Saskatchewan Employment Act. The Ministry works with businesses, labour groups, workers, and other stakeholders to foster a positive labour environment.

OCCUPATIONAL HEALTH OFFICER

An Occupational Health Officer (OHO) enforces safety laws as per The Saskatchewan Employment Act, inspects workplaces, and identifies hazards to prevent accidents and injuries. They investigate incidents, ensure regulatory compliance in public/private sectors, and train staff on safety procedures.

SASKATCHEWAN HEALTH & SAFETY LEADERSHIP CHARTER

The purpose of the Saskatchewan Health & Safety Leadership Charter is to form the foundation for a cultural shift in the way Saskatchewan leaders view injuries and injury prevention. The Charter advocates for the continuous improvement of healthy and safe workplaces and communities. SUN is proud to have been one of the first organizations to sign the Charter at its inception in 2010.

SASKATCHEWAN ASSOCIATION FOR SAFE WORKPLACES IN HEALTH

Saskatchewan Association for Safe Workplaces in Health (SASWH) is a non-profit association, established on March 12, 2010, which is funded by healthcare employers through a portion of their Saskatchewan Workers' Compensation Board (WCB) premiums.

SASWH is governed by a Board of Directors representing health services workers, employers and unions with a vision to make workplace health and safety: a priority for all. This unprecedented, co-operative level of labour and management participation is critical to SASWH's success at eliminating injuries within the health care sector.

WORKSAFE SASKATCHEWAN

WorkSafe Saskatchewan is a partnership between the Saskatchewan Workers' Compensation Board and the Ministry of Labour Relations and Workplace Safety. Formed in 2002 out of a need to reduce the number of workplace injuries and fatalities, the partners work through an integrated provincial injury prevention strategy to deliver programs that move Saskatchewan towards zero workplace injuries.

WorkSafe is an advocate for Mission: Zero – an initiative that launched in 2008 by the partners in response to Saskatchewan having the second-worst injury rate in Canada. Mission: Zero is a call to action and goal for employers and companies to achieve zero workplace injuries, zero fatalities, and zero suffering by families.

Understanding Occupational Health & Safety in Saskatchewan: A Great Resource

While legislation should always be consulted for all purposes of interpretation of application of the law, roles and responsibilities, it can be confusing and difficult to comprehend. With this in mind, the Ministry of Labour Relations and Workplace Safety Occupational Health and Safety Division offers this great resource that is easy to read and provides you with a clear understanding of our rights, rules, roles and responsibilities in the workplace.



Download a copy:

<https://www.saskatchewan.ca/business/safety-in-the-workplace>



OH&S IS EVERYONE'S RESPONSIBILITY

A health and safety committee is a joint forum for employers and employees working together to improve workplace health and safety. Key to creating a safe workplace is that everyone in the workplace - both employees and employers - is responsible for his or her own safety and for the safety of co-workers. Those responsibilities are outlined in Part III of the Occupational Health and Safety Regulations.

EMPLOYEE RESPONSIBILITY

Employee responsibilities include the following:

- Understand and comply with legislation and workplace health and safety requirements.
- Follow safe work procedures.
- Use safety equipment, machine guards, safety devices, and personal protective equipment.
- Report unsafe acts and workplace hazards.
- Report incidents (meaning accidents and dangerous occurrences), injuries, or illnesses immediately.

- Work and act safely and helping others to work and act safely.
- Co-operate with the occupational health committee and others on health and safety issues.
- Refrain from causing or participating in the harassment of another worker.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/rights-and-responsibilities-in-the-workplace/duties-and-rights-of-workers>)

MANAGER AND SUPERVISOR RESPONSIBILITIES

Managers and supervisors act on behalf of the employer, therefore, have the responsibility to meet the duties of the Employer as specified in the Act and Regulations for the work they (the managers and supervisors) direct. The manager or supervisor must:

- Understand and ensure compliance with workplace health and safety requirements.
- Co-operate with the occupational health committee, ensure that it functions properly, and ensure all workers support committee members in their health and safety activities.
- Make sure hazards are identified and proper steps are taken to eliminate the hazards or control the risks.
- Inspect work areas and correct unsafe acts and conditions.
- Instruct and coach workers to follow safe work procedures.
- Ensure only authorized, competent workers operate equipment.
- Ensure equipment is properly maintained.
- Ensure the necessary personal protective equipment is provided to workers and used properly.
- Know how to safely handle, store, produce, and dispose of chemical and biological substances at the workplace.
- Understand and implement emergency procedures.
- Report and investigate incidents (meaning accidents and dangerous occurrences).
- Promote health and safety awareness.
- Co-operate with other parties in dealing with health and safety issues.
- Ensure that workers under their direct supervision are sufficiently supervised.
- Ensure that workers under their direct supervision are not exposed to harassment at their workplace.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/rights-and-responsibilities-in-the-workplace/duties-of-supervisors>)

EMPLOYER RESPONSIBILITIES

In addition to the responsibilities of a manager and/or supervisor, an Employer must:

- Provide a safe and healthy workplace.
- Establish and maintain an effective health and safety program and obtain input from the occupational health committee (OHC).
- Make sure that managers and supervisors are trained, supported, and held accountable for fulfilling their workplace health and safety requirements.
- Oversee the health and safety performance of their managers and supervisors.
- Make sure workers have the information, training, certification, supervision, and experience to do their jobs safely.
- Make sure medical/first aid facilities are provided as needed.
- Set-up effective occupational health committees.
- Co-operate with the OHC, occupational health and safety (OH&S) representative and other parties to resolve health and safety issues in a timely fashion.
- Keep OHC/OH&S representative meeting minutes on file and readily available.
- Ensure workers are not exposed to harassment in the workplace.
- Ensure that legal health and safety requirements are met.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/rights-and-responsibilities-in-the-workplace/duties-of-employers>)

SUPERVISORS IN HEALTH CARE FACILITIES

In addition to the obligations set out in the Saskatchewan Employment Act, Part 31 Section 3 of the Occupational Health and Safety Regulations, 2020 states the following requirements be adhered to concerning supervisors in health care facilities:

- The Employer shall appoint competent persons to supervise at the place of employment.
- The Employer shall ensure that every supervisor appointed is knowledgeable about, and experienced in the following matters that are within the area of the supervisor's responsibility:
 - safe work practices and procedures, including the use of engineering controls in use at the place of employment;
 - the safe handling, use and storage of hazardous substances;
 - techniques for safely mobilizing, lifting, holding, turning, positioning and transferring patients, residents and clients;
 - the handling, use, maintenance and storage of personal protective equipment;
 - the appropriate response to any emergency situation at the place of employment.
- The Employer shall ensure that every supervisor appointed is knowledgeable in the following matters that are within the area of the supervisor's responsibility:
 - the duties and responsibilities of all workers being supervised by the supervisor;
 - the training of workers under the supervision of the supervisor in safe work practices and procedures.
- The Employer who has appointed a supervisor shall ensure that all workers who are to be supervised by that supervisor are informed of the name of the supervisor.



THE RIGHT TO A SAFE WORKPLACE

All Employers are required to protect the health and safety of all parties at their work sites. All workers, regardless of number, also have health and safety rights and obligations. To protect workers from illnesses, injuries and diseases, workers are afforded three fundamental rights (included in the Saskatchewan Employment Act).

Those rights are:

- The right to know (about hazards).
- The right to participate (in health and safety).
- The right to refuse (unsafe work).

THE RIGHT TO KNOW

Every worker has a right to ask and be told about specific hazards in their workplace and how to control and handle them safely. A hazard is any activity, situation or substance that could harm a worker. You can identify hazardous materials by product labels, safety data sheets (SDSs) and worker education programs.

Every worker should be instructed about the safety precautions they need to take to protect themselves. New workers must receive orientation regarding health and safety in their workplace which, would include the hazards they may encounter in their work.

THE RIGHT TO PARTICIPATE

The right to participate ensures workers have an opportunity to help identify and correct hazards and participate in decisions that affect their health and safety at work. This right is best seen in the form of a Joint Occupational Health and Safety Committee or as an OH&S Representative in the workplace that has workers and managers working together to ensure the workplace is safe.

Every worker can participate in health and safety by reporting potential hazards and following safe work practices.

THE RIGHT TO REFUSE

In Saskatchewan, workers have a right to refuse work they believe, in good faith, to be unusually dangerous to themselves or others. An unusual danger could be:

- a danger that is not normal for the job;
- a danger that would normally stop work; and
- a situation that a worker isn't trained, equipped or experienced to deal with properly and safely

If a worker is being asked to perform a job they feel is dangerous, the **Part III - Section 31 of the *Saskatchewan Employment Act*** provides a way for them to exercise their right to refuse the unsafe work. A work refusal is initiated by the individual worker (not a group) and when initiated in good faith shall not result in discriminatory action by the Employer. Under the Act, workers who use their right to refuse are legally protected; an Employer cannot discriminate against, fire or discipline a worker who refuses to do unusually dangerous work.

The specific job or task(s) that have been identified as unusually dangerous cannot be reassigned to another individual unless they have been made aware of the refusal of work and have been advised of the process in place to fix the matter, to the satisfaction of the employee who refused the work.



SAFE STAFFING, OVERCAPACITY & THE RIGHT TO REFUSE

Safe nurse staffing involves maintaining appropriate, evidence-based nurse-to-patient ratios, skill mix, and experience levels to ensure high-quality care and patient safety. It is critical for reducing mortality, preventing burnout, and improving patient outcomes.

Inadequate staffing levels in healthcare has a direct impact on patient safety - but does it create unusually dangerous circumstances for the workers/nurses? Its not right and shouldn't be happening, but it is not a task that is creating the dangerous work.

In order to have the right to refuse a dangerous task or work , the safety threat or risk of injury must apply to the individual nurse or other workers. Danger to a patient or visitor cannot be addressed through the OH&S process.

Examples:

- Are you being asked to turn or lift a patient or resident without the proper equipment, training or staffing?
- Are you being asked to care for a patient or client that is known to be violent?
- Has an unsafe situation been inadequately addressed? Eg: Unsafe equipment not fixed or replaced, additional safety measures in place to manage violent patient/resident.



REFUSING UNUSUALLY DANGEROUS WORK

If your supervisor/employer asks you to perform a specific job or task that you have grounds to believe is unusually dangerous, follow these steps:

- 1 Tell your employer/supervisor that you are refusing work because of a health or safety concern.
- 2 Do not leave the worksite without your employer's permission.
- 3 Contact your occupational health committee (OHC) or OH&S representative if you cannot resolve the concern with the employer/supervisor.
- 4 Your OHC will investigate the refusal, meet and vote to determine if you have reasonable grounds to refuse the work. (The vote must be unanimous for or against the refusal.)
- 5 If the concern cannot be resolved within your workplace, contact an occupational health officer at the Occupational Health and Safety Division.
- 6 The officer will investigate the refusal and rule on the matter.
- 7 Your place of employment may have its own procedures for refusing unusually dangerous work. Ask your supervisor, occupational health committee, occupational health and safety representative, and/or union steward for information.



ROLE OF THE LOCAL OH&S REPRESENTATIVE

The role of the Local OH&S Representative goes beyond what is prescribed within the Saskatchewan Employment Act and Occupational Health and Safety Regulations for a workplace representative. You are the local's go-to person regarding health and safety process and play a key role in educating and guiding members effectively through the process, as well as taking an active role in finding appropriate, long-term solutions.

In addition to your role under the Act and Regulations, the role the Local OH&S Representative includes, but is not limited to:

- Reporting to Local President/Local Executive/Membership on OH&S activity – they may be able to provide you with additional information, guidance or assistance in addressing issues.
- Providing a channel of communication between the employers and workers.
- Conducting regular inspections and talking with workers about their health and safety concerns.
- Participating in reportable incident investigations (both accidents and dangerous occurrences).

