

Operations Division Occupational Health and Safety

Field Visit Report

OHS Case ID: **03232HSCV286**
 Field Visit no: **03232HSJQ290** Visit Date: **2014-OCT-15** Field Visit Type: **INITIAL**

Workplace Identification: **TORONTO WESTERN HOSPITAL: MAIN BUILDING** Notice ID:
399 BATHURST STREET, TORONTO, ON, CANADA M5T 2S8

Telephone: **(416) 603-5800 X 2700** JHSC Status: **Active** Work Force #: **3500** Completed %:

Persons Contacted: **SEE DETAILED NARRATIVE**
 Visit Purpose: **EBOLA PREPAREDNESS**
 Visit Location: **EMERGENCY DEPARTMENT, CRITICAL CARE UNIT AND ENVIRONMENTAL SERVICES**
 Visit Summary: **ORDERS ISSUED TO THE EMPLOYER**

Detailed Narrative:

Inspector MacLean accompanied by Craig Lawrie, MOL Infection Control Consultant and Carole Brearley, MOL Program Manager attended the workplace to conduct a proactive inspection specific to Ebola preparedness. The focus of the inspection was Infection Prevention and Control in areas most likely required to manage a patient with Ebola virus disease.

Persons Contacted:
 Paul Beverley, Manager of Emergency Preparedness; Dr Susy Hota, Infection Prevention and Control; Angelo Bruni, Facilities Manager; Natasha Thompson, ONA representative (worker); Jane Slogget, Director, Health and Safety; Joanne Morianno, Safety Manager at TWH; Wendy Ramsumar, CUPE representative (worker); Janet Newton, Clinical Director and EVD Planning Lead; Kathy Bates, Emergency Department Interim Manager; (and other staff in the workplace including Triage, Security, CCU, Environmental Services staff).

Comments from Craig Lawrie, Infection Control Consultant, Ontario Ministry of Labour:

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 cases of EVD in Ontario, 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 in the emergency department and in the critical care isolation unit.

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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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.

EMERGENCY DEPARTMENT - ENTRY AND TRIAGE

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

Supplies of alcohol based hand sanitizer are available as are masks for use by patients and others who may have respiratory 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.

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 the time of the inspection.

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 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 nursing triage area and also in the corridor adjacent to the ante-room associated with the isolation room. The workplace has also assembled a large quantity of packages of PPE

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that contain the required components of the protective ensemble of PPE.

Other PPE such as N95 respirators were observed in the areas close to the designated isolation rooms and in the nursing triage area of the ER.

It was noted that the security office did not have its own supply of PPE, causing the security staff to have to walk into the ER to obtain PPE. 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 security 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 inspected. 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 to the isolation room, and a separate exit room that can be used for doffing of PPE.

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

ISOLATION ROOMS/CRITICAL CARE UNIT

A specific unit (Pod 107) has been designated for the care of patients with EVD. The four rooms within the unit are AIIRs that have been designated as rooms to be used as needed for EVD patients. Each of the AIIRs is equipped with an ante-room, and negative pressure. The air handling systems have been tested by an outside consultant recently to verify proper functioning and a copy of this report was provided at the time of the visit.

Personal protective equipment was observed in the isolation unit, including the specialized equipment selected by the employer for use with EVD patients.

Measures and procedures have also been prepared for the transport of patients as needed through the

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hospital to the designated isolation unit. Measures include steps to ensure that the route traveled by a patient with EVD minimizes contact with other people in the hospital.

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 patient leaves isolation (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. Discussions with a worker responsible for the task in the ICU confirmed that training has been delivered. Concerns were expressed by the worker at the time regarding assistance with the PPE, and it was verified by the employer representative at the workplace that all staff will be provided assistance in the donning and doffing of PPE.

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.

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.

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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.

