

	Saskatchewan Health Regional Health Services Policy & Procedure Manual	Status: Current
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Section: Health Human Resources Planning		Branch Contact: 787-3152
Title:	RHA-SCA QUALITY WORKPLACE AND SAFETY INITIATIVES: PARAMETERS AND REPORTING GUIDELINES	

INTENT:

To provide Funding Parameters and Reporting Guidelines for regional health authorities (RHAs) and Saskatchewan Cancer Agency (SCA) regarding Quality Workplace and Safety Initiatives. These parameters and guidelines will assist the RHAs/SCA in outlining eligible funding to support their proposed initiatives for Quality Workplace and Safety Initiatives.

LEGISLATIVE AUTHORITY:

None

RELATED GUIDELINES (Links):

GUIDELINE/GENERAL INFORMATION:

RHA-SCA Quality Workplace and Safety Initiatives: Parameters and Reporting Guidelines



**Saskatchewan
Health**

**RHA-SCA Quality Workplace
and
Safety Initiatives: Parameters and Reporting Guidelines**

March 2007

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Funding Allocation for Quality Workplace and Occupational Health and Safety Guidelines

BACKGROUND and PRINCIPLES

Occupational Health and Safety

Saskatchewan Health recently released *Working Together: Saskatchewan's Health Workforce Action Plan* that outlined Saskatchewan's Vision and Goals for the Health Workforce. Goal 2 addresses the need for a health system that encourages safe, supportive and quality workplaces that help to retain and recruit health care professionals

The cost of an unsafe workplace is an important part of the business case for focusing on workplace safety. The Worker's Compensation Board (WCB) rates for the Health sector (or G22) were raised for three consecutive years starting in 2002. The Health sector consistently has rates above the other sectors with regard to injury claims and time lost. Registered Nurses have an injury rate of 8.6%, and the rate for assisting occupations including LPNs is higher.

New federal legislation exists that holds all who "direct the work force" culpable for occupational health and safety in the workplace.

A number of years ago, Saskatchewan Health made the decision not to fund WCB premiums and surcharges after funds were provided to districts for Learning and Development. Previous funding for WCB premiums was added into the base. In recent budgets, regions have been provided with both funding for WCB premiums and Learning and Development Funds. Saskatchewan Health does not fund surcharges to premiums nor does it claw back rebates on premiums.

Saskatchewan Health has also indicated to the Health Regions that they must take action to reduce workplace accidents and injuries, and utilize workplace wellness funding that had been previously allocated in order to find solutions to the injury rate. A requirement that Regions formulate an Occupational Health and Safety (OH&S) Strategy to deal with all aspects of workplace accidents and injuries was added to the Accountability Agreement for 2006/07.

Saskatchewan Health has been facilitating an OH&S working group. This group is representative of members from the various RHAs. This group has successfully developed a Provincial OH&S strategy in collaboration with employers (Appendix A).