- Assisting the employer with the development of safety procedures, policies, and programs.
- Meeting with the employer regularly to discuss concerns.
- Receive education and training regarding health and safety.
- Ensure members have access to OH&S education, policies, legislation.
- Ensure members are aware of process and location of Incident Report forms for reporting safety concerns or situations of potential or actual harm.
- Advise members of facility/Employer policies and protocols for a Code White.
- Receive member concerns regarding workplace safety.
- Confirm members utilize low level resolution to raise concerns with Employer and address matters in real time.
- Investigate and follow up on members concerns raised.
- Ensure members are fit-test for N95 respirators on an annual basis.
- Ensure members have access to the appropriate PPE and quantities required for pandemic situations.
- Ensure members have proper PPE training, including donning and doffing of PPE.
- Participate in OHC conversations concerning pandemic preparedness for workplace/region.
- Attend workplace Occupational Health Committee (OHC) meetings as scheduled.
- Present and provide recommendations to address member concerns or hazards identified to OHC.
- Develop and maintain local communication channels regarding OH&S.
- Provide OHC report during local meetings.
- Promote awareness of workplace safety and well-being.
- As a member of the OHC, participate in investigations and/or inspections as required.
- Ensure minutes from OHC meetings are posted in facility or on OH&S bulletin board.
- Refer matters to Local President (labour relations) and/or Local Nursing Advisory Chair (professional practice), as required.
- Seek guidance from Labour Relations Officer (LRO) at SUN Provincial, as needed.

TEAM APPROACH

Similar to how Local Executives are advised to function, the Local OH&S Representative is strongly encouraged to adopt a team approach to address member workplace safety concerns, in a timely manner. It is important to remember you are not alone. This can be an overwhelming list of duties for one person; but if you divide the work into smaller tasks, the job becomes less daunting.

To work effectively and efficiently, large or multi-site locals may choose to appoint additional OH&S representatives for the facility/agency. Such locals may also choose to hold Local OH&S meetings, whereby the elected Local OH&S Representative can meet with the appointed OH&S worksite representatives to discuss members concerns, potential hazards and actual risks to members and their colleagues, as well as develop recommendations and action plans to address the situation(s) identified.



A MEMBER HAS A CONCERN: NOW WHAT?

STEP 1: MEMBER/EMPLOYEE IDENTIFIES A HAZARD OR SAFETY CONCERN

When an issue is brought to your attention, you will need to determine if the issue requires immediate attention to ensure the safety of patients/clients and staff on the unit/in your workplace.

POTENTIAL HAZARDS

Once a safety concern has been raised, following up with the member will be key to ensuring vital steps in the process have not been overlooked. Follow up questions to ask the member include, but are not limited to:

- Has the member taken the appropriate steps?
 - Was there an attempt to find resolution at the Unit level (low level resolution)?
 - Was the Manager or designate provided adequate time to resolve the matter?
-

- Was additional documentation filed or process initiated? (eg. Incident Report/WSR filed or grievance filed)
 - If necessary, has the member provided a copy of the Incident Report or WSR to the Local?

IMMEDIATE RISK OR HARM

In situations where the safety of others is at immediate risk or has been impacted, the primary focus should be to address the incident, regardless of whether the employee is a SUN member or not. There are five (5) key steps to take in addressing emergent incidents:

- Report incident to immediate supervisor.
- Hazard removed/mitigated.
- Injury addressed, if necessary.
- Area or patient secured.
- Safety resumed.

When safety on the unit/in the workplace has resumed, ensure all necessary forms and/or reports have been completed – Incident Report, Injury Report, WCB Claim, etc.

If the issue was brought to your attention by a non-member, once safety has been resumed, advise the employee to report the incident to their Union OH&S Representative.

LISTENING TO & RECEIVING MEMBER CONCERNS

- Remind members of their obligations as they relate to HIPA.
- Avoid distractions (cell phone, busy location, rushed for time, etc).
- Remain engaged and unbiased in the conversation. Try not to personalize the issue or provide personal input – this may cloud your assessment of the issue.
- Take detailed notes and seek clarification of the facts concerning the issue; ask the member to state what they know to be true, not their perception of the matter.
- Clarify what actions/steps were taken prior to raising the issue with the Local.
- Has this issue been raised before (JUMM, NAC process, etc)?
- Are there other factors influencing the situation?
- What remedy is the member seeking to resolve the matter (if appropriate)?
- Advise member of your next steps – investigation and assessment; raise concern at Joint OH&S Committee meeting, etc.

STEP 2: INVESTIGATING THE ISSUE

To gain a better understanding of the incident or the member's concern(s) and/or in preparation for a Joint OHC meeting, where the matter will be formally raised, it is important that you have reviewed the issue with the member to seek additional clarification regarding the context in which the situation occurred.

The information gathered during your conversations with the member(s) will assist you in determining the best course of action to be taken, structuring your presentation to the Employer regarding the issue, preparing responses to Employer statements/positions and develop recommendations for resolution.

During this initial fact-finding stage, it is **crucial to confirm a significant attempt at low level resolution was made by the member(s)**. Missing this vital step may result in the matter being dismissed.

It is also important to stress that **HIPA must be maintained** at all times during your conversations and documentation of the issue. Remind the member to avoid providing patient specific information.

Information to consider during initial investigation:

- Name of members involved
- Contact information
- Member status
- Worksite or unit
- Issue presented/identified
- Date, day of the week, time and shift affected
- Management representatives involved
- Policies
- Past practices
- Patient impact
- Is this a trending or reoccurring issue?
- Relevant forms (Incident Reports, WSRs, etc.)
- Relevant documentation (emails, assignments/roster, communication book, unit meeting minutes, etc.)
- Evidence corroborating members concerns
- Notes from follow up/investigation with members
- Relevant previously settled disputes/WSRs
- Resolution sought by member

The above list is not an exhaustive list, nor would it apply to every scenario. To assist you in your investigation, a collection form has been developed for your convenience. (Appendix VII – OH&S Fact Sheet)

If at any time during your investigation, you believe or suspect there has been a **violation of the member's rights, a breach of the Collective Agreement**, or breach or change in application of Employer policy/procedure, **notify the Local President immediately** to further investigate the potential labour relations issue.

Alternatively, if your investigation leads you to believe or suspect the matter has an **impact on the nursing practice, safety of patients and registered nurses**, workload/staffing levels/patient acuity; or other factors which negatively affect patient care, **notify the Local NAC Chair immediately** to further investigate the potential professional practice issue.

STEP 3: RESOLVED OR UNRESOLVED?

Following discussions with their immediate supervisor/manager, was the safety concern raised resolved to the individual's satisfaction or was the matter left unresolved?

RESOLVED: Advise the Occupational Health Committee (OHC) of the situation and resolution at the next scheduled Committee meeting.

UNRESOLVED: The matter shall be forwarded to the OHC for further discussion and investigation.

STEP 4: JOINT OCCUPATIONAL HEALTH COMMITTEE MEETING

The Joint OHC is intended to be a collaborative problem-solving mechanism involving employees and the Employer working together to resolve workplace safety concerns raised by workers. Refer to the Saskatchewan Employment Act and Occupational Health and Safety Regulations for the roles and responsibilities of the Committee.

As the Local OH&S Representative, you will play an active role in presenting the safety concerns brought to your attention, as well as providing the Committee with recommendations for resolution.

Following the meeting, you are encouraged to update your Local President/Local Executive on the status of the issues raised and agreed to next steps or resolution.

Remember, if at any time during your preparation for a Joint OHC meeting you have questions or require guidance, your LRO is available to provide you with the assistance needed.

MEETING WITH THE EMPLOYER

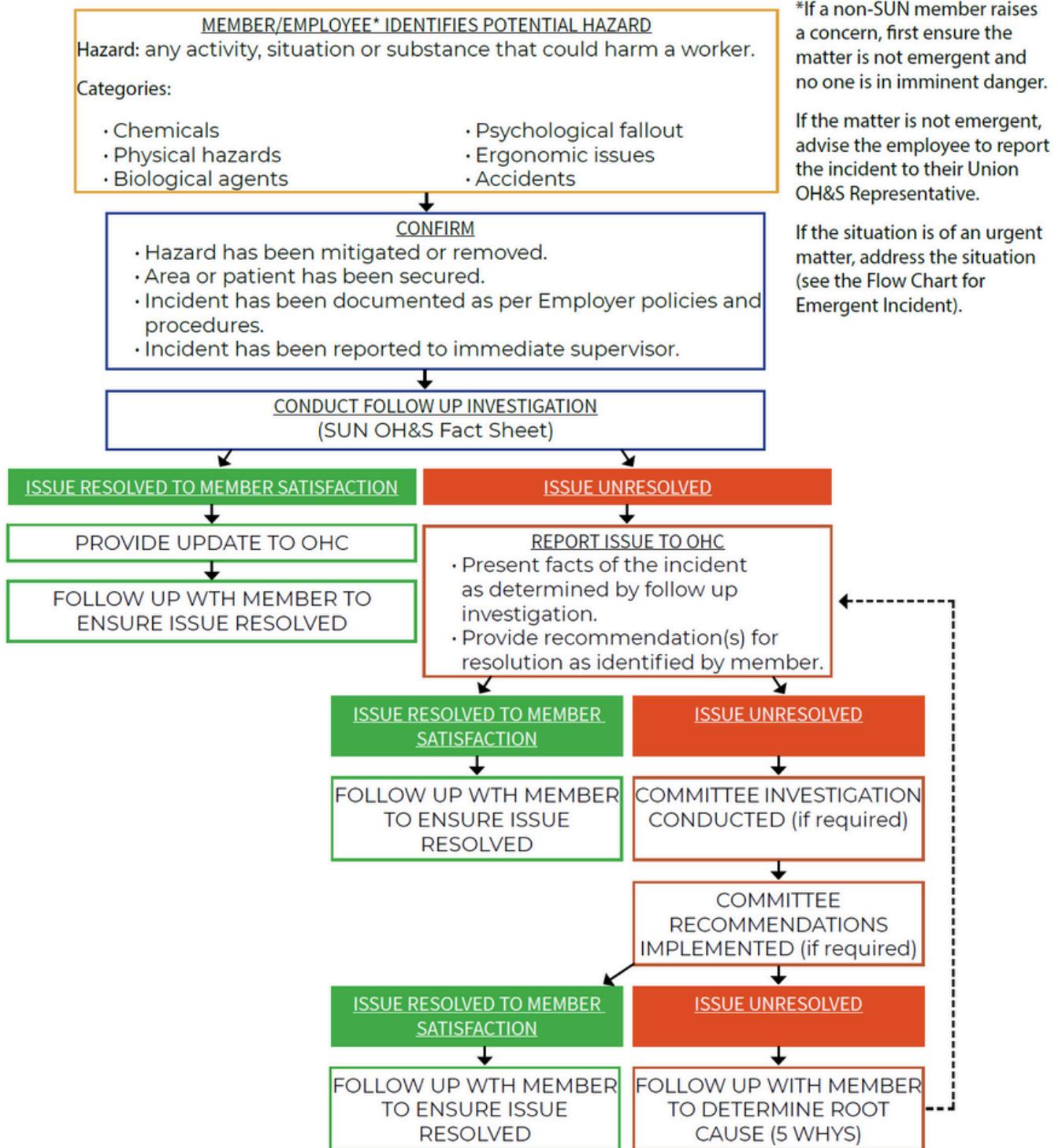
- Stay calm.
- Take notes during the conversation.
- Identify the facts of the situation as determined by your investigation.
- Avoid personalizing the issue. Listen to the Employer's position, ask questions to seek clarification as needed.
- If necessary, caucus with your member(s) to discuss the Employer's position and/or possible resolution.
- Remember: you do not have to agree to anything presented during the meeting. You can reserve the right to step away from the meeting and respond later. This provides you with the opportunity to seek guidance from SUN Provincial, if necessary.