Contact Information:

Craig Lawrie MSc(A), CPHI(C), CRSP, CIC
Infection Control Consultant, Eastern and Central Regions
Ontario Ministry of Labour
(613) 545-4029 or 1-800-267-0915
email: craig.lawrie@ontario.ca

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Comments from Inspector MacLean:

On observation of the ER department, materials being disposed of in a sharps container located in the isolation room were not disposed of in a manner to prevent exposure to workers. Blood soaked gauze was left on the tray instead of being placed into a receptacle.

Also in the ER department, the isolation room alarm panel located at the nursing station was not working properly. In consultation with the ER supervisor it was identified the panel was in need of repair. An order is issued to the employer to ensure equipment provided by the employer is maintained in good condition.

The electrical panels located in the hallway near the clean utility room were blocked by shelving and other materials, articles and things. Electrical panels should be kept clear of obstructions in the event they need to be accessed immediately. An order is issued to the employer to ensure that work surfaces are kept free from obstructions.

At the main nursing station in the ER department a section of the work station was taped off to allow for

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food/drinks to be handled and consumed by workers. The employer is asked to re-examine this practice. It was observed during this visit that equipment recently used to test for blood glucose (which is exposed to blood and bodily fluids) was placed next to the drinks on the same work surface. Consumption of food and drink should not be done in areas where pharmaceuticals, infectious materials, (including potentially contaminated medical equipment) or chemicals are handled.

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. The employer is actively reviewing the current screening tool. The employer is reminded that consultation with the JHSC is required if and when the Infectious Diseases Surveillance Screening tool is revised.

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

Inspection Complete.

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

To: **UNIVERSITY HEALTH NETWORK** Org/Ind Role: **Owner**

Mailing Address:
200 ELIZABETH ST, TORONTO, ON, CA M5G 2C4

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 03232HSJR291	OHSA 67	1990 1993			8	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 forthwith.	
2	Fort 03232HSJR292	OHSA 67	1990 1993	9		4	Pursuant to Section 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	

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Mailing Address:
200 ELIZABETH ST, TORONTO, ON, CA M5G 2C4

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3	Fort 03232HSJS293	OHSA	1990	25	2	h	<p>ensure that there is consultation with the committee about training and education programs related to EVD. This order shall be complied with forthwith.</p> <p>Pursuant to section 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 security workers from potentially infectious material was not readily available to workers that would require it in the emergency room. The employer shall take the reasonable precaution of ensuring that personal protective equipment is readily available for the security workers in the emergency room. This order shall be complied with forthwith.</p>	
4	Fort 03232HSJS294	OHSA 67	1990 1993	103	1		<p>Pursuant to section 103 (1) of the Healthcare and Residential Facilities Regulation 67/93: the employer shall ensure that all materials, articles or things shall be disposed of in a manner that will not cause a hazard to workers. At the time of this</p>	

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No	Type Code	ActReg	Year	Sec.	Sub Sec.	Clause	Text of Order/Requirement	Comply by Date
5	Time	OHSA	1990	25	1	b	inspection blood soaked gauze was observed in the tray of a sharps container located on the wall in the isolation room (ER department). The employer shall comply with this order forthwith.	2014-OCT-23
03232HSJS295							Pursuant to section 25 (1) (a) of the Occupational Health and Safety Act, RRO, 1990; the employer shall ensure that equipment provided by the employer are maintained in good condition. During this inspection the isolation room alarm panel located at the nursing station in the ER department was not working properly. In consultation with the ER supervisor it was identified the panel was in need of repair. The employer shall comply with this order on or before October 23, 2014.	
6	Fort	OHSA	1990	67	1993	33	1	
03232HSJS296							Pursuant to section 33 (1) of the Healthcare and Residential Facilities Regulation 67/93: the employer shall ensure a work surface shall be kept free of obstructions and hazards that may endanger a worker. During this inspection the electrical panels located in the hallway near the clean utility room in the ER department were blocked by shelving and other materials, articles	

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and things. Electrical panels should be kept clear of obstructions in the event they need to be accessed immediately. The employer shall comply with this order forthwith.



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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.