

Operations Division Occupational Health and Safety

Field Visit Report

OHS Case ID: **03232HSJW298**
 Field Visit no: **03232HSJW301** Visit Date: **2014-OCT-15** Field Visit Type: **INITIAL**

Workplace Identification: **TORONTO GENERAL HOSPITAL** Notice ID:
200 ELIZABETH STREET, TORONTO , ON, CANADA M5G 2C4

Telephone: **(416) 340-4800** JHSC Status: **Active** Work Force #: **5500** Completed %:

Persons Contacted: **SEE DETAILED NARRATIVE**
 Visit Purpose: **INVESTIGATE CONCERNS RELATED TO EBOLA PREPAREDNESS**
 Visit Location: **200 ELIZABETH STREET, TORONTO, ON**
 Visit Summary: **ORDERS ISSUED TO THE EMPLOYER**

Detailed Narrative:

Inspector MacLean attended the workplace on October 10, 2014 accompanied by Dr. Lillian Wong, Ministry of Labour Senior Medical Consultant, Operations Division and Carole Brearley, Ministry of Labour Program Manager to investigate two complaints received in relation to Ebola preparedness. The Ontario Nurses Association and a worker at Toronto General Hospital contacted the MOL on or about October 7, 2014 with a list of concerns that relate to worker safety in preparation for managing the care of patients with Ebola Virus Disease.

Persons contacted: Eleanor Adarna, JHSC Worker Co-Chair (ONA representative); Jane Slogget, Senior Director, Health and Safety; Janet Newton, Clinical Director and EVD Planning Lead; Tom Clancy, Director of Laboratory; Sandra Grgas, Clinical Director Nephrology; Marni Mills, Manager of Core Lab; Fatima Cardoso, Hematology Supervisor; Carmen Cojan, Emergency Department Charge Nurse; Paul Beverley, Manager of Emergency Preparedness.

At the time of this inspection the provincial health system has been engaged in preparations for how to deal with cases (or suspected cases) of Ebola Virus Disease (EVD). There have been no confirmed cases of EVD in Ontario at the time of this report, however the health system must be vigilant and assess any patient that presents to the workplace with symptoms and travel/contact history that may be suggestive of concern for EVD.

During the inspection of the workplace, observations were made related to the hazards of infection, and the controls that have been implemented by the employer. The focus of this visit was infection prevention and control related to EVD preparedness with a focused inspection of the Core Lab, Hemodialysis Unit (East) and the Emergency department.

MEASURES AND PROCEDURES FOR WORKER SAFETY

With respect to the emerging issue of EVD, it should be noted that current guidance may be revised as new information or insight is gained regarding EVD. All workplace parties must be aware that measures and

Recipient	Inspector Data	Worker Representative
Name _____	JEANETTE MACLEAN OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER 5001 Yonge Street, Suite 1600 North York, ON, M7A 0A3 Tel: 647-777-5078 Fax: 647-777-5014	Name _____
Title _____		Title _____
Signature _____	Signature _____	Signature _____

You are required under the Occupational Health and Safety Act to post a copy of this report in a conspicuous place at the workplace and provide a copy to the health and safety representative or the joint health and safety committee if any. Failure to comply with an order, decision or requirement of an inspector is an offence under Section 66 of the Occupational Health and Safety Act. You have the right to appeal any order or decision within 30 days of the date of the order issued and to request suspension of the order or decision by filing your appeal and request in writing on the appropriate forms with the Ontario Labour Relations Board, 505 University Ave., 2nd Floor, Toronto, Ontario M5G 2P1. You may also contact the Board by phone at (416) 326-7500 or 1-877-339-3335 (toll free), mail or by website at <http://www.orb.gov.on.ca/english/homepage.htm> for more information.

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procedures must be revised in light of current knowledge and practices.

The workplace has established measures and procedures for infection prevention and control related to EVD and clinical laboratory specimens. The measures and procedures observed include lab specific guidance called "Viral Hemorrhagic Fever Laboratory Biosafety Guidance", and blood collection guidance called "Collection of Blood Specimens on Possible Viral Hemorrhagic Fever Patient".

The measures and procedures address instructions for worker protection and also specify lab testing that can be performed. In addition to safe collection, the measures and procedures also address the measures that are to be used for safe transport of collected specimens to the core laboratory and to off-site Laboratories. Laboratory specimen collection and transport "kits" have been created and were observed in the Core Lab. The collection kits are readily available in the Emergency Department near the designated isolation room.

Information related to the precautions to be taken during the diagnostic testing (collection, handling, processing in the lab) of blood has been developed by Public Health Ontario (PHO) and is called "Ebola Virus Disease Interim Sample Collection and Submission Guide", published August 14, 2014, revised August 29. Measures and procedures observed appear to be consistent with current PHO recommendations.

