

New Leaf: Living and Learning Together Inc.
Policies and Procedures

Health and Safety Policies and Procedures
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HEALTH & SAFETY POLICY STATEMENT

New Leaf: Living and Learning Together Inc. will make every effort to provide a safe, healthy work environment. All employees must also share in and be dedicated to the continuing objectives of reducing risk of injury.

Safety and health in our business must be a part of every operation. Without question it is every employee's responsibility at all levels. Your cooperation in detecting hazards and, in turn, controlling them is a condition of your employment. Inform your manager immediately of any situation beyond your ability or authority to correct.

Management and supervisors are responsible to ensure a safe work environment and that the employees work in compliance with established safe work practices and procedures. Employees will receive adequate training in their specific work tasks to protect their health and safety.

Every employee, sub-contractor and worker of sub-contractor(s) must protect his or her own health and safety by following the law, New Leaf's safe work practices and procedures. All workers are responsible to report all unsafe or unhealthy situations or practices immediately.

Our objective is a safety and health program that will reduce the number of injuries and illnesses to an absolute minimum. Our goal is nothing less than zero accidents and injuries. All parties are expected to consider health and safety in every activity. Commitment to health and safety must form an essential part of this organization from the Executive Director to the front-line workers.

Executive Director

Date

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Duties, As Required under the Occupational Health and Safety Act

Part III of the Occupational Health and Safety Act outlines the Duties for Employers, Workers, Supervisors and Directors.

Directors' and Officers' Duties

Every director and every officer of a corporation shall take due diligence to ensure that the corporation complies with (S. 32)

- this Act and the regulations;
- orders and requirements of inspectors and Directors; and
- order of the Minister.

General Duties of Employers

As an employer in Ontario who is covered by the OHS Act, New Leaf has an obligation to:

- instruct, inform and supervise workers to protect their health and safety (s. 25(2)(a));
- assist in a medical emergency by providing any information – including confidential business information – to a qualified medical practitioner who requests the information in order to diagnose or treat any person (s. 25(2)(b));
- appoint competent persons as supervisors (s. 25(2)(c)). ‘Competent person’ has a very specific meaning under the Act. He or she must:
 - be qualified – through knowledge, training and experience – to organize the work and its performance;
 - be familiar with the Act and the regulations that apply to the work being performed in the workplace;
 - know about any actual or potential danger to health and safety in the workplace;

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- inform a worker, or a person in authority over a worker, about any hazard in the work and train that worker in the handling, storage, use, disposal and transport of any equipment, substances, tools, material, etc. (s. 25(2)(d));
- help committees and health and safety representatives to carry out their duties (s. 25(2)(e));
- not employ underage workers or knowingly permit underage persons in or near the workplace (s. 25(2)(f) and (g));
- take every precaution reasonable in the circumstances for the protection of a worker (s. 25(2)(h));
- post in the workplace a copy of the Occupational Health and Safety Act, as well as explanatory material prepared by the ministry that outlines the rights, responsibilities and duties of workers. This material must be in English and the majority language in the workplace (s. 25(2)(i));
- prepare a written occupational health and safety policy, review that policy at least once a year and set up a program to implement it (s. 25(2)(j)).
- post a copy of the occupational health and safety policy in the workplace, where workers will be most likely to see it (s. 25(2)(k));
- provide the joint committee or the health and safety representative with the results of any occupational health and safety report that the employer has. If the report is in writing, the employer must also provide a copy of the relevant parts of the report (s. 25(2)(l));
- advise workers of the results of such a report. If the report is in writing, the employer must, on request, make available to workers copies of those portions that concern occupational health and safety (s. 25(2)(m)); and
- ensure that every part of the physical structure of the workplace can support all loads to which it may be subjected, in accordance with the Building Code Act and any standards prescribed by the ministry (s. 25(1)(e)). This duty also applies to the self-employed.

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Prescribed Duties of Employers

The word 'prescribed' appears in many sections of the Act. It means that a Regulation exists specifying how to put into effect the requirements of that section. Where there is no regulation, the requirements of that section are considered a 'general duty' and do not have specific requirements as to how to put the duty into effect.