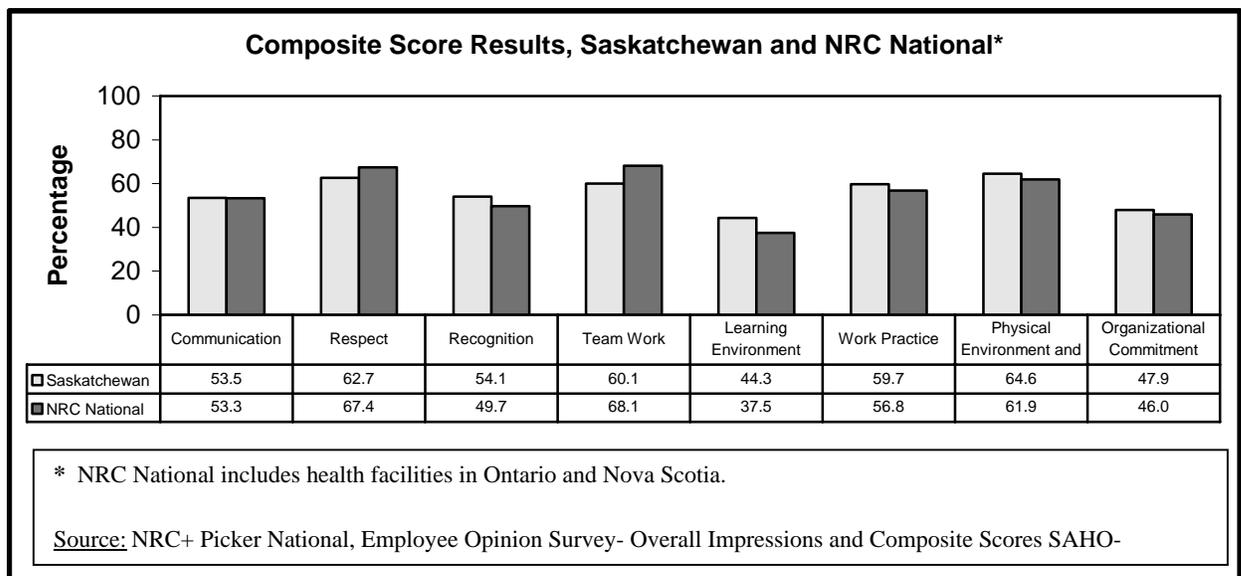
Quality Workplace

Part of the Federal Funding for Provincial Health Care is to be spent on retaining health care professionals by providing safer, higher quality workplaces and continuing education. One-time funding of (\$2 million) is being directed to **Quality Workplace Initiatives**, the purpose of which is to develop initiatives based upon identified needs to improve worker morale, job satisfaction, turnover rates, absenteeism, illness and injury rates. This translates into the dedication of resources and the building of capacity within the health system and health regions to improve organizational development issues that contribute to staff satisfaction.

Saskatchewan Health is committed to the development and implementation of Quality Health Workplaces in our province and view this as a long-term goal in the retention and recruitment of quality health professionals to our province (Appendix B). To this end, we are currently initiating two lines of project development and implementation around quality workplaces that are currently underway within or have been identified as essential by, regional health authorities. The overall funding provided to the regional health authorities will be 2.3 M.

Both project streams will be considered through their adherence to quality workplace outcomes as identified in the attached, including job satisfaction, client satisfaction and health, retention rates, recruitment rates, self-assessed physical, emotional, and mental employee health, etc,

Based on the results of the employee opinion survey, completed in 2005, there were eight competencies identified as pertinent areas for quality workplace for Saskatchewan health care workers:



A. Quality Workplace Initiatives

- I. Communication**
- II. Learning Environment**
- III. Organizational Commitment**
- IV. Physical Environment/ Safety**
- V. Recognition**
- VI. Respect**
- VII. Teamwork**
- VIII. Work Practice**
- IX. Other**

B. Occupational Health and Safety Initiatives

- I. Leadership Training in OH&S**
- II. TLR**
- III. SAHO Training**
- IV. OH&S Committee Development**
- V. OH&S Workshops**
- VI. Violence in the Workplace**
- VII. Non- Violence Crisis Intervention**
- VIII. Mentorship**
- IX. Other**

The allocated dollars can be spent by each RHA and the Saskatchewan Cancer Agency to invest in the above QWP and OH&S initiatives in a manner specific to the needs of their employees.

Target Groups: Each RHA may target this funding to staff and/or program areas that would benefit from QWP and OH&S initiatives. Possible target groups would be: professional groupings, entire work units, front line staff and managers/executives.

For RHAs that have not had previous successes with implement QWP and/or OH&S strategy/programs, it may be more beneficial to ensure that executive/senior management staff is familiar with their QWP and OH&S strategy/programs. This will increase their knowledge base about the QWP and OH&S strategy/programs and generate enthusiasm for the implementation of the strategy among managers while also providing concrete evidence of support for the QWP and OH&S strategy/programs at senior levels.

Cost and Billing/Accountability Procedures: The funds for the specific courses can be used towards the following costs:

- Accommodations/Travel;
- Meeting Room Costs;
- Honorariums;

- Incentives (this could include recognizing work groups for enhanced QWP and OH&S initiatives or recognizing supervisors who lead by example, QWP and OH&S initiatives within their team, unit etc).
- Materials (including books, stationary, handouts, posters); and Coffee and refreshments.

C. Other Quality Workplace or OH&S Initiatives/ Programs

Funding could be provided to RHAs that are interested in the development of a QWP similar to what was done by the Saskatchewan Registered Nurses Association Quality Workplace Initiative.

Please Note: Saskatchewan Health is undertaking a programmatic needs assessment for joint quality workplace and OH&S initiatives, and thus invites comments and feedback. If you have any comments please contact Director of Resource and Program Development at (306) 787-5693.