RESPONSIBILITY VS AUTHORITY VS ACCOUNTABILITY

- **Responsibility** refers to the obligation to perform the delegated task.
- **Authority** refers to the legal right of the manager to give orders and expect obedience from subordinates.
- **Accountability** means you are liable or take ownership of one's actions. In order to be responsible, you must be accountable and vice versa.

The origin of **responsibility** is the result of the **authority**. Responsibility is assigned whereas **accountability** is accepted.

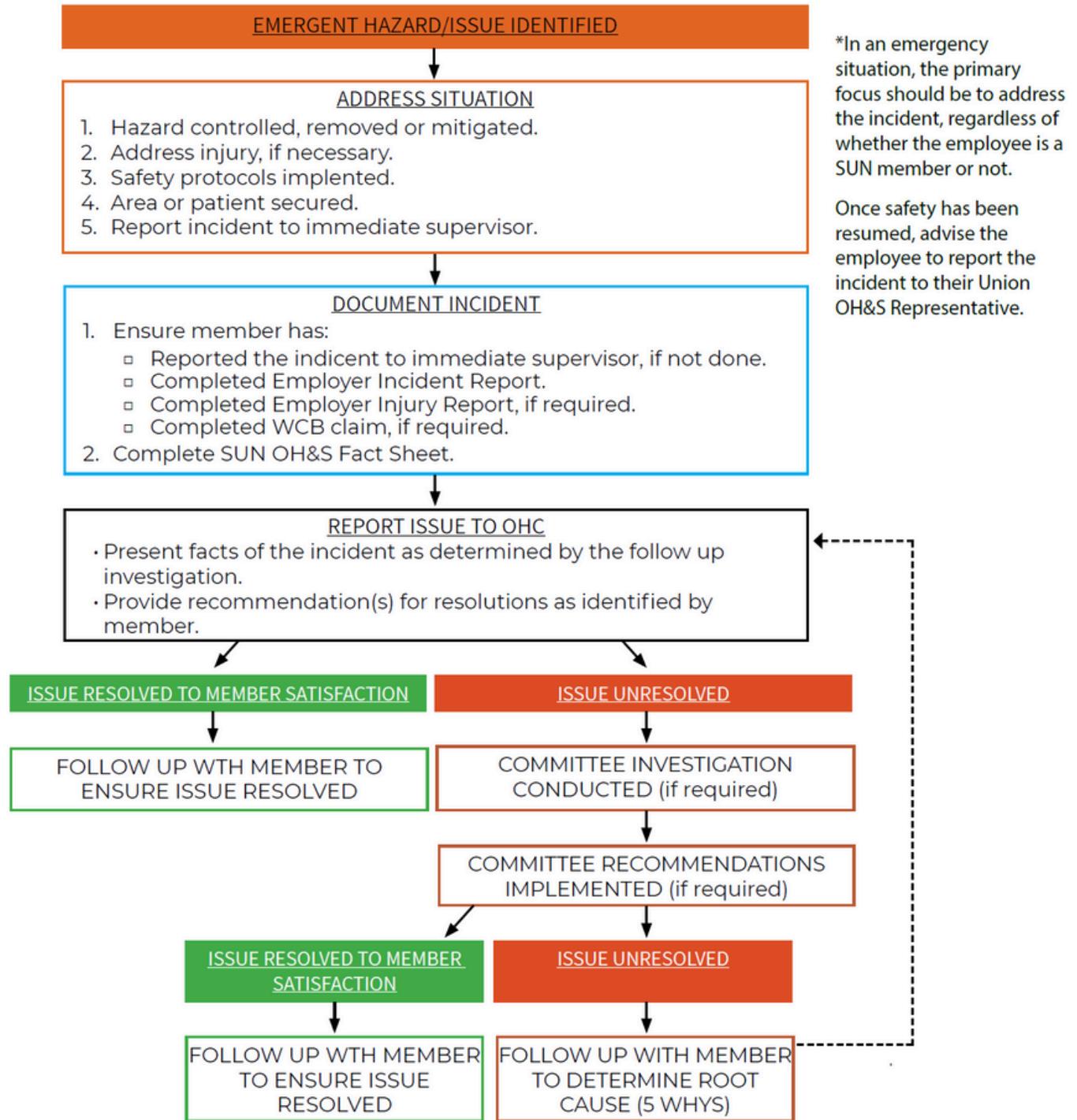
SUN'S OH&S PROCESS FOR POTENTIAL HAZARDS



**PARALLEL COURSE OF ACTION

- If at any point during an investigation a labour relations (LR) issue is discovered, the LR component is referred to Local President/Executive and the assessment stage for further investigation and determination of best course of action in terms of the grievance process.
- Similarly, if at any point during an investigation a professional practice issue is discovered, the practice component is referred to the Local NAC Chair and the assessment stage for further investigation of best course of action in terms of the NAC process.
- When required, the OH&S, NAC and grievance process will run parallel to resolve the issue.

SUN'S OH&S PROCESS FOR IMMEDIATE RISK



*In an emergency situation, the primary focus should be to address the incident, regardless of whether the employee is a SUN member or not.

Once safety has been resumed, advise the employee to report the incident to their Union OH&S Representative.

**PARALLEL COURSE OF ACTION

- If at any point during an investigation a labour relations (LR) issue is discovered, the LR component is referred to Local President/Executive and the assessment stage for further investigation and determination of best course of action in terms of the grievance process.
- Similarly, if at any point during an investigation a professional practice issue is discovered, the practice component is referred to the Local NAC Chair and the assessment stage for further investigation of best course of action in terms of the NAC process.
- When required, the OH&S, NAC and grievance process will run parallel to resolve the issue.



OCCUPATIONAL HEALTH & SAFETY COMMITTEE

Occupational Health Committees (OHCs) and Worker Health and Safety Representatives are mechanisms that help employers communicate and cooperate with workers in identifying and resolving health and safety concerns.

As the Local OH&S Representative, you will be an active member of your facility/region's OHC.

COMMITTEE OBLIGATIONS AND RESPONSIBILITIES

Committees are required in workplaces with 10 or more workers. Their role is to monitor the workplace, give advice and make recommendations to their employer for eliminating/controlling/resolving hazards to keep their working environment safe.

In addition, as per Part IV of The Occupational Health and Safety Regulations, duties of the Occupational Health Committees include, but are not limited to:

- Helping employers identify, eliminate, or control hazards;
- Making recommendations to the employer for improving workplace health and safety;
- Talking with workers about health and safety concerns and helping resolve the concerns;

- Receiving and distributing information, including OH&S Division publications;
- Inspecting the workplace regularly;
- Investigating reportable incidents (meaning accidents and dangerous occurrences);
- Helping establish and promote health and safety programs, policies, and training;
- Investigating refusals to work; and
- Helping employers comply with OH&S legislation.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/ohc-and-OH&S-representative/ohc>)

Occupational Health Committees do not have a direct responsibility for correcting hazards at their workplaces. An OHCs role is to give advice and make recommendations for correcting hazards to the employer.

When working with an OHC, **employers are required** to:

- Consult and co-operate with the OHC;
- Respond to concerns or recommendations raised by the OHC; and
- Inform the OHC or OH&S representative, in writing, of the action(s) they have or will take to correct the hazard(s) or, if the employer has not corrected the hazard(s), the reasons for not taking action.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/ohc-and-OH&S-representative/ohc>)

COMMITTEE STRUCTURE

A **Committee must have 2-12 members, with at least half of the Committee consisting of worker members.** The number of Employer members cannot outnumber the worker members.

Each side must designate a co-chair. The Worker Co-Chair is selected by the Committee at their first meeting, while the Employer will appoint their Co-Chair. The Co-Chairs share equal power and have the right to call and chair emergency meetings.

There must be a quorum at every committee meeting. A quorum means half of all the OHC members must be present; half of all OHC members present must be workers; and at least one management member must be present. Employers and workers should select “alternate” OHC members to ensure that there is a quorum at every OHC meeting.

Committees may hold as many meetings as needed to address concerns, however, they must meet, at minimum, once every three months. During each meeting, Committee members will discuss issues and concerns as equals and seek resolutions through agreement reached by mutual consent.

Committee members are compensated for their meeting time and travel, as per the Collective Agreement.

OH&S REPRESENTATIVES

OH&S Representatives help the employer and workers to improve health and safety in the workplace by identifying and resolving health and safety concerns.

Duties of the OH&S Representatives on the OHC include, but are not limited to:

- Providing a channel of communication between the employers and workers;
- Conducting regular inspections and talking with workers about their health and safety concerns;
- Participating in reportable incident investigations (both accidents and dangerous occurrences);
- Assisting the employer with the development of safety procedures, policies, and programs; and
- Meeting with the employer regularly to discuss concerns.

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/ohc-and-OH&S-representative/OH&S-representatives>)

UNION & WORKPLACE REPRESENTATIVES

Workplace representatives are required for high hazard workplaces with 5-9 workers such as small/rural hospitals/healthcare facilities, nursing homes and home care.

Workplace representatives for smaller facilities may also sit on a Regional OH&S Committee.

In a unionized environment, like ours, it is not that straight forward. **Each bargaining unit** – SUN, SGEU, CUPE, SEIU-West, Health Sciences, etc – **has the right to have a representative sit on the Joint OHC for their workplace.** From the group of worker representatives, the Worker Co-Chair is selected by the worker representatives.

Depending on how the Local operates, the SUN OH&S Representative may be elected or appointed by the Local Executive. Depending on the Local structure, the Local OH&S Represented may also be a member of the Local Executive.

Locals are strongly encouraged to have a SUN OH&S Representative at each facility/agency that SUN members work at. As the Local OH&S Representative, you would communicate with the representative(s) in regard to workplace health and safety concerns at their facility, policies and procedures specific to their worksite, as well as be the liaison with the Local Executive in terms OH&S matters.

Each workplace is different, and with one provincial Employer, the structure of OHCs for each workplace may be different as well. It is important to remember that each workplace with more than 10 workers, by law, is required to have an OHC that meets at minimum, every 3 months. Smaller facilities should at the very least have a network OHC that meets every 3 months. If not, the local should be contacting their LRO for guidance.



Workplace representatives share the same responsibilities as Committees; however, they are not required to investigate refusals to work. Representatives perform their duties in consultation with the Employer.

COMMITTEE AND REPRESENTATIVE TRAINING

It is the Employer's responsibility to ensure that Committee Co-Chairs and representatives are trained to properly meet their obligations under the Act and Regulations. Under the Act, Committee members and Representatives are provided five (5) days of educational leave (paid work time) each year to acquire such training. The general Level 1 and Level 2 OHC courses are available through WorkSafe Saskatchewan (www.worksafe.ca).

However, workplace safety within a healthcare environment is unique. The SASWH provides safety training specific for employees, supervisors, employers and committee members working in healthcare. Training provided by the SASWH includes, but is not limited to:

- Occupational Health Committee (OHC) Training and Support
- Incident Reporting & Investigation
- Inspections
- Personal Protective Equipment (PPE)
- Professional Assault Response Training (PART)
- Safety for Supervisors
- Safety Management System (SMS)
- Workplace Assessment Violence Education (WAVE)
- Workplace Hazardous Materials Information System (WHMIS)
- More available at www.saswh.ca



BUILDING COLLABORATIVE RELATIONSHIPS

Ensuring there is open, honest, and transparent two-way communication between the Employer and the registered nurses, and is key to fostering a strong, positive and productive OH&S process.

Moving to a collaborative problem-solving environment may take some time. Setting some ground rules at your first or next meeting which describe what the expectations are for the Joint Occupational Health Committee (OHC) will help build a focused and effective Committee.