Employers and supervisors have an obligation to know which regulations apply to their workplaces. If there is any uncertainty, an inspector should be consulted. At New Leaf, we are under the Health Care Regulations. Here is a list of duties for employers, under the Act, which may be prescribed. The first seven duties also apply to the self-employed. Where there is a regulation, an employer must:

- Provide and maintain in good condition any prescribed equipment, materials and protective devices (s. 25(1)(a) and (b));
- Ensure that the above are used in accordance with the regulations (s. 25(1)(d));
- Carry out any measures and procedures that are prescribed for the workplace (s. 25(1)(c));
- Keep and maintain accurate records, as prescribed, of the handling, storage, use and disposal of biological, chemical or physical agents (s.26(1)(c));
- Ensure, where prescribed, that only workers who have taken any prescribed medical examinations, tests or X-rays and who have been found physically fit to work, be allowed to work or be in a workplace (s.26(1)(j));
- Where so prescribed, provide a worker with written instructions on the measures and procedures to be taken for his or her protection (s.26(1)(k)); and
- Carry out any prescribed training programs for workers, supervisors and committee members (s.26(1)(l))

Notices Required from Employers

If workplace accidents or illnesses occur, the employer has the following duties to notify certain people as outlined in the Workplace Safety Insurance Act (WSIA):

- If a person has been critically injured or killed on the job, the employer must immediately notify a Ministry of Labour inspector, the Joint Health and Safety Committee (or health and safety representative) and the union, if there is one (section 25 (1)). Please see the Module in this training package for more information on critical injuries.

- If an accident, explosion or fire occurs and a worker is disabled or requires medical attention, the employer must notify a director of the Ministry of Labour, the Joint Health and Safety Committee (or health and safety representative) and the union, if any, within four days of the accident. This notice must be in writing and must contain any prescribed information (section 52(1)).
- If an employer is told that a worker has an occupational illness, the employer must notify a director of the Ministry of Labour, the Joint Health and Safety Committee (or health and safety representative) and the union, if any, within four days. This notice must be in writing and must contain any prescribed information (section 52(2)). The duty to notify applies not only to current employees but also to former ones (section 52(3)).
- Even if no one is hurt, written notice of an accident or unexpected event that could have caused an injury at a construction site or in a mine or mining plant is required from the constructor of the project or owner of the mine or mining plant. This notice must be given to a director of the Ministry of Labour, the Joint Health and Safety Committee (or health and safety representative) and the trade union, if any, within two days and must contain any prescribed information (section 27).

Duties of Supervisors

The OHS Act sets out certain specific duties for workplace supervisors. A supervisor must:

Ensure that a worker complies with the Act and regulations (section 27(1) (a)).

Ensure that any equipment, protective devices or clothing required by the employer is used or worn by the worker (section 27(1) (b)).

Advise a worker of any potential or actual health or safety dangers known by the supervisor (section 27(2) (a)).

If prescribed, provide a worker with written instructions about the measures and procedures to be taken for the worker's protection (section 27(2) (b)); and

Take every precaution reasonable in the circumstances for the protection of workers (section 53)

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Duties of Workers

Workers also have several general duties under the Act. A worker must take responsibility for personal health and safety insofar as he or she is able. Under the Act, a worker must:

- Work in compliance with the Act and regulations (section 28(1)(a))
- Use or wear any equipment, protective devices or clothing required by the employer (section 28(1)(b))
- Report to the employer or supervisor any known missing or defective equipment or protective device that may be dangerous (section 28(1)(c)).
- Report any known workplace hazard to the employer or supervisor (section 28(1)(d))
- Report any known violation of the Act or regulations to the employer or supervisor (section 28 (1)(d))
- Not remove or make ineffective any protective device required by the employer or by the regulations (section 28(2)(a))
- Not use or operate any equipment or work in a way that may endanger any worker (section 28(2)(b))
- Not engage in any prank, contest, feat of strength, unnecessary running or rough and boisterous conduct (section 28(2) (c). Racing ATV's / golf carts or seeing who can pick up the most boxes are examples of unsafe and unacceptable workplace conduct.