I. Specific Courses, Training Seminars and/or Guest Speakers

Purpose: Healthy and safe working conditions have been linked to lowered injury rates, job satisfaction and improved quality of care. This program area is intended to ensure that workers and managers receive training in, or information on, areas that are pertinent to specific regional, sector, and/or occupational needs and requirements. Topics might include (but are not restricted to):

- Creating a Quality Workplace;
- Creating a Safety Culture
- Management Competencies for Health Personnel through SAHO and,
- Change Management.

There are two vehicles for professional education and training: specific courses and training seminars, and guest lecturers.

A. Specific Courses and Training Seminars

One means of providing training is through the utilization of specific courses and training seminars regarding quality workplace initiatives. These can be developed in-house or through the use of external agencies.

Target Groups: Each RHA may target the specific courses and training seminars to individual staff and/or program areas that would most benefit from these specific courses. Possible target groups would be: professional groupings, entire work units, front line staff or managers/executives.

Cost and Billing/Accountability Procedures: The funds for the specific courses can be used towards the following costs:

- Accommodations/Travel;
- Meeting Room Costs;
- Honorariums;
- Incentives (this could include recognizing work groups for enhanced quality workplace initiatives or recognizing supervisors who lead by example, quality workplace initiatives within their team, unit etc).
- Materials (including books, stationary, handouts, posters); and
- Coffee and refreshments.

B. Specific Guest Speakers

The regions may invite guest speakers to provide information or training seminars on pertinent regional employee health and wellness topics to their region.

Target Groups: Each RHA may target the guest lectures to individual staff and/or program areas that would most benefit from enhanced learning opportunities. Possible target groups would be: professional groupings, entire work units, front line staff or managers/executives.

Cost and Billing/Accountability Procedures: The funds for the lecturers can be used towards the following costs.

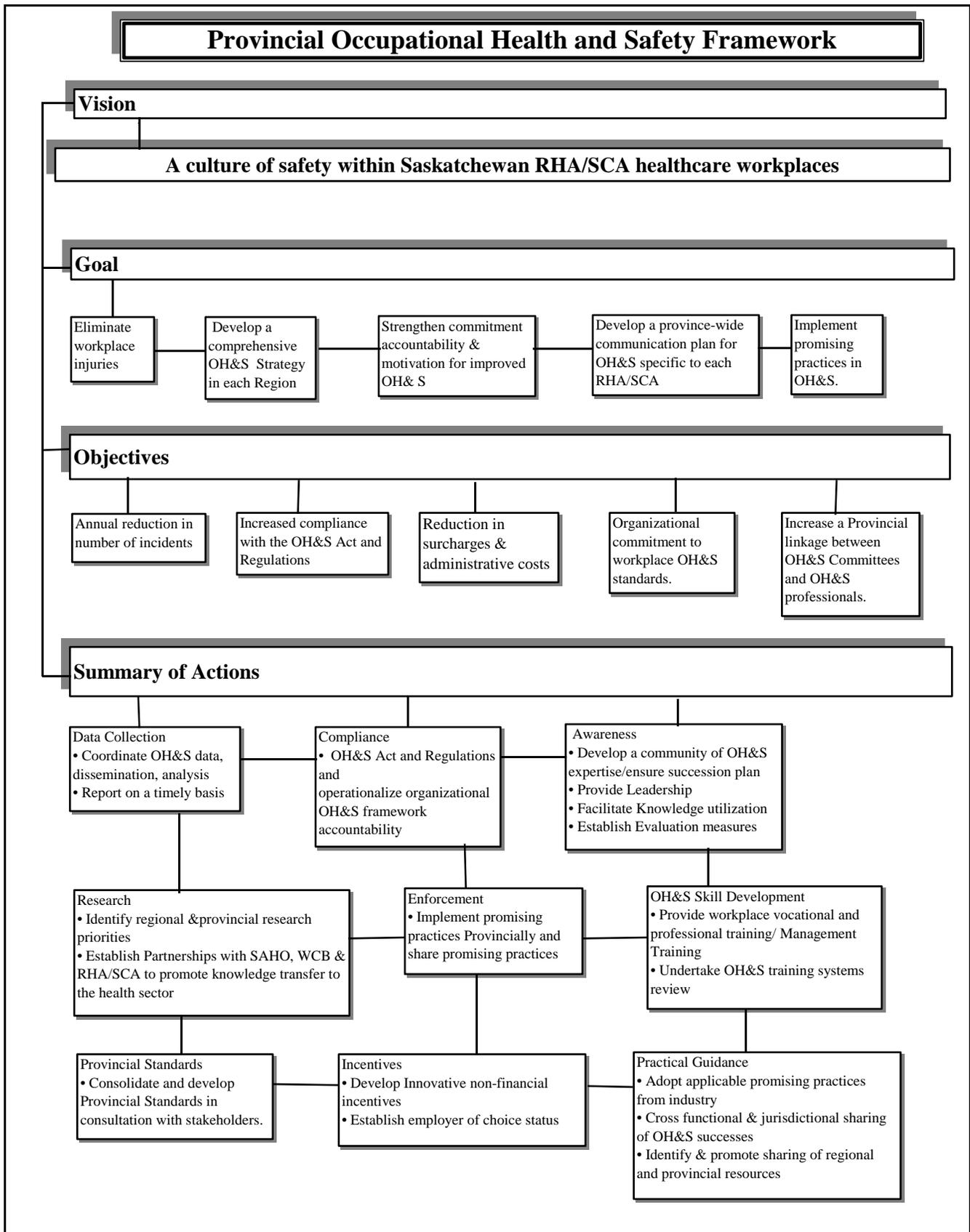
- Accommodations/Travel;
- Meeting Room Costs;
- Honorariums;
- Materials (including books, stationary, handouts, posters); and
- Coffee and refreshments.