The best ground rules come from the members of the OHC as they will meet the particular needs and challenges of the Joint OHC. Once ground rules are established, Committee members should agree to abide by them, enforce them and refine them when necessary. Here are some sample ground rules to help you get started.

Examples of Ground Rules

1. Everyone participates; no one dominates.
2. Try hard to understand the views of those with whom you disagree.
3. Keep discussions focused.
4. It is okay to have friendly disagreement.
5. No cell phones.
6. Ability to call a time out.
7. Be on time.
8. Structure of the Joint OHC must follow the parameters identified in Part III of The Saskatchewan Employment Act.

CONFLICT RESOLUTION

Conflict occurs when there is an increased level of emotion attached to the discussion. Here are some tips to consider when you react or someone else reacts negatively to a statement that is made:

- Respond with a thoughtful question.
- Paraphrase back what you heard.
- Count to ten.
- Try to understand why the statement evokes such a strong reaction.
- Try not to use negative body language, facial expression or sounds.
- Try to keep an even tone.
- Request a short break.

TIPS FOR MEETING WITH THE EMPLOYER

- Stay calm.
- Take notes during the conversation.
- Identify the facts of the situation as determined by your investigation.
- Avoid personalizing the issue. Listen to the Employer's position, ask questions to seek clarification as needed.
- If necessary, caucus with your member(s) to discuss the Employer's position and/or possible resolution.
- Remember: you do not have to agree to anything presented during the meeting. You can reserve the right to step away from the meeting and respond later. This provides you with the opportunity to seek guidance from your SUN Provincial, if necessary.



TRAINING

The Employer is obligated to ensure all employees are properly trained for the areas in which they work, and the type of work they perform – this includes training in health and safety – in order for employees to work safely and in compliance with legislation and employer policies.

Employees have the right to seek out the appropriate education/training for their area of practice to avoid potential or actual risk to self or co-workers. OH&S training specific to healthcare is offered by the **Saskatchewan Association for Safe Workplaces in Health (SASWH)** and includes courses such as:

- Transferring Lifting Repositioning (TLR)
- Safe Moving and Repositioning Techniques (SMART®) program
- Workplace Hazardous Materials Information System (WHMIS 2015)
- Professional Assault Response Training (PART)
- Workplace Assessment Violence Education (WAVE)
- Mental Health First Aid

SASWH TRAINING PROGRAMS

SASWH is an approved training agency by the Saskatchewan Ministry of Labour Relations and Workplace Safety and the Saskatchewan WCB and offers a variety of healthcare specific safety training and education to member agencies at low to no cost, depending on the course. The SASWH Board of Directors is composed of an equal number of employer and employee representatives, which SUN holds a position.

SUN Sponsored OH&S Education

Each year SUN sponsors members to attend the Saskatchewan Federation of Labour (SFL) Occupational Health & Safety Conference (September).

This is a great opportunity for OH&S Representatives to learn more about the Act and Regulations, building effective committees, harassment investigation, duty to accommodate, domestic violence in the workplace, and more.

Did You Know?

Under Part III, Section 8 (3) of the *Occupational Health & Safety Regulations, 2020*:

*“[An employer **shall ensure that the time spent by a worker in the training required by subsection (1) is credited to the worker as [paid] time at work, and that the worker does not lose pay or other benefits with respect to that time.**”*



OCCUPATIONAL HEALTH & SAFETY OFFICERS

Occupational Health Officers (OHOs) are responsible for improving workplace safety by identifying hazards, enforcing regulations, and implementing policies to prevent accidents and injuries. They monitor working conditions, conduct inspections, investigate incidents, and ensure compliance with legal standards to protect employee health and safety.

INSPECTIONS

OHOs can conduct an inspection at any plant, place of employment, worksite, or vehicle where workers usually work or have worked. They have been given this authority to:

- Prevent incidents, injuries and illnesses;
- Determine the causes and details of an incident, injury or illness;
- Determine the cause and details of a dangerous-occurrence that could have resulted in an incident, injury or illness;
- Respond to an occupational health and safety complaint; and
- Determine if a workplace is complying with the occupational health and safety legislation, a compliance undertaking, a notice of contravention or any other order issued by the Division in the enforcement/administration of its legislation.

An officer can conduct an inspection at any reasonable time or at any time they have grounds to believe that a hazardous situation towards workers exists.

During inspections, OHOs may:

- Ask any question that they consider appropriate;
- Require a demonstration of the use of any machinery, equipment, appliance or thing located at the place of employment;
- Require the production of and remove any records that exist about the training of workers related to occupational health and safety (officers are required to return all documents in a timely fashion);
- Enlist the help of workers to retrieve and produce information that is stored electronically for the purpose of completing the inspection; and
- Require any person at the place of employment to produce any information they have concerning the identity of the employer.

INQUIRIES

An OHO can interview any person who they believe can provide information about a work-related fatality, serious injury, or allegation of harassment.

The only people, who are permitted to attend the interview, aside from the Occupational Health Officer and the interviewee, are:

- A person selected by the interviewee to support them in the interview process; and
- Any other person who the officer allows to be present.

INVESTIGATIONS

If a justice/provincial court judge has reasonable grounds to believe that an offence has been made against The Saskatchewan Employment Act and/or the regulations and that there is evidence to support that offence, the judge may issue a warrant.

With this warrant and during an investigation, an Occupational Health Officer has the authority to:

- Enter and search any place/premises named in the warrant;
- Stop and search any vehicle described in the warrant;
- Open and examine the contents of any trunk, box, bag, parcel, closet, cupboard or any other compartment that the officer finds;
- Require the production of and examine any records or property that the officer believes may provide evidence of the offence;
- Remove, make copies of and examine any records that may provide evidence of the offence;
- Require a demonstration of the use of any machinery, equipment, appliance or thing at the place of employment to provide evidence of the offence;
- Conduct any tests, take any samples and make any examinations that may provide evidence of the offence; and
- Seize and remove anything that may be evidence of the offence.

An officer can search a place/premises without a warrant when the officer has ground to believe that waiting for a warrant could result in:

- Danger to human life or safety; or
- The loss and destruction of evidence.

An officer cannot enter any private dwelling without a warrant and without the consent of an occupant unless they have grounds to believe that the delay for obtaining a warrant would result in:

- Danger to human life or safety; or
- The loss and destruction of evidence.



Learn more @ <https://www.saskatchewan.ca/business/safety-in-the-workplace/enforcements-prosecutions-and-investigations/inspections-inquiries-and-investigations>



important

WHAT MEMBERS NEED TO KNOW

Safety in the workplace is everyone's responsibility, in order **to ensure a safe workplace for all, it is important for each member to:**

- Understand their individual role and responsibilities.
- Identify actual and potential hazards in the workplace, when they occur.
- Utilize low level resolution to resolve safety concerns.
- Be aware of Employer policies and procedures concerning workplace safety.
- Have knowledge of individual rights and obligations under the Saskatchewan Employment Act, Occupational Health and Safety Regulations and the Collective Agreement.
- Seek clarity on obligations under the Act and Regulations when required.
- Seek out appropriate education/training to avoid potential or actual risk to self or co-workers.
- Access rights, protections and processes within the Collective Agreement to address harmful or potentially harmful situations. (eg: Nursing Advisory of grievance processes).

THE FIRST STEP: LOW-LEVEL RESOLUTION

When a workplace safety concern or hazard is identified, the member's/employee's first step in addressing the issue is to engage in low resolution with their immediate supervisor/manager.

An Employee or a group of Employees who have a health or safety concern shall endeavour to resolve that concern by first referring the concern to the immediate supervisor or officer responsible for safety. (Article 61.03 SUN/SAHO Collective Agreement)

Low-level resolution is an effective approach for addressing common issues/concerns or for solving problems in real time at the point of the incident, rather than flagging the area of concern for later action or referring to senior management. This proactive, collaborative approach to problem-solving supports open, transparent communication toward a timely, appropriate resolution.

While utilizing low-level resolution to address member concerns is optimal, this does not remove the member's rights to engage in a formal process through the Collective Agreement or legislation, nor does it prohibit them from contacting the Ministry of Labour Relations and Workplace Safety.

Fix It, Mark It, Report It

Everyone in the workplace is responsible for the safety of others and themselves – regardless of their designation, job duties, bargaining unit, or level of authority.

This responsibility is outlined within OH&S legislation where all employees must take reasonable care to protect his or her health and safety and the health and safety of other workers who may be affected by his or her acts or omissions. This means that when there is a health and safety concern in the workplace, everyone has an obligation to do something about it and if they don't, you may be held responsible for the outcome.

If a worker identifies a safety issue it only takes a moment to quickly wipe up a spill or put a wet floor sign out or put a sign on broken equipment to warn others of the hazards.

In the event of an incident or accident, it is everyone's obligation to ensure the event was reported to the immediate supervisor and the proper paperwork was completed.

We have all heard the old nursing adage – if it wasn't documented, it didn't happen. If it didn't happen, there is nothing to fix.

Discriminatory Action

Workers are protected from disciplinary action or other sanctions by an employer for fulfilling their responsibilities or exercising their safety rights under Part III of The Saskatchewan Employment Act.

“Discriminatory action” could mean anything from a verbal warning, written warning, suspension, firing, demotion, or loss of wages.

Section 3-35 of The Saskatchewan Employment Act prohibits the employer from taking discriminatory action if the worker:

- Acts in compliance with The Saskatchewan Employment Act and regulations or a Notice of Contravention;
- Seeks to have *The Saskatchewan Employment Act* or regulations enforced;
- Assists with the activities of the occupational health committee (OHC) or occupational health and safety (OH&S) representative;
- Seeks to establish an OHC or OH&S representative;
- Performs the functions of an occupational health committee member or representative;
- Refuses to work pursuant to section 3-31 of The Saskatchewan Employment Act; or
- Gives information to an OHC, OH&S representative, occupational health officer, or a radiation health officer.



Refer to Appendix I for steps for filing a discriminatory action complaint.



RIGHTS & PROTECTION UNDER THE COLLECTIVE AGREEMENT

The Collective Agreement provides members with rights and protections in addition to those outlined within the Act and Regulations. The Collective Agreement covers subjects including, but not limited to:

- Joint commitment to safety
- Participation on Joint OH&S Committees
- Time lost
- Influenza vaccine
- Violence in the workplace
- Critical stress management
- Protective equipment and clothing

THE EMPLOYER-UNION RELATIONSHIP

The role of the Union is to protect and uphold the rights and privileges afforded to members within their Collective Agreement. Part of this role is to act as a watchdog for workplace rights and safety, advising the Employer on current and potential hazards or concerns, and making recommendations for resolution.

Both the Employer and the Union recognize the importance of creating and maintaining a safe work environment. In addition to The *Saskatchewan Employment Act*, each SUN Collective Agreement contains language which supports the development, maintenance and enhancement of safety programs within the workplace.



The Collective Agreement is a binding agreement that both parties have agreed to comply with. Key phrases from the SUN/SAHO Collective Agreement concerning OH&S include, but are not limited to:

61.01 The Employer and the Union endorse the principle of worker occupational health and safety and shall continue to enhance safety measures.

The Employer shall make reasonable provisions for the health and safety of employee(s), including Employee health and safety education during their hours of employment. The Employer and the Union shall co-operate to the fullest extent possible toward the prevention of accidents and in reasonable promotion of safety and health.

61.02 An Occupational Health and Safety Committee as provided for under Part III of The Saskatchewan Employment Act, or as such Act may be amended from time to time, shall be implemented. On agreement of the parties, in addition to a site-based Occupational Health and Safety Committee, a region-wide Occupational Health and Safety Committee shall be implemented.