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INTERNAL RESPONSIBILITY SYSTEM

The Internal Responsibility System (IRS) is one of the key concepts in occupational health and safety. It is the fundamental framework supporting occupational health and safety law and guiding the management of workplace problems. Basically, it means that the responsibility for identifying occupational health and safety problems and solving them rests on the shoulders of people in the workplace.

The IRS can be thought of as your organizational chart, with a clear set of statements about responsibility and authority for health and safety listed for each person –NO EXCEPTIONS. Accountability, in theory, is built right into the organizational structure. People in this hierarchical structure then interact with each other to identify and solve health and safety problems and to seek opportunities to improve the process they are involved with. Everyone, at all levels, takes initiative on health and safety. As well, everyone is obligated to report upwards unresolved concerns and to respond properly to the unresolved concerns of others.

The IRS is the best answer to the question “Who does health and safety here?” The answer should be “Everyone”.

There were three good reasons for the legislation to include the IRS as the governing philosophy in occupational health and safety. These reasons have not changed over the years. Firstly, the IRS takes advantage of the knowledge in the workplace. People who do the job, know the job best. Secondly, the IRS takes advantage of personal motivation. It is your life, your health and the life and health of your coworkers. And lastly, the IRS is much cheaper than any sort of command and control system which relies on government inspectors.

IRS Principles

From the OHSA we can derive the following principles about the philosophy of the Internal Responsibility System:

Personal Responsibility – this is the most important element of the IRS, the idea that each individual in the workplace is personally responsible for identifying health and safety problems and seeking solutions.

Inclusivity – there is no one that is not involved in the IRS. It is clearly a multi-party philosophy.

Accountability – the IRS relies on sets of obligations (translated to legal duties) so it therefore also relies on the accountability that these obligations are being met.

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Cooperation – the IRS is intended to be cooperative. The goal of everyone is the same – the protection of life and health.

Information flow – there are serious obligations to deal with hazards and with rights not to have hazards imposed therefore there has to be a continual information flow occurring about what the hazards are and what controls are necessary.

Proactive – the IRS adopts the idea that we should not wait for an accident to happen before acting to prevent and reduce risk and exposure.

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Joint Health and Safety Committee

Effective Date: April 1, 2010

Policy #: HS-02

Revision Date: March 12, 2021

Scope: All employees, volunteers, visitors and people supported at New Leaf

PURPOSE

The Joint Health and Safety Committee (JHSC) is the basic auditor of the Internal Responsibility System, within which the employees and employer of New Leaf work together to continuously improve health and safety conditions in the workplace. The committee has four principle functions: to identify potential hazards, to evaluate these potential hazards, to recommend corrective action and to follow up implemented recommendations. Other functions of the committee can include promoting education and awareness of Health and Safety and to receive information regarding the identification of potential or existing hazards or work practices in the external community (ie SARS, West Nile, etc).

MEMBERSHIP

Working in compliance with the Occupational Health and Safety Act (OHSA), a joint health and safety committee is required at a workplace in which twenty or more workers are regularly employed (S 9. (2)(a)). A committee shall consist of at least six persons or such greater number as may be prescribed for a workplace where fifty or more workers are regularly employed (S.9.(6)(b)).

The members of the committee who represent workers shall be selected following the guidelines or processes identified by the Union (SEIU). Members of the committee representing management will be selected by considering their knowledge of operations and to their duties and responsibilities as they relate to work procedure and safety.

New Leaf will post and keep posted at each Program/Worksite/Administrative Office the names and work locations of the committee members on the Joint Health and Safety Committee (S. 9. (32)).

A member of the committee who ceases to be employed at the workplace ceases to be a member of the committee (S. 9. (10)).

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All new committee members will be paired up with a senior member of the committee to receive training on the Health and Safety Binder and the Health and Safety Manual.

CERTIFIED MEMBERS

The committee will commit to have a minimum of two (2) Certified members of which one will represent the worker and one will represent management. When there is more than one Certified member representing the workers and more than one Certified member representing the employer, the union and the employer shall designate one or more of them who then become solely entitled to exercise the rights and required to perform the duties under the Act of a certified member (S.9. (15 &16)). Certified members will carry out their duties as outlined in the OHSA and will report to the committee the outcome of their duties when so carried out.