Funding To Date:

Quality Workplace Initiatives: Budget Allocation by Region

Table 1: Breakdown of Budget

Regional Health Authority	% Provincial FTEs (approx.)	Budget 2005-2006 (\$)	Budget 2006-2007 (\$)
Sun Country	5.66	69,810	34,905
Five Hills	4.65	66,275	33,138
Cypress	4.07	64,245	32,123
Regina Qu'Appelle	24.88	137,080	68,540
Sunrise	7.47	76,145	38,073
Saskatoon	29.82	154,370	77,185
Heartland	3.81	63,335	31,668
Kelsey Trail	4.15	64,525	32,263
Prince Albert Parkland	6.02	71,070	35,535
Prairie North	6.85	73,975	36,988
Mamawetan Churchill River	0.65	52,275	26,138
Keewatin Yatthé	0.82	52,870	26,435
Saskatchewan Cancer Agency	1.15	54,025	27,013
Total	100.00	1,000,000	500,000



Health Sector Occupational Health and Safety – The Current Situation – Draft

Workplace Safety is an important issue that is being given increasing attention around the world. Initiatives in Canada include the Canadian Injury Prevention Strategy, which is a multisectoral initiative with funding from the Insurance Bureau of Canada and others, including SMARTRISK, a Canadian Injury Prevention Organization and Think First. The Canadian Patient Safety Network was created from the First Ministers Accord and is working across the country to promote patient safety.

Saskatchewan Health recently released *Working Together: Saskatchewan's Health Workforce Action Plan* that outlined Saskatchewan's Vision and Goals for the Health Workforce. Goal 2 is: The health system has safe, supportive and quality workplaces that help to retain and recruit health care professionals. This fits in with work being done by Saskatchewan Health as part of its Goals and Objectives for 2005-06. Goal 3 is to Retain and Recruit Health Providers, with one of the objectives being to "Create healthier, more effective work places."

The cost of an unsafe workplace is an important part of the business case for focusing on workplace safety. The Worker's Compensation Board (WCB) rates for the Health sector (or G22) were raised for three consecutive years starting in 2002. The Health sector consistently has rates above the other sectors with regard to injury claims and time lost. Registered Nurses have an injury rate of 8.6%, and the rate for assisting occupations including LPNs is higher. Health sector data based on 2003 data indicate:

- 2,700 time loss injuries
- 18% of all time loss injuries
- 35% increase in last five years
- 50% higher injury rate than provincial average

New federal legislation exists that holds all who “direct the work force” culpable for occupational health and safety in the workplace.

A number of years ago, Saskatchewan Health made the decision not to fund WCB premiums and surcharges after funds were provided to districts for Learning and Development. Previous funding for WCB premiums was added into the base. In recent budgets, regions have been provided with both funding for WCB premiums and Learning and Development Funds. Saskatchewan Health does not fund surcharges to premiums nor does it claw back rebates on premiums. Saskatchewan Health has also indicated to the Health Regions that they must take action to reduce workplace accidents and injuries, and utilize workplace wellness funding that had been previously allocated in order to find solutions to the injury rate. A requirement that Regions formulate an Occupational Health and Safety (OH&S) Strategy to deal with all aspects of workplace accidents and injuries was added to the Accountability Agreement for 2006/07.