61.03 An Employee or a group of Employees who have a health or safety concern shall endeavour to resolve that concern by first referring the concern to the immediate supervisor or officer responsible for safety.



VIOLENCE IN THE WORKPLACE

SUN Provincial is committed to addressing violence in your workplaces. We hear from SUN members across the province and the details of violent situations that registered nurses are facing on a daily basis, are alarming. If this has been your experience, you are not alone.

According to the 2025 SUN Member Survey, close to 70% of registered nurses across Saskatchewan have experienced violence in their workplace over the past 12 months.

Violence against registered nurses is NOT acceptable and will NOT be tolerated. It is the responsibility of the SHA to ensure that their policies on safety are upheld, OH&S legislation is followed, and SUN members are protected when they come to work.

As an OH&S Representative, it is important to know programs and policies in place regarding violence prevention and mitigation, as well as how to assist members in violent situations.

SUN'S POSITION STATEMENT ON VIOLENCE

Violence means the attempted, threatened or actual conduct of a person that causes or is likely to cause injury. Workplace violence includes any physical or sexual assault from a patient, client, resident, volunteer, supervisor, manager, member of the public, or co-worker. Verbal abuse and threatening language or behaviour are also forms of violence.

Violence is prevalent and under-reported in health care environments and is a significant source of injury and distress for registered nurses. Violence can have long-term impacts on the workplace and on registered nurses' physical and mental health and well-being. Violence negatively affects outcomes for patients and families, registered nurses, and organizations.

By law, employers must develop, implement, and review at least every 3 years, a comprehensive written policy statement and prevention plan to deal with potentially violent situations, in consultation with occupational health and safety committees, union representatives, and workers themselves.

Violence policies and plans must include:

- The employer's commitment to minimize or eliminate risk;
- The identification of worksites and staff positions for which there is a history or risk of violence;
- The actions the employer will take to minimize or eliminate the risk of violence;
- The procedures to be followed to document, report and investigate violent incidents; and
- A commitment to provide a training program for workers to recognize potentially violent situations and to follow the procedures, work practices, administrative arrangements and controls that have been developed to minimize or eliminate risk.

Every workplace must cultivate a culture of safety and respect based on the shared responsibility of all health care stakeholders, including employers, patients and families, registered nurses and other employees, government and community agencies, and nursing professional, regulatory, labour, and accreditation organizations.

By documenting and reporting violent incidents, SUN members can contribute to raising awareness about the scale of workplace violence, help identify strategies to reduce risk and make workplaces safe, and to contribute to a workplace and professional environment that refuses to normalize violence.

Registered nurses have the right to work and practice in an environment that is free from any form of violence and where violence is not tolerated as a part of their job.

See SUN's Position Statement (website) for reference and citations.

RIGHT TO REFUSE VIOLENT SITUATIONS

An Employee who has reasonable grounds to believe they may be physically endangered when attending a client shall not be required to attend that client. When an incident demonstrates that client's behaviour may constitute a risk to the safety of another client or staff member, a meeting shall be convened within twenty-four (24) hours, or as soon as possible thereafter, to consider and implement alternative options for care delivery to ensure the safety of the Employee(s) and other client(s).

REDUCING WORKPLACE VIOLENCE

The Employer acknowledges that Employees may be at risk of violence and injury by clients while carrying out their duties. In order to alleviate workplace violence, the Employer shall provide training appropriate to the work area that would enable Employees to recognize and respond to potentially violent or abusive incidents. Payment for participating in such training shall be in accordance with Article 42.02 (a).

Such courses may include the Workplace Assessment Violence Education (WAVE) training and Professional Assault Response Training (PART), both offered by the Safety Association for Safe Workplaces in Health (SASWH).

CFNU WORKPLACE VIOLENCE TOOL KIT

This tool kit is an online hub for resources, research, information, tools and best practices related to violence in health care workplaces.

The purpose of this tool kit is to provide a 'one-stop shop' for relevant resources on this topic, to share and spread the implementation of best practices related to violence prevention and return to work programs in jurisdictions across Canada.

The CFNU defines workplace violence as physical or non-physical violence which includes the threatened, attempted or actual work-related incident of physical force or psychological abuse which can result in physical, emotional and sexual injury, harm, or trauma. Workplace violence includes sexual harassment, harassment, bullying, and lateral violence which may also include cyber-bullying and domestic abuse.

The risk of workplace violence is influenced by psychosocial factors including working conditions, organizational policies and environmental factors such as:

- Low decision-making autonomy and rigid work routine
- Inappropriate or inadequate staffing
- Excessive use of overtime
- Inappropriate admission or transportation of patients
- Inadequate security or security measures
- Type of health care setting or department (e.g., emergency, psychiatric, long-term care)
- Working in isolation
- Managerial disregard



Visit <https://nursesunions.ca/violence/> to access the resources available in the CFNU Violence Tool Kit.

SHA'S VIOLENCE PREVENTION & MITIGATION PLAN

Violence is not acceptable and will not be tolerated in SHA workplaces.

Violence is the attempted, threatened, or actual conduct of a person that causes or is likely to cause injury, and includes any threatening statement or behaviour that gives reasonable cause to believe that one is at risk of injury. 'Injury' means physical, psychological or emotional harm.

Violence applies to any situation where a person is threatened, abused or assaulted.

Some examples of violence are:

- Spoken or written threats
- Verbal abuse (e.g., swearing, name-calling, slander)
- Intimidating or threatening gestures (e.g., shaking a fist, throwing objects, punching a wall)
- Physical attacks or assault (e.g., kicking, punching, pushing, biting)
- Showing or using a weapon like a knife or gun
- Sexual assault
- Racial and cultural violence

Everyone who works within the healthcare system has the potential to be exposed to violence, at all SHA locations and in the community.

Some team members face a higher risk, including individuals that provide direct care and/or work in close physical proximity to those we serve, as well as those working in higher risk locations.

Higher risk locations include those which provide detoxification, emergency or Mental Health and Addictions in-patient services. Additional risk can be present depending on crime levels in the local community, including violent crime.

The purpose of the SHA Violence Prevention & Mitigation Plan is to provide everyone with information on:

- How to prevent violence in healthcare settings
- How to report and respond when violent situations take place
- What support is available for victims of violence

The SHA Violence Prevention & Mitigation Plan is under development and implementation. Continue to use your former RHA established processes until provincial processes are established. The current version of the plan is focused on patient-to-worker and worker-to-worker violence. Work is underway to address other classifications of violence within the SHA and will be updated as it becomes available. Below you can view a timeline of key activities, including what is currently under development.



Hazard Identification and Risk Assessment

Hazard identification, risk assessment, and controls are an important part of our approach to Safety Management.

Hazards are assessed to determine the degree of risk posed to team members, patients/families, and the public.

The degree of risk is determined by:

1. the likelihood that a hazard will cause harm and
2. the seriousness of harm that can occur.

The Hierarchy of Controls is used to minimize or eliminate exposure to hazards including workplace violence. Most hazards are identified and assessed at a unit or department level, using a Job Safety Analysis and developing Safe Work Procedures in response.

Violence is a complex hazard, and as a result, the SHA has developed and continues to develop additional resources to assist with preventing violence.



You can find more information @

<https://www.saskhealthauthority.ca/intranet/departments-programs/human-resources/staff-safety/violence-prevention-mitigation/violence-prevention-mitigation-prevention>

REPORTING AND RESPONSE

STOP-ASSESS-FIX-ESCALATE-REPORT

Team members, patients/families, and the public who witness or are involved in acts of violence are encouraged to speak up and report these types of incidents. All reports are taken seriously, will be followed up, and appropriate actions taken to reduce the risk of another violent incident occurring. This section describes how to report and respond when violent incidents take place.

TEAM MEMBERS: REPORTING

If you become aware of, witness, or are involved in a violent incident, implement S.A.F.E.R. practices

Stop the line if there is potential for harm or injury.

Alert/Assess - tell others and assess the situation to determine cause and solutions.

Fix and report how you fixed it.

Escalate the problem and continue on with patient care or work tasks.

Report the incident.

TEAM MEMBERS: RESPONSE

- You may be asked to participate in follow-up or an investigation of the incident.
- You are encouraged to attend and participate in debriefing sessions.
- You are encouraged to make recommendations for improvement.

SUPERVISOR OR MANAGER: REPORTING

Be aware of different reporting requirements, especially what to do in the event of an accident causing serious bodily injury (**see the full PDF below for details)

SUPERVISOR OR MANAGER: RESPONSE

- Confirm that an Incident Report Form has been submitted.
- Review and complete the Incident Report Form.
- Refer to your established former RHA safety response processes to determine what other individuals or departments the Incident Report Form should be shared with.
- Where follow-up and/or investigation is required, follow the standardized review and investigation process, based on established former RHA safety response processes.



For Incident Flow Charts, and information on De-escalation & Emergency Responses, visit: <https://www.saskhealthauthority.ca/intranet/departments-programs/human-resources/staff-safety/violence-prevention-mitigation/violence-prevention-mitigation-reporting-and-response>

SASWH Provincial Violence Prevention

The aim of the Saskatchewan Association for Safe Workplaces in Health (SASWH) **Provincial Violence Prevention Framework and Strategy** is to

- Reduce injury rates in the healthcare sector through targeted interventions;
- Build a stronger culture of safety;
- Promote the adoption of effective violence prevention initiatives; and
- Prevent injuries caused by violence and acts of aggression.

The tools and resources found on the SASWH's website can provide workplaces with a consistent, scalable, and consensus-based approach that can be used to build a comprehensive program or enhance the existing program with new tools and resources.



To learn more about the framework and access the tools and resources available, visit: <https://www.saswh.ca/workplace-violence-prevention/>



VIOLENCE & PROFESSIONAL PRACTICE

Workplace issues are complex, and it can be difficult to determine the appropriate process in which to address the concern – is it labour relations, occupational health safety, or professional practice? Understanding the differences between the categories will assist you as the Local OH&S Representative and the member in determining the best course of action to address the issue raised.

There is a growing trend of safety & security issues being filed through the Nursing Advisory Committee (NAC) Process and Work Situation Reports (WSRs). Unfortunately, the NAC process is not intended to deal with physical violence or verbal abuse – that is role of OH&S.

Members can properly address their workplace concerns through identification, problem-solving, conflict resolution, and finding solutions using their collective agreement.

- Member Rights or Collective Agreement Articles = Labour Relations
- Member Safety = Occupational Health & Safety
- *Patient Safety & Professional Obligations = Professional Practice*

WHAT MEMBERS NEED TO KNOW ABOUT VIOLENCE IN THE WORKPLACE

1. There is **no collective agreement article, standard, indicator, competency, or ethical responsibility** that states registered nurses should accept abuse, injury, or assault by patients, visitors, or others.
2. **Members must report and document safety, security, and violence concerns** to their Manager/designate, Local President, and Occupational Health and Safety Representative.
3. Review employer policy, procedure, and emergency management plans to know whom and how to appropriately report and address safety and security concerns.

IMPACT OF “RIGHT TO REFUSE” NURSING LICENSE

This is not as straightforward as one may think. As registered nurses, SUN members cannot simply invoke the right to refuse process and walk away from a dangerous situation. To be clear -

#1 -- nurses DO NOT need to accept violence as part of their job. But

#2 -- nurses DO have to ensure all patients/clients under their care receive the appropriate care.

The answer is #3 – document, document, **DOCUMENT** & report, report, **REPORT**

If a registered nurse were to say “Nope, won’t do it, I won’t care for Mr. Jones, he’s always lashing out. I’ve been punched and kicked. I’m done.” and walked away, refused to go into his room – they can still be held accountable or brought up on disciplinary action for abandoning a patient.

YES, violence is not part of the job and **NO** nurses do not have to accept it **BUT THEY HAVE TO** make sure the patient is adequately care for.