Public Health Ontario has also prepared guidance entitled "Infection Prevention and Control Guidance for Patients With Suspected or Confirmed Ebola Virus Disease (EVD) in Ontario Health Care Settings, (published August 14, 2014, revised August 29). The workplace parties are aware of the guidance and have been putting into place internal measures and procedures that in many respects exceed the recommendations of PHO.

The workplace specific measures and procedures related to EVD that have been developed are found in a number of documents that address issues such as infection prevention and control, laboratory measures and worker exposures. The main infection prevention and control measures and procedures are found in the document called "Ebola Viral Disease Infection Prevention and Control (IPAC) Measures", dated September 17, 2014. These measures and procedures have been through a number of different drafts and may continue to be revised as guidance changes and evolves.

It was reported that the hospital has created an EVD working group to respond to and draft guidance regarding EVD. The working group included people from a number of different departments and specialities; however the worker members of the joint health and safety committee (JHSC) have not been engaged in the process. As of October 10, 2014, the employer advised the JHSC Co-Chair for TGH has been invited to participate in this working group.

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The employer is reminded that measures and procedures related to worker health and safety must be developed and implemented in consultation with the joint health and safety committee in accordance with the Health Care and Residential Facilities Regulation (O.Reg 67/93) section 8. The employer must ensure that there is JHSC consultation related to measures and procedures for worker safety related to EVD. An order has been written for the employer to ensure that the measures and procedures related to worker safety when dealing with patients with suspected EVD are developed in consultation with the JHSC.

LABORATORY SPECIMEN MANAGEMENT

The employer outlined the procedure for receiving a suspect EVD specimen in the Core Lab. Specific measures and procedures outline the procedure for workers in handling, storing and packaging the specimen for transport off-site to the Public Health Laboratory and National Microbiology Lab in Winnipeg.

The employer is utilizing an Incident Management System whereby in the event a specimen is required the Laboratory Medicine program call centre is contacted and the following individuals are notified: Microbiologist-on-call, Hematologist-on-call, Biochemist-on-call, Transfusion Medicine Specialist-on-call, and LMP Administrator-on-call.

All specimen processing is being performed in a Class IIA biosafety cabinet using biosafety level 3 practices and personal protective equipment. According to the Viral Hemorrhagic Fever Laboratory Biosafety Guidance prepared by UHN (No. QFS17000), where possible specimens will be inactivated by heating at 60 degrees celsius for one hour which renders specimens non-infectious and enables measurement of heat-stable substances. The PPE available in the lab consists of: N95 respirators face shields, gloves (double layer, 12" cuff), head covers, boot covers and impermeable gowns. Wherever possible specimens are analyzed using a closed system with decontamination procedures developed for each device/equipment used.

All waste material is being disposed of in closed cytotoxic containers and stored until further procedures are developed with respect to incineration of contaminated waste.

Education and training sessions are ongoing for all laboratory staff. Currently, the employer is using a volunteer system to assign workers in handling specimens. Only those who have received training will be asked to handle specimens of suspected EVD patients.

EMERGENCY DEPARTMENT - ENTRY AND TRIAGE

Upon entry to the emergency room (ER) signage related to patients who may have symptoms of illness is

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readily apparent.

Supplies of alcohol based hand sanitizer are available for use by patients and others who may present with such symptoms.

Screening procedures have been established for patients with signs/symptoms of illness and history of travel. The current alerts related to travel are posted in the triage area.

The employer advised that if a patient is positive for symptoms of EVD illness and has a travel history; the patient would be immediately moved to a holding area until an isolation room was readied. It is recommended that signage consistent with contact/droplet precautions be placed on the door of this room to alert anyone entering this area. This is consistent with IPAC practices already in place at this facility.

PERSONAL PROTECTIVE EQUIPMENT

For patients that screen positive for acute respiratory illness (ARI) it is necessary to ask the patient to don a procedure mask in order to contain respiratory droplets from the patient. Procedure masks for this purpose were observed to be available at the time of the inspection on a cart in the triage area.

Masks and eye protection are appropriate PPE to be used by workers when they are within 2 metres of a patient that has symptoms of ARI and should be available to workers at the triage desk and in the remainder of the ER.

In response to preparations related to EVD, the more specialized personal protective equipment that has been selected is an ensemble that includes fluid impervious gowns (AAMI level 4 gowns) supplemented with a plastic apron, N95 respirators, full face shield with a bib, gloves (including gloves with extra length to ensure that there is no "gap" between the glove and the sleeve of the gown), hair protective bonnet and foot covers.

It was reported that donning and doffing of PPE for EVD will include the use of a second caregiver to observe, monitor or assist with the correct donning and doffing of equipment. Written procedures provide guidance regarding this, and based on discussions with staff this process appears to be understood.