The Consultation Process

The Health Human Resource Planning Branch (HHRPB) undertook the process of developing a framework with partners in the regions in order to meet the Accountability objectives set forth. The participants included:

- Representation from the regional health authorities
- Worker’s Compensation Board & Saskatchewan Association of Health Care Organizations (SAHO)
- Saskatchewan Labor & Saskatchewan Health

This purpose of the framework is to set some provincial objectives as a step towards improvement in the health sector OH&S performance. The objectives are to achieve:

- Annual reduction in number of incidents
- Increased compliance with the OH&S Act and Regulations
- Reduction in administration of surcharges and administrative costs
- Increase worker/mgmt expectations of OH&S.
- Coordinate the linkage between existing OH&S working committees

The provincial goals are designed to make significant improvements in the health OH&S sector. In order to do this it is imperative to:

- Update and align regulatory controls-compliance, enforcement, incentives & guidance
- Raise the internal profile of OH&S-awareness, expectations of employees and employers to achieve higher standards in the workplace
- Develop broad skill base & OH&S training so that the problems can be solved where & when they arise-thus creating "institutional capacity building.

What We Heard

A consultation process with the regional health authorities, and our various partners revealed various resources that will need to be developed and or enhanced.

- OH&S monitoring and reporting systems
- Central coordination and control of OH&S resources
- Compliance support
- Strategic enforcement with incentives
- Enhanced employee & employer awareness, motivation and commitment
- Enterprise wide OH&S skills development.

During the consultation process these themes resurfaced.

- Leadership
- Human resource management
- OH&S training systems
- The need to develop a "culture of safety"

The need for increased resources to drive the OH&S agenda at the regional level was a recurring theme. A shared and compelling OH&S vision to drive the cultural change is important. The need for "safety champions" who can lead the agenda to create a culture

of safety supported by an internal responsibility system is noted. The need for members of the health care system to recognize that safe work practices and quality of client care are equal partners in creating a quality workplace was voiced by several of the participants.

The consultation process moved from problem identification towards developing goals, objectives, and identifying key required actions. The framework developed from that process, and is adapted from the Australian model.

HUMAN CAPITAL		
<i>Issues Identified</i>	<i>Goals</i>	<i>Key Success Factors</i>
<ul style="list-style-type: none"> • Students not competent to work safely. • OHS training not mandatory in the workplace, lack of standardization. • Frequency of training may not be consistent with promoting a change of practice or reinforcing a cultural change. 	<p>Ensure that students receive training while in school so that they are “employer” ready.</p> <p>Develop and review standardize training programs for TLR.</p> <p>Encourage employers to utilize these programs</p>	<p>Managers and employees must ensure that employee is competent to practice safely on each unit that they are employed.</p> <p>Work with educational services and managers to ensure that critical training is provided to the employee. Need to conduct training needs review for OH&S Health Sector.</p>
<ul style="list-style-type: none"> • Safety policies that are not aligned with OH&S strategy nor reflective of best practices. 	<p>To have an up to date repository of OH&S “ready to use tem plated” polices and best practices that can be quickly adopted into practice.</p>	<p>Create an electronic tool/forum whereby policies and new OH&S initiatives can be shared.</p> <p>Facilitate knowledge exchange & translation forums into best practice.</p>
<ul style="list-style-type: none"> • Develop a “(w) holistic performance management system that incorporates-OH&S benchmarks, culture and other performance indicators for both in/out scope employees, executive management and board. 	<p>To provide incentives throughout the organization to create alignment with and awareness of the new desired safety culture.</p>	<p>Work with managers and unions to ensure staff are trained to a level of competency. Work with HR to develop internal performance standards for management that is reflective of span of control.</p> <p>Work with Saskatchewan Health to develop appropriate accountability performance measures.</p>