How do SUN members protect their license and still address safety and security?

We activate and utilize all options available to escalate your concerns. And we do this by documenting and reporting through the proper channels – labour relations, professional practice or OH&S.

PARALLEL COURSE OF ACTION

It is important to note that while the primary concern may fall into one of three categories, the underlying factors or root cause(s) may be addressed through a parallel course(s) of action.

Labour Relations issues are defined as a:

- Breach of Collective Agreement.
- Violation of member's rights.
- Breach or change in application of Employer policy/procedure.

In addressing workplace concerns or violations of the Collective Agreement, the goal is to find ways to resolve the situation without requiring a formal and confrontational process (low-level resolution). If the informal discussion does not result in a resolution, the next course of action may be to file an individual or policy grievance.

Professional Practice issues are identified as:

- Nursing practice concerns;
- Safety of patients and registered nurses;
- Workload/staffing levels/patient acuity; or
- Other factors which negatively affect patient care.

The first step in addressing Professional Practice issues is to engage in low level resolution with one's manager. If the issue remains unresolved or ongoing, the course of action taken will be to file a Work Situation Report (WSR) and initiate the Joint Nursing Advisory Process.

Occupational Health and Safety hazards or concerns are defined as actions or incidents which impact the health, safety, and welfare of an employee or group of employees.

Similar to the processes identified under labour relations or professional practice, when a workplace hazard or safety concern is raised, the first step in finding a resolution is to speak to the immediate supervisor/manager (low level resolution). However, regardless of whether the incident is resolved or not, an Incident Report should be filed with the Employer and the OH&S Committee, as the incident may also prompt the filing of a WSR or WCB claim.

It is important for all Employees to be familiar with their Employer's/facility's process for reporting and/or documenting an incident.



HARASSMENT & LATERAL VIOLENCE

SUN collective agreements each contain language, or similar, which states:

“the Union and Employer recognize the right of employees to work in an environment free of harassment, and will work jointly to achieve that goal. The Employer shall have in place a harassment policy which shall be reviewed regularly and revised as deemed appropriate.”

In addition to the protections under the collective agreement, *The Saskatchewan Employment Act* outlines the rights and responsibilities of employers and workers to ensure Saskatchewan workplaces are free of harassment.

WHAT IS HARASSMENT?

Workers are protected under the Act from three types of harassment:

- Harassment based on prohibited grounds.
- Personal harassment.
- Sexual harassment (effective January 1, 2022).
- All incidents of inappropriate conduct, regardless of the type of harassment, should be appropriately addressed to ensure the workplace remains respectful and harassment free.

Who is considered a worker has also been expanded in the definition of harassment in the Act to include:

- secondary and post-secondary students working for or being trained by an employer;
- volunteer performing work or services; and
- independent and dependent contractors.

WHAT IS NOT HARASSMENT?

Day-to-day management or supervisory decisions are not considered to be harassment even if they sometimes involve unpleasant consequences. These include:

- work assignments;
- job assessments and evaluations;
- workplace inspections;
- implementation of appropriate dress codes; and
- disciplinary actions.

All managerial actions must be carried out in a manner that is reasonable and not abusive.

HARASSMENT BASED ON PROHIBITED GROUNDS

Harassment based on prohibited grounds includes any inappropriate conduct, comment, display, action or gesture by a person that is made on any prohibited grounds defined in *The Saskatchewan Human Rights Code, 2018*, or physical weight or size; or constitutes a threat to the health or safety of the worker.

Certain types of conduct not specifically directed at an individual, such as displaying a poster or making comments that are overheard by another worker, can be considered harassment based on prohibited grounds.



Download @ <https://saskatchewanhumanrights.ca/wp-content/uploads/2020/03/Code2018.pdf>

PERSONAL HARASSMENT

Personal harassment is sometimes referred to as bullying. It includes any inappropriate conduct, comment, display, action or gesture by a person that:

- adversely affects a worker's psychological or physical well-being;
- the perpetrator knows, or should know, would cause the worker to be humiliated or intimidated; and
- constitutes a threat to the health and safety of a worker.

Typically, personal harassment involves repeat occurrences. A single incident may also constitute personal harassment if serious or severe and is shown to have a lasting harmful effect on a worker. Personal harassment may include:

- verbal or written abuse or threats;
- insulting, derogatory or degrading comments, jokes or gestures;
- personal ridicule or malicious gossip;
- malicious or unjustifiable interference with another's work;
- work sabotage;
- refusing to work or co-operate with others; or
- interference with, or vandalism of personal property.

SEXUAL HARASSMENT

Sexual harassment may be verbal, physical or visual. It may be one incident or a series of incidents. It is always unsolicited and unwelcome behaviour, and can take many forms, including but not limited to:

- sexual remarks;
- "jokes" with sexual overtones;
- a sexual advance or invitation;
- displaying offensive pictures or photographs;
- threats;
- leering;
- physical contact like touching, patting, pinching or brushing against; or
- sexual and physical assault.

LATERAL VIOLENCE

Lateral violence is not just an individual's behaviour. It often occurs when a number of people work together to attack or undermine another individual or group. It can also be a sustained attack on individuals, families or groups.

Examples of overt lateral violence:

- **Bullying & Intimidation:** Yelling, making threats, or using aggressive body language.
- **Verbal Attacks:** Name-calling, shouting, or making snide comments and insults.
- **Sabotage:** Deliberately ruining a coworker's work or reputation.
- **Harassment:** Making inappropriate jokes or comments.

Examples of covert lateral violence:

- **Withholding Information:** Intentionally not sharing crucial details needed for a job.
- **Social Exclusion:** Ignoring someone, creating cliques, or refusing to work with them.
- **Gossip & Rumors:** Spreading false or negative stories about colleagues.
- **Undermining:** Undermining someone's authority or competence through subtle actions.
- **Gaslighting:** Making someone doubt their own sanity or perception.
- **Passive-Aggressive Behaviors:** Eye-rolling, sighing, or using sarcastic tones.
- **Unfair Treatment:** Favouritism or unjust evaluations.

REPORTING HARASSMENT OR LATERAL VIOLENCE

If you have experienced or observed harassment or lateral violence in your workplace, you must report it to your employer to first try to resolve the issue internally. Reference your workplace's harassment policy for information on reporting options and the investigation process.

If the Employer has failed to take reasonable steps to address the matter, workers can request the assistance of the Ministry of Labour Relations and Workplace Safety's Occupational Health and Safety Branch.



SOURCE: <https://www.saskatchewan.ca/business/safety-in-the-workplace/hazards-and-prevention>



PANDEMICS & OUTBREAKS: Safety is NOT Negotiable

Nurses are acutely aware of how dangerous infectious diseases can be and how rapid they can spread if the transmission of the virus is not contained. As we learned during the COVID-19 pandemic, information is rapidly changing. At the foundation of it all, we should be following precautionary principles and planning for the unknown risks - the safety of healthcare workers is not negotiable.

During the height of the COVID-19 pandemic, the Canadian Federation of Nurses Unions (CFNU) published the “Safety Is Not Negotiable Pandemic Preparedness – the Coronavirus 2019 (COVID-19)” position statement. This statement calls upon governments and employers to ensure health care workers have access to the personal protective equipment necessary to safely care for their patients.



CFNU's complete position statement can be found @ <https://nursesunions.ca/position-statement-on-covid-19/>

NURSES CHECKLIST FOR PANDEMIC SITUATIONS

- Comply with existing workplace infection control policies and procedures.
- Stay home when you are ill.
- Update your N95 respirator fit testing and wear an N95 respirator if there could be any risk of exposure.
- Use required droplet, contact and additional airborne precautions such as (but not limited to): gloves, goggles, impermeable or at least fluid-resistant gowns, face shields, respirators, powered air-purifying respirators (PAPR) when available (for aerosol-generating medical procedures, e.g., intubation).
- Conduct a point-of-care risk assessment employing your professional judgement before each interaction with an affected patient and/or the patient's environment to evaluate the risk of exposure to contact and/or contaminated air in care procedures, equipment and treatment settings; at any time during this risk assessment nurses may request an increase in PPE.
- If you have any health conditions of concern when caring for presumed or confirmed cases, please consult your health care provider.
- Avoid touching your eyes, nose and mouth with hands to prevent self-contamination; clean hands before contact with any part of the body. Avoid contact between contaminated gloves/hands and equipment and the face, skin or clothing when removing PPE.
- Familiarize yourself with your collective agreement and legislation with respect to pandemic preparedness, occupational health and safety (OH&S) and the right to refuse dangerous work.
- STOP if you do not have the required personal protective equipment or properly fitted respiratory protection, and/or have not been trained, drilled and tested in its care, use and limitations, and speak with your manager or supervisor; document the situation and copy your union and Joint OH&S Committee representative.
- REPORT any health and safety concerns, including gaps in adequate protocols and procedures and/or communications, access to PPE, fit-testing and/or training or other health and safety concerns to your manager or supervisor, copying your Joint OH&S Committee and your union.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Ensuring employees have access to the necessary personal protective equipment (PPE) to safely perform their duties is a requirement of the Employer under Part VII of the Occupational Health and Safety Regulations.

To ensure their own safety, healthcare workers should:

- Receive annual fit-testing for N95 respirator.
- Receive proper training and education to safely using required PPE.
- Receive proper training and education for safely donning and doffing PPE.
- Have ease of access and availability to necessary PPEs based on point of care risk assessment (gowns, gloves, masks, face shields, goggles, etc)
- Be aware of employer policies and procedures.

POINT OF CARE RISK ASSESSMENT (PCRA)

A PCRA, an activity that is based on the individual nurses' professional judgment (i.e., knowledge, skills, reasoning and education), should be completed before each interaction with a patient and their environment in all health care settings, including acute care, continuing care and community care. The purpose of a PCRA is to protect patients, visitors and health care workers by preventing and controlling the spread of infectious diseases.

Underlying the PCRA is the principle that individual health care workers are best positioned to determine the appropriate PPE required based on the situation and their interactions with an individual patient. They do so by evaluating the likelihood of exposure to themselves or others based on a specific task, environment, conditions, interaction or patient. Among the factors that should be considered in the PCRA are:

- the potential for contamination of skin or clothing; exposure to blood, body fluids or respiratory secretions;
- the potential for inhaling contaminated air; the patient's ability or willingness to comply with infection control practices (e.g., wearing a mask);
- whether care requires very close contact; what engineering and administration controls are in place; and
- whether the patient could require an aerosol-generating medical procedure at any point and/or is in an aerosol-generating hot spot" (e.g.: intensive care units, emergency rooms, operating rooms, post-anesthetic care units and trauma centres) that are managing suspected or confirmed cases.

Personal protective equipment should be selected based on the potential for exposure in order to minimize the risk of exposure to HCWs, a specific patient or other patients in the environment. The SHA has developed an algorithm for healthcare workers to refer to when conducting a PCRA (See Appendix V for reference)

APPENDIX

Discriminatory Action

Steps for filing a complaint due to verbal warning, written warning, suspension, firing, demotion, or loss of wages.

SHA Point of Care Risk Assessment (PCRA)

Available on the Saskatchewan Health Authority website.

Pandemic Preparedness Checklist

Check list for conducting an annual review in advance of the cold/flu season.

Steps for Resolving Occupational Health & Safety Concerns

Available on the Saskatchewan Health Authority website.

Local OH&S Fact Sheet

Tool developed by SUN to assist in addressing member safety concerns.

Fact Finding: Tips for Talking with Members

Tips for collecting information and facts regarding a member's safety concerns.

Summary of Offence Tickets (SOTs)

List of ticket able offences in response to occupational health and safety violations.

Occupational Health & Safety Regulations

Pertinent clauses within the Occupational Health and Safety Regulations.