With respect to EVD, a special "kit" of supplies that may be needed for a suspect patient has been put together and is located in the (ER) corridor adjacent to the ante-room associated with the isolation room. The workplace has also assembled a large quantity of packages of PPE that contain the required components of the protective ensemble of PPE.

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Unfortunately, the required PPE was not readily available in the nursing triage area of the ER. Workers must have PPE immediately accessible and close to their work location. An order has been issued for the employer to ensure that PPE is more readily accessible to the triage staff that work in the ER.

ISOLATION ROOMS

The airborne infection isolation room (AIIR) located in the ER that is the designated room for any potential EVD patient was observed. At the time of this inspection the isolation room was occupied. Although EVD is not an airborne transmissible virus, the use of AIIR is recommended for isolation of patients with (or suspected) EVD because the rooms offer single patient beds, better access control and an ante-room. The AIIR is also required if an aerosol generating procedure is necessary.

The hospital has designated a specific AIIR in the ER as being appropriate for use in the event that an EVD patient must be cared for. The isolation room also has an ante-room that can be used by workers preparing for entry and exiting the isolation room.

The ventilation equipment associated with the room was discussed and staff appear to be knowledgeable with the functioning of the system. The system was recently inspected to verify its functioning and a report is available for verification.

Measures and procedures have also been prepared for the transport of patients confirmed to have EVD. Measures include steps to ensure that the route traveled by a patient with EVD minimizes contact with other people. The employer advised that any patient who test positive for EVD at Toronto General Hospital will be transported immediately to Toronto Western Hospital. The isolation room in the ER is adjacent to the ambulance bay.

CLEANING/WASTE/ENVIRONMENTAL SERVICES

Measures and procedures for cleaning of rooms used for patients with (or suspected) EVD have been included in the measures and procedures for infection prevention and control. Measures and procedures address both regular cleaning and final cleaning after a patient leaves the isolation room (known as terminal cleaning). The PPE ensemble provided for clinical staff will also be used by those responsible for cleaning rooms and equipment used for EVD patients. In speaking with the ER charge nurse, two housecleaning staff are designated to the ER. Cleaning of the isolation room (of a suspect EVD patient) will be limited to those trained in this procedure including the terminal cleaning of the room.

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Hospital grade cleaning and disinfection solutions will be used for cleaning rooms, which is acceptable in accordance with current guidance.

All single use items that are in the room of a patient with EVD will be disposed in bags and containers destined for incineration; as is the case for linens and curtains. All used disposable PPE will also be incinerated.

It was reported, and it is outlined in the measures and procedures that re-usable medical equipment and other items that cannot (or will not) be incinerated will be disinfected prior to leaving the room when the room is terminally cleaned.

INFORMATION AND INSTRUCTION TO WORKERS ABOUT HAZARDS

In discussions with workplace representatives it was learned that information regarding the need for precautions when dealing with a patient that is suspect for EVD has been disseminated to workers through distributed memos, through electronic communications and through personal communications to workers. At the time of the inspection there have been formal sessions to deliver information and training to workers about the potential for EVD and the steps required to protect themselves or others. Training sessions are ongoing and records of attendance are being kept. The employer was asked to provide details of the number of workers who have been trained on these procedures.

As a reminder to workplace parties, it is required that any worker that encounters the hazard of exposure to a patient with (or suspected with) EVD as part of their work must be provided information, instruction and supervision necessary to protect themselves and other workers.

The instruction provided related to the measures to protect workers should be appropriate to the nature and type of work performed by a worker and may address issues such as signs, symptoms and screening criteria to be used, the nature of EVD and how it is transmitted, how isolation precautions are applied, point of care risk assessment and what PPE is required when providing care to patients.

It was learned that the program (s) related to training and instruction have not had the benefit of consultation with the JHSC. In accordance with the Health Care and Residential Facilities Regulation (O.Reg 67/93) sub-section 9(4), an employer is required to consult with, and consider the recommendations of, the JHSC in the development and provision of education and training related to measures and procedures for worker safety. An order has been issued for the employer to ensure that the JHSC is consulted about the programs for training and instruction related to worker safety when dealing with patients with (or suspected with) EVD.

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HEMODIALYSIS EAST (OUTPATIENT CLINIC)

Although the employer recognized that training is ongoing for healthcare workers in preparation for managing EVD; it was identified that all points of entry to the hospital should be screening patients for EVD.

Infectious Diseases Surveillance Screening is currently in place as part of routine screening for all points of entry. This was observed in the waiting area of the hemodialysis unit. Patients are instructed to self-identify symptoms such as fever, headache, chills, cough etc. Signs were conspicuously posted in the waiting area along with hand sanitization stations.