Leadership		
<i>Issues Identified</i>	<i>Goals</i>	<i>Key Success Factors</i>
<ul style="list-style-type: none"> OH&S practitioners need to be seen as a specialist role in the organization with its own supporting structures and resources. 	To ensure that OH&S has a visible presence at the management table and is adequately resourced to provide the necessary service to the RHAs	The recognition by Sr management that OH&S is a cross functional discipline that needs a direct reporting structure to Sr Management
<ul style="list-style-type: none"> The need for more senior management presence at regional OH&S meetings 	To have management visible, informed, and engaged in the development of a safety culture. To facilitate OH&S problem solving at the lowest level needed.	Managers who are aware and engaged in the safety culture of an organization.
<ul style="list-style-type: none"> Need for safety consultants to champion the OH&S agenda and to develop resources and tools to help the RHAs in implementing their programs (SAHO) 	To provide increased specialized resources to develop, and facilitate safety training and programming	Provide support and recognition for the new role as a champion and resource for the OH&S agenda. The challenge of recruiting, attracting & retaining such individuals with sustainable funding & resource support within an existing organizational structure.
<ul style="list-style-type: none"> Develop a provincial wide communications plan for OH&S initiatives and specific to each RHA 	Develop a provincial framework for OH&S. Facilitate networking events for OH&S professionals and managers. Develop key messages for both internal and external stakeholder groups that communicate OH&S goals and successes.	Creating a message that tells a story that is cross sectional throughout the health sector. The key message is the importance of the worker and building of a safety culture.
<ul style="list-style-type: none"> Need to work with labor partners to develop initiatives that will proactively address OH&S concerns. 	To create buy in from labor. To address the diverse view and opinions voiced from their leadership and members. Develop flexible solutions to OH&S concerns that will engage workers, union leadership, and management.	Early engagement working from a common ground and creating an awareness of the need for the provision of OH&S services to the health sector

OHS Training Systems		
<i>Issues Identified</i>	<i>Goals</i>	<i>Key Success Factors</i>
<ul style="list-style-type: none"> OH&S training not seen as a priority 	<p>To make OH&S training a priority training activity in health.</p> <p>Develop responsibility system to ensure that employees attend sessions.</p>	<p>Ability to find adequate staffing to backfill.</p> <p>Develop mandatory training objectives based on role with in the organization.</p> <p>Develop policies and procedures to ensure that training resources are matched to need.</p>
<ul style="list-style-type: none"> Lack of understanding as to individual responsibility to perform duties competently Poor understanding of basic principles of safety 	<p>Enhance understanding throughout the organization so that every member has a visible responsibility to perform duties as competently.</p>	<p>Create specific training programs targeted to employees, managers, board & CEOs so that responsibility is clearly delineated and transparent throughout the organization.</p> <p>Training tied to performance review</p>
<ul style="list-style-type: none"> Lack of training opportunities and resources to conduct training 	<p>Enhance learning opportunities available.</p> <p>Recognize that training needs to be translated into a change in learned behavior; the desired outcome is, towards staff working safer.</p> <p>Enhance training resources.</p>	<p>Develop a stable five-year envelope of protected funds dedicated to enhance OH&S training. Allow for flexibility to reallocate resources and develop accountability to achieved outcomes.</p> <p>Implement a training system that includes follow up in the workplace to ensure that safe work procedures are being followed.</p> <p>Ensure enough trainers; develop novel ways of using IT, satellite-session, teleconference & resource sharing amongst RHAs and educational institutions.</p>

Appendix B

Goal II – The health system has safe, supportive, and quality workplaces that help to retain and recruit health care professionals.

Ensure workplace environments are safe and healthy.

Measure/Target

Decrease the number and severity of WCB lost-time claims.

Proposed Actions

- Enhance the occupational health and safety strategy in each health region and Saskatchewan Cancer Agency.
- Implement the appropriate use of safety engineered sharp devices.
- Locate and use adequate safety equipment such as lift/transfer equipment in all institutional settings based on regular safety audits.

Assist workplaces to support staff in providing quality care.

Measure/Target

Increase the percentage of staff reporting a positive score for their learning environment.

Proposed Actions

- Develop career pathing initiatives.
- Pilot mentorship initiatives.
- Recruit more senior and experienced nurses to act as mentors with new graduates.
- Support Aboriginal employees in the workplace by expanding the Employee Aboriginal Network.
- Support initiatives for young professionals mentoring youth.
- Support quality workplace initiatives identified as priorities within each health region.
- Continue to dedicate specific funding for health regions to provide continuing education and professional development opportunities based on regions' staff needs.
- Enhance succession planning.
- Provide leadership mentoring and training.
- Support leadership development programs.
- Build capacity within the workplace to deal with intergenerational issues.
- Provide management training based on managers' individual learning plans.
- Undertake efforts to initiate individual learning plans for employees. Incorporate this process into the performance contract for managers.