Glossary of Terms

APPENDIX |

Discriminatory Action

Steps for filing a complaint due to verbal warning, written warning, suspension, firing, demotion, or loss of wages.



Discriminatory Action Complaint

Workers are protected from disciplinary action or other sanctions by an employer for fulfilling their responsibilities or exercising their safety rights under Part III of The Saskatchewan Employment Act.

“**Discriminatory action**” could mean anything from a verbal warning, written warning, suspension, firing, demotion, or loss of wages.

Section 3-35 of The Saskatchewan Employment Act prohibits the employer from taking discriminatory action if the worker:

- Acts in compliance with The Saskatchewan Employment Act and regulations or a Notice of Contravention;
- Seeks to have The Saskatchewan Employment Act or regulations enforced;
- Assists with the activities of the occupational health committee (OHC) or occupational health and safety (OH&S) representative;
- Seeks to establish an OHC or OH&S representative;
- Performs the functions of an occupational health committee member or representative;
- Refuses to work pursuant to section 3-31 of The Saskatchewan Employment Act; or
- Gives information to an OHC, OH&S representative, occupational health officer, or a radiation health officer.

Discriminatory Action Complaint (continued)

STEPS FOR FILING A DISCRIMINATORY ACTION COMPLAINT

1. Contact the Harassment & Discriminatory Action Prevention Unit with the Occupational Health and Safety Division.
2. An intake coordinator will assess the situation and determine if the complaint is considered a discriminatory action case pursuant to Part III of The Saskatchewan Employment Act.
3. If the situation is considered as a discriminatory action case, a questionnaire will be sent to the complainant.
4. The complainant will complete the questionnaire and return it to the Occupational Health and Safety Division. The supervisor of the unit will review and assign the case to an officer as necessary.
5. If it is determined that the complaint is not valid or does not fall within the legislation, the supervisor will give written notice to the complainant that OH&S will not proceed.

Source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/rights-and-responsibilities-in-the-workplace/discriminatory-action>

APPENDIX II

SHA Point of Care Risk Assessment (PCRA)

Available on the Saskatchewan Health Authority website @
<https://www.saskhealthauthority.ca/system/files/2024-02/PDF-QS-G0010-PointofCareRiskAssessment.pdf>

SHA Point of Care Risk Assessment



Saskatchewan
Health Authority

Infection Prevention and Control Guidelines
Point of Care Risk Assessment

A Point of Care Risk Assessment (PCRA) is a component of [Routine Practices](#), and must be conducted by a health care worker (HCW) before every interaction with every patient* or their environment, in all health care settings. It is used to assess the risk of exposure to infectious organisms and inform appropriate selection of personal protective equipment (PPE) to minimize that risk. PPE should be readily available at all times for staff to use.

*In this document, the term patient is inclusive of patient, resident and client

Step 1: Before each patient interaction, assess

The patient



- What are the patient's symptoms (e.g., coughing, diarrhea, vomiting, rash)?
- Is the patient able to practice cough etiquette and perform hand hygiene?
- Is the patient on Additional Precautions? If yes, what type (e.g., Contact, Droplet, etc.)?

The task



- What type of task am I carrying out (e.g., providing direct face-to-face care; performing an aerosol generating medical procedure ([AGMP](#)); coming into contact with BBF¹, mucous membranes, undiagnosed rashes or non-intact skin; handling chemicals²; non-clinical interaction; etc.)?
- Does the patient need to be transported?

The environment



- Do I have easy access to the equipment and supplies needed (e.g., sharps container, hand hygiene station, cleaning and disinfection wipes, etc.)?
- Are there potential hazards around me that may impact my task (e.g., AGMP in progress, less than 2 metre spatial separation between infectious patients, etc.)?

Step 2: Select appropriate PPE

- First, put on required PPE based on Additional Precautions signage, if applicable
- Then, choose additional PPE based on your assessment of the patient, the task and the environment. Ask yourself:

Could my hands be exposed to BBF, mucous membranes, undiagnosed rashes, non-intact skin, or contaminated items?

YES

Wear gloves



Could my clothing or skin be soiled from splashes or sprays of BBF or come into contact with mucous membranes, undiagnosed rashes, non-intact skin, or contaminated items?

YES

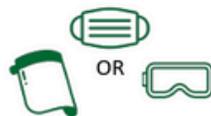
Wear gown



Could my eyes or face be splashed or sprayed with BBF or chemicals?
Will I be within 2 metres of a coughing or vomiting patient?

YES

Wear facial protection
(mask and eye)



Does the task create aerosols or contaminated particles that I could inhale (e.g., rotary device during foot care, surgical cauterization during a loop electrosurgical excision procedure, etc.)?

YES

Wear N95 respirator³ or equivalent



¹BBF - blood and body fluids (includes urine, feces, vomit, wound drainage, saliva, sputum, semen, vaginal secretions, etc.)

²Refer to the Safety Data Sheet for PPE requirements

³HCW must be fit-tested and perform a seal check prior to use

APPENDIX III

Pandemic Preparedness Checklist

Check list for conducting an annual review in advance of the cold/flu season.

Pandemic Preparedness Checklist

In the event of a pandemic, the OHC has a role and should be part of decision making re OH&S issues during pandemic (PPE, hand sanitizer, etc). An annual review in advance of the cold/flu season, is recommended.

	TASK	IN PLACE	ACTION REQUIRED
1	Do you have Regional, Facility and Unit Pandemic Plans? Has your OH&S Committee been consulted on these plans?		
2	Have all HCW received education and training regarding pandemic preparedness and, when required, the implementation of these plans?		
3	Has your facility Joint Occupational Health and Safety Committee (JOH&SC) discussed and reviewed the Exposure Control Plan for your workplace?		
4	If a worker has questions about infection control or infectious disease hazards, is it clear where the worker finds the information in a timely manner?		
5	Have all nurses who take on a supervisory or charge nurse role received additional training regarding preparedness?		
6	Are all workers aware of the person to call for information or assistance on all shifts and days of the week? Is the communication process clear to all staff?		
7	Does your workplace have a plan for segregation or cohorting of residents/patients ill with symptoms?		
8	Do all staff have immediate access to the necessary personal protective equipment for the area of practice and potential risk, including N95 Respirators?		
9	Have all nurses been trained and fit-tested for N-95 Respirators?		
10	For nurses who have not been fit-tested, or are unable to be fitted for other reasons, are there plans in place so these nurses do not care for patients with influenza or influenza-like illnesses?		
11	Are nurses aware of their right to refuse dangerous work?		
12	Have any new, relocated and/or temporary clinics and assessment sites been inspected by the OH&S Committee?		

APPENDIX IV

Steps for Resolving Occupational Health & Safety Concerns

Available on the Government of Saskatchewan website @
<https://www.saskatchewan.ca/business/safety-in-the-workplace/rights-and-responsibilities-in-the-workplace/steps-to-resolving-ohs-concerns>



Resolutions

Steps for Resolving Occupational Health and Safety Concerns

When a safety concern arises, workers should:

1. Contact their supervisor to discuss their safety concerns in an effort to resolve them. Supervisors should promptly investigate the concern and take any appropriate corrective action. If the supervisor can't resolve the concern, he/she should contact the employer/manager about the concern.
2. If the issue can't be resolved between the worker and supervisor, or the supervisor refuses to address the issue, workers should contact their occupational health committee or occupational health and safety representative. The committee should try to resolve the concern with the workers and the supervisor and employer/manager if necessary.
3. If the issue cannot be resolved, contact occupational health and safety. An occupational health officer may be able to offer some advice/assistance to help resolve the problem.

When a committee identifies unsafe conditions at the workplace, they should provide written a notice about the unsafe condition(s) and their recommended corrective action(s) to the employer.

When employers receive the committee's recommendations, they:

- Are required to inform the committee/representative in writing of the actions they have taken or will take to correct the unsafe condition. Or, if the employer chooses not to correct the unsafe condition(s), they must give written reasons for this as well.
- If the employer did not accept the recommended corrective actions, the committee may need to find other suitable solutions for the unsafe condition(s).
- If the issue cannot be resolved, an occupational health officer should be called. The officer will try to help both sides find an acceptable solution. If that is not possible, the officer will make a decision based on the requirements of *The Saskatchewan Employment Act* and regulations.

APPENDIX V

Local OH&S Fact Sheet

Tool developed by SUN to assist in addressing member safety concerns.

Local OH&S Fact Sheet



Occupational Health & Safety Fact Sheet

LOCAL INFORMATION

Facility/Agency

Name _____ Local # _____

Prepared By _____ Position _____

Contact Information Phone # _____ Email _____

MEMBER INFORMATION

Last Name _____ First Name _____

Email _____ Phone _____

DIRECT SUPERVISOR/MANAGER

Name (Last, First) _____ Title _____

Email _____ Phone _____

Notified? When & how _____

FACTS OF THE ISSUES

1. Unit/Department**2. Shift Details**Date (DD/MM/YY)

Day S M T W Th F S

Shift Day Evening Night

Identify Type of Hazard

- Biological (eg: bacteria, viruses, mold, insects, and humans)
- Chemical (eg: depends on the physical, chemical and toxic properties of the chemical)
- Ergonomic (eg: repetitive movements, improper set up of workstation)
- Physical environment (eg: noise, lighting, air quality)
- Psychosocial (eg: stress, violence)
- Safety (eg: slipping/tripping hazards, equipment malfunctions or breakdowns)

Details/Comments:**Concern, Incident or Hazard Identified by Member**Causes: Task-oriented Materials Environment Personnel Training
 Management/Employer Policy Other: _____Frequency: First Occurrence Reoccurrence - please circle: unit level or facilityMedical Treatment Required? Yes No WCB Claim? Yes NoLost Time? Yes No**Comments:**

Local OH&S Fact Sheet (continued)

3. Discussion with Member

Date & Time: _____

Notes:

ISSUE: Resolved Unresolved

DOCUMENTATION: Incident Report WSR filed

Witness(es): Yes No

Name: _____ Phone/Email: _____

Name: _____ Phone/Email: _____

Name: _____ Phone/Email: _____

4. Impact on Safety/Risk of Harm (check all that apply)

Patient Safety Actual Potential

Staff Safety Actual Potential

SUPPORTING DOCUMENTS Attach relevant information, if available

Employer Policies Employer Communication Other: _____

POTENTIAL RESOLUTION

LOCAL PRESIDENT/EXECUTIVE COMMUNICATION (if required)

Date: _____ Time: _____

Notes:

FOLLOW UP WITH MEMBER (if required)

Date: _____ Time: _____

Notes:

DISTRIBUTION: Original copy for Local OH&S Representative
 Copy provided to Local Executive
 Copy provided to SUN Provincial (Employment Relations Officer)
[as required for significant events]

APPENDIX VI

Fact Finding: Tips for Talking with Members

Tips for collecting information and facts regarding a member's safety concerns.



Fact Finding: Tips for Talking with Members

If the speaker is a “Compulsive Talker”:

You will need to phrase your questions in such a way that will limit the range of responses. Avoid questions that allow the speaker to launch in a lengthy monologue – in this case, use close ended questions. There may be a time when you ask the speaker to refocus their attention on the main issue – a good way to do this without alienating them in the process is to say “That’s very interesting and I would like to hear more about it if time permits, yet there are points we need to cover if we’re both to profit from our interview. Do you mind if we come back to this and move into the area of ____?”

What about the “non-talker”?:

Use open ended questions and short probes such as “tell me more,” “Oh?” “Could you clarify this for me?” “I’m not sure I follow you there.” “That’s interesting – what makes you feel that way?” Non-talkers may be lacking confidence or experiencing anxiety. If you detect this in the early stages of the interview, spend more time on rapport building. Stories about similar experiences or backgrounds between the two of you may help. If you detect nervousness, start your interview with relatively easy questions.