In speaking with a worker it was identified that upon entry to the hemodialysis unit routine practice is to conduct a further assessment of the patient to determine what steps (if any) are necessary to isolate the patient. The employer advised they are actively reviewing the current screening tool to incorporate screening for EVD. The employer is reminded to consult with the JHSC if and when the Infectious Diseases Surveillance Screening tool is revised.

In the ante-room in the Hemodialysis East clinical area boxes, equipment and articles that presented a tripping hazard to workers were observed. The door was difficult to open to access the ante-room due to the obstructions noted. An order is issued to the employer to ensure a work surface is kept free from obstructions and hazards to workers.

This report and all orders issued have been explained in detail to workplace parties.

Investigation Complete.

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Order(s) /Requirement(s) Issued To:

To: **TORONTO GENERAL HOSPITAL** Org/Ind Role **Secondary Employer**

Mailing Address:
585 UNIVERSITY AVE, TORONTO, ON, CA M5G 2N2

Order(s) /Requirement(s) Description:
 You are required to comply with the order(s) /requirement(s) by the dates listed below.

No	Type Code	ActReg	Year	Sec.	Sub Sec.	Clause	Text of Order/Requirement	Comply by Date
1	Fort	OHSA	1990				Pursuant to section 8 of the Healthcare and Residential Facilities Regulation 67/93: the employer shall ensure that measures and procedures for worker safety are developed in consultation with the joint health and safety committee. The measures and procedures for worker safety related to exposure to Ebola virus disease (EVD) are being developed and revised without consultation with the JHSC. The employer shall ensure that there is consultation with the JHSC. This order shall be complied with forthwith.	
03232HSJW302		67	1993	8				
2	Fort	OHSA	1990	25	2	h	Pursuant to clause 25(2) (h) of the Occupational Health and Safety Act, RRO, 1990: the employer shall take every precaution reasonable in the circumstances for the protection of a worker. At the time of the inspection it was observed that personal protective equipment for the protection of triage workers from potentially infectious material was not readily available to workers that would require it in the emergency department. The employer shall take the reasonable precaution of ensuring that personal protective equipment is readily available for workers in the triage area	
03232HSJW303								

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Mailing Address:
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3	Fort	OHSA	1990				located in the emergency department. The employer shall comply with this order forthwith.	
03232HSJW304		67	1993	9	4		Pursuant to subsection 9(4) of the Healthcare and Residential Facilities Regulation 67/93: the employer shall, in consultation with the joint health and safety committee and in consideration of recommendations from the committee, develop establish and provide training and educational programs in health and safety measures and procedures relevant to workers' work. The committee has not been consulted about the training and education programs that are being developed and delivered to workers related to Ebola virus disease (EVD). The employer must ensure that there is consultation with the committee about training and education programs related to EVD. The employer shall comply with this order forthwith.	
4	Time	OHSA	1990				Pursuant to clause 33 (1) (a) of the Healthcare and Residential Facilities Regulation 67/93: the employer shall ensure that a work surface shall be kept free of obstructions and hazards. At the time of this inspection, the ante-room in the	2014-OCT-17
03232HSJW305		67	1993	33	1	a		

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To: **TORONTO GENERAL HOSPITAL** Org/Ind Role: **Secondary Employer**

Mailing Address:
585 UNIVERSITY AVE, TORONTO, ON, CA M5G 2N2

Order(s) /Requirement(s) Description:

You are required to comply with the order(s) /requirement(s) by the dates listed below.

No	Type Code	ActReg	Year	Sec.	Sub Sec.	Clause	Text of Order/Requirement	Comply by Date
<p>Hemodialysis East clinical area contained boxes, equipment and articles that presented a tripping hazard to workers. The door was difficult to open to access the ante-room due to the obstructions noted. The employer must comply with this order on or before October 17, 2014.</p>								

Recipient	Inspector Data	Worker Representative
Name _____	JEANETTE MACLEAN OCCUPATIONAL HEALTH & SAFETY INSPECTOR PROVINCIAL OFFENCES OFFICER 5001 Yonge Street, Suite 1600 North York, ON, M7A 0A3 Tel: 647-777-5078 Fax: 647-777-5014	Name _____
Title _____		Title _____
Signature _____	Signature _____	Signature _____

You are required under the Occupational Health and Safety Act to post a copy of this report in a conspicuous place at the workplace and provide a copy to the health and safety representative or the joint health and safety committee if any. Failure to comply with an order, decision or requirement of an inspector is an offence under Section 66 of the Occupational Health and Safety Act. You have the right to appeal any order or decision within 30 days of the date of the order issued and to request suspension of the order or decision by filing your appeal and request in writing on the appropriate forms with the Ontario Labour Relations Board, 505 University Ave., 2nd Floor, Toronto, Ontario M5G 2P1. You may also contact the Board by phone at (416) 326-7500 or 1-877-339-3335 (toll free), mail or by website at <http://www.orb.gov.on.ca/english/homepage.htm> for more information.