If the person is hostile:

Your initial response to anger should be one of calm neutrality yet sincere interest.

Allow the person to speak, register a complaint, etc. uninterrupted.

Follow up by repeating the facts as you heard them, asking for clarification and probing.

After you have listened to the facts, do not be afraid to confront the viewpoints if they are founded on incomplete or distorted information.

Tips for Talking with Members (continued)

Remember, the anger may be directed at you or at someone else. If the anger is directed at you, avoid becoming defensive. After the person has calmed down, strive to understand the nature of the anger or complaint – restate to get clarification.

If the anger is focused towards you, you may be able to either:

- See his/her point of view and rectify your own behavior, or,
- Provide him/her with your own interpretation and intent of the behavior.

Help the person to see the conflict is not between the two of you, but rather between two points of view regarding a specific action or behavior. An area of objectivity may develop where actions are divorced from personalities. Rational discussion can then replace the emotional exchange.

If the member's anger is directed at someone else, remain calm and probe for understanding and clarity. The greatest pitfall during this kind of interview is to "line up" on the side of the person to whom the anger is directed, especially if the anger is directed at a fellow union member.

If during your conversation you both agree on the interpretation of the events, determine what you believe should be done about the problem in the short- and long-term. Determine next steps and how you plan to address or escalate the situation.

APPENDIX VII

Summary Offence Tickets (SOTs)

List of ticket able offences in response to occupational health and safety violations..



SAFETY

Summary Offence Tickets (SOTs)

WHAT IS A SUMMARY OFFENCE TICKET?

A Summary Offence Ticket (SOT) is a ticket issued by one of two designated Occupational Health Officers. The Ministry of Labour Relations and Workplace Safety and the Ministry of Justice have created summary offence tickets for certain occupational health and safety violations.

There are 12 ticketable offences. They include fall protection, excavations / trenching, personal protective equipment, submission of progress reports to the Occupational Health and Safety Division and submission of information requested by the Director.

Fines range from \$250 to \$1,000 depending on the offence.

Summary Offence Tickets are like speeding tickets. They will typically be issued either on the spot or sent by mail depending on the situation and circumstances. Either way, the officer will assess the situation and facts on the ground before issuing a ticket. Everyone who receives a ticket will have the right to challenge the ticket in court.

WHO CAN BE TICKETED?

Tickets will mainly be directed toward employers, contractors, owners, self-employed persons and suppliers.

There is only one offence that applies to workers - clear failure to use personal protective equipment (PPE) that has been provided by one's employer. Before ticketing a worker, officers will assess if the worker was provided with the correct PPE, received adequate training on its use, and was clearly directed to use the PPE but chose not to.

WHEN WILL A TICKET BE ISSUED?

Summary Offence Tickets will only be issued when all other tools are ineffective in making sure that health and safety in the workplace is not compromised - especially in high risk operations (e.g., trenching).

Summary of Offence Tickets (continued)

Officers will assess the severity of the situation and will try to use other tools first, such as Compliance Undertakings, Officer's Reports, Notice of Contraventions and Stop Work Orders. Parties will have ample opportunity to address their health and safety issues before a ticket is issued.

LIST OF OFFENCES AND FINES

The fine for each offence is determined pursuant to The Summary Offence Procedures Regulations, 1991. Note that these fine amounts are subject to a victim surcharge established pursuant to section 13 of The Victim's of Crime Act, 1995.

Offence	Section of Act or Regulations	Fine Amount/Liable Parties
Failing to submit a written progress report	3-43(b)	\$600 Employers, self employed persons, suppliers, contractors, owners
Failing to submit information requested by the Director	3-64(1)	\$600 Employers, self employed persons, suppliers, contractors, owners
Failing to supply approved personal protective equipment	87(1)(a) Regulations	\$1,000 Employers, contractors
Failing to ensure that workers use personal protective equipment	87(1)(b) Regulations	\$1,000 Employers, contractors
Worker failing to use provided personal protective equipment	87(4)(a) Regulations	\$250 Workers
Failing to ensure that workers use a fall protection system where a worker may fall three metres or more	116(2)(a) Regulations	\$1,000 Employers, contractors
Failure to ensure that workers use a fall protection system where there is a possibility of injury if a worker falls less than three metres	116(2)(b) Regulations	\$1,000 Employers, contractors
Failing to ensure that any opening or hole is covered and clearly marked or otherwise protected	124(1) Regulations	\$1,000 Employers, contractors, owners
Failing to provide an effective safeguard	137(1) Regulations	\$1,000 Employers, contractors
Failing to ensure that workers are protected from cave-ins or sliding material in an excavation	262(1) Regulations	\$1,000 Employers, contractors
Failing to ensure that workers are protected from cave-ins or sliding material in a trench	263(1) Regulations	\$1,000 Employers, contractors
Failing to implement a hazardous confined space entry plan	272(3) Regulations	\$1,000 Employers, contractors

(source: <https://www.saskatchewan.ca/business/safety-in-the-workplace/enforcements-prosecutions-and-investigations/summary-offence-ticketing>)

APPENDIX VIII

Occupational Health & Safety Regulations

Pertinent clauses within the Occupational Health and Safety Regulations.



OH&S Regulations

The following is a list of pertinent clauses within the Occupational Health and Safety Regulations to take note of:

Part 3 - General Duties

- Section 6 – Supervision of Work
- Section 8 – Training of Workers
- Section 9 – Workers contact with Officers
- Section 11 – OH&S program
- Section 14 – Maintenance and repair of equipment
- Section 17 – Inspections
- Section 18 – Investigation of certain accidents
- Section 21 – Inquiries requiring medical treatment
- Section 24 – Working alone in isolation
- Section 25 – Harassment
- Section 26 – Violence

Part 4 - Committee and Representatives

- Section 2 – Designation of committee members
- Sub-section (1)(a)(ii) – Number of worker representatives
- Sub-section (1)(b) - Length of term
- Section 3 – Quorum
- Section 4 – Frequency of meetings
- Section 5 – Minutes
- Section 6 – Co-chairpersons
- Section 7 – Special Meetings
- Section 8 – Designated representatives
- Section 9 – Training of representatives, committee members

OH&S Regulations (continued)

Part 4 - Committee and Representatives (continued)

- Sub-section (1) – Designated representatives shall be trained
- Sub-section (2) – Co-chairs shall be trained
- Sub-section (3) – Access to five (5) paid working days (no loss of pay or benefits)
- Section 10 – Meetings of employers and representatives
- Section 11 – Opportunity for necessary activities
- Sub-section (1) (a) access to logbooks, inspection reports, or other records
- Sub-section (2) – no member of a committee or representative participating shall have any loss of pay or benefits when participating

Part 7 - Personal Protective Equipment

- Section 11 – Footwear
- Sub-section (1) – Appropriate footwear for risk associated with workplace
- Section 13 – Exposure to hazardous substances

Section 19 – Lanyards

- Part 31 – Additional Protection for Healthcare Workers
- Section 3 – Additional requirements re supervisors in health care facilities
- Section 4 – Patient moving and handling
- Section 5 – Cytotoxic drugs
- Section 8 – Waste needles, etc
- Section 9 – Selecting needle-safe devices
- Section 10 – Injury log (percutaneous injury with sharps)
- Section 11 – Contaminated laundry
- Section 12 – Anesthetic gases

APPENDIX IX

Glossary of Terms



Glossary of Terms

Employee or Worker

An individual, including a supervisor, who is engaged in the service of an employer. (Saskatchewan Employment Act, Section 3-29)

Employer

A person, firm, association or body that has, in connection with the operation of a place of employment, one or more workers in the service of the person, firm, association or body. (Saskatchewan Employment Act, Section 3-29)

Harassment

Any inappropriate conduct, comment, display, action or gesture by a person that either:

- is based on race, creed, religion, colour, sex, sexual orientation, marital status, family status, disability, physical size or weight, age, nationality, ancestry or place of origin; or
- adversely affects the worker's psychological or physical well-being and that the person knows or ought reasonably to know would cause a worker to be humiliated or intimidated; and
- that constitutes a threat to the health or safety of the worker. (Saskatchewan Employment Act, Section 3-1)

Harm

Physical injury or damage to health.

Hazard

Any source of potential damage, harm or adverse effects on something or someone under certain conditions at work. (Canadian Centre for Occupational Health and Safety)

Glossary of Terms (continued)

Joint Occupational Health and Safety Committee (JOH&SC)

An advisory group of 2-12 members, consisting of employers and employees, working together to improve occupational health and safety in their workplace. Workplaces where 10 or more workers are required to establish an Occupational Health and Safety Committee; joint committees are required for high hazard workplaces with 5-9 workers.

Material Safety Data Sheet (MSDS)

Provides basic information on a material or chemical product. A MSDS describes the properties and potential hazards of the material, how to use it safely, and what to do in an emergency. The purpose of this document is to assist Canadian employees in understanding and interpreting this type of information.

Occupational Health and Safety (OH&S)

1. the promotion and maintenance of the highest degree of physical, mental and social well-being of workers;
 2. the prevention among workers of ill health caused by their working conditions;
 3. the protection of workers in their employment from factors adverse to their health;
 4. the placing and maintenance of workers in working environments that are adapted to their individual physiological and psychological conditions; and
 5. the promotion and maintenance of a working environment that is free of harassment.
- (Saskatchewan Employment Act, Section 3-29)

Occupational Health and Safety Officer (OHO)

A person appointed as an Occupational Health Officer within the Occupational Health & Safety Division of the Ministry of Labour Relations and Workplace Safety.

Personal Protective Equipment (PPE)

Protective clothing, helmets, goggles, or other garments or equipment designed to protect the wearer's body from injury or infection. The hazards addressed by protective equipment include physical, electrical, heat, chemicals, biohazards, and airborne particulate matter. PPEs are used as temporary (until more effective hazard control techniques can be used) or last line of protection for workers against hazards.

Practicable

Possible given current knowledge, technology and invention. (Saskatchewan Employment Act, Section 3-1)

Glossary of Terms (continued)

Professional Assault Response Training (PART®) Program©

This training provides workers with the understanding of, and ability to assess, potentially violent situations and a means to manage, reduce or eliminate risks. PART interventions

Reasonably Practicable

Practicable unless the person on whom a duty is placed can show that there is a gross disproportion between the benefit of the duty and the cost, in time, trouble and money, of the measures to secure the duty. (Saskatchewan Employment Act, Section 3-1)

Safe Moving And Repositioning Techniques (SMART®) Program©

The SMART program aligns directly with the TLR Object Moving course. SMART may be implemented in areas where there are no clients involved in the day-to-day work.

Summary of Offence Ticket (SOT)

A Summary Offence Ticket (SOT) is a ticket issued by one of two designated Occupational Health Officers. The Ministry of Labour Relations and Workplace Safety and the Ministry of Justice have created summary offence tickets for certain occupational health and safety violations.

Supervisor

An individual who is authorized by an employer to oversee or direct the work of the employer's worker. (Saskatchewan Employment Act, Section 3-29)

Workplace Assessment Violence Education (W.A.V.E.)©

W.A.V.E. focuses on appropriate communication, awareness of surroundings and the safest "zone" to approach an individual to perform a task. This program assists workers with understanding how to protect themselves in an adverse situation

Workplace Hazardous Materials Information System (WHMIS)

WHMIS is Canada's hazard communication standard. It lets you know of all the potential dangers of a specific product. The key elements of the system are cautionary labeling of containers of WHMIS "controlled products", the provision of material safety data sheets (MSDSs) and worker education programs.

Workplace Responsibility System (WRS)

The duty for creating and maintaining a healthy and safe workplace falls on every person in the workplace to the degree they have the authority and ability to do so. Whether they are the Employer or the newest worker hired, everyone has a personal and shared responsibility for working together to prevent occupational injuries and illnesses.



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