CO-CHAIRS

Two of the members of the committee shall co-chair the committee, one of whom shall be selected by the members who represent workers, and the other of whom shall be selected by the members who exercise managerial functions (S. 9.(11)). The term of office for a co-chair is two (2) years, or until the co-chair is unable to carry out his or her duties effectively. Co-chairs will communicate to the employer through the Executive Director. Co-chairs are accountable to assign such tasks as critical injury investigation, work refusal investigation, and other duties as needed. Co-chairs are responsible for reviewing the minutes of each meeting prior to being distributed to the membership and to set the agenda for the next meeting.

QUORUM

The committee shall have a quorum of at least six (6) members of which half (3) must be worker members. The number of worker members in attendance shall not be less than the number of management members for the committee meeting to commence.

FREQUENCY OF MEETINGS

The committee will meet on a minimum of a quarterly basis (S. 9. (33)) or more frequently as needed. Dates, place and time of the meetings will be determined by the committee.

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RIGHTS AND DUTIES OF THE COMMITTEE MEMBERS

Rights:

- To obtain information from the employer on actual or potential hazards of materials, processes or equipment. (s. 9(18)(d)(i))
- To obtain information on health and safety work practices and standards in similar and other industries. (s. 9(18)(d)(ii))
- To obtain any information and assistance necessary to carry out regular inspections. (s. 9(29))
- To not be hindered or interfered or furnished with false information in the exercise of a power or a performance of a duty under the Act. (s. 62(5)(a)(b))
- To receive a response to committee recommendations in writing within 21 days, including a timetable for implementation or reasons for disagreeing. (s. 9 (20))
- To obtain information concerning any testing program to any equipment or work environment. (s. 9(18)(e))
- To be consulted before testing of any equipment, machines or work environment and to have a worker member present for all testing. (s. 9(18)(f))
- To receive a copy of the inspector's decision following his or her investigation of the workplace or work refusal. (s. 43(9))
- To receive information and advice from Ministry inspectors relating to administration of the Act, and for protection of the workers. (s. 12(3))
- Receive written notice of lost time injuries caused by accident, explosion or fire at the workplace and any occupational illnesses known to the employer. (s. 12(1))
- To be consulted in the development and implementation regarding any training or instruction regarding toxic substances to be given to workers. (s. 42(2))
- To be paid to attend committee meeting, inspections and investigations. (s. 9(34)(b))
- To be paid for preparation time of one hour (or more) before every committee meeting. (s. 9(34)(a)). Note: only if preparation time is required.

Duties:

- To meet on a minimum of a quarterly basis. (s. 9(33))
- To maintain and keep minutes of the meetings and to make them available to the workers and to any Inspectors if requested. (s. 9(22))
- To inspect the physical condition of a Program/Work Site at least once per month and to report all findings to the committee. (s. 9(27)) Completed inspections are kept in the Health and Safety Binder in the Main Administrative Office and should be made available for all workers. Each program/worksites is to be inspected annually.
- To investigate all work refusals and to report findings to the committee. (s. 43(4)(b))
- To investigate all critical injuries and to report findings to the committee. (s. 9(31))
- To identify and report any workplace hazards. (s. 9(18) (c))
- To accompany Ministry of Labour Inspectors and to report all findings to the committee. (s. 43(7))
- To maintain confidentiality of all information as part of fulfilling their duties, except where disclosure of information is specifically required by the OHSA. (s. 63(1)(a))

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- To report any unresolved safety concerns, near misses, incidents and accidents to the committee and to accept suggestions for resolving the same. (s. 9(30))
- To forward any issues or items of relevance to the co-chairs to be added to the meeting agenda.
- To complete special tasks as assigned by the committee.

PROTECTION

A committee member is protected from actions or proceedings for damages for acts done or not done in good faith in the execution or intended execution of their duties under the OHSA (S.65 (1)(d)).

Critical Injuries

The Occupational Health and Safety Act (OHSA) requires an employer to contact, by phone or other direct means, an Inspector at the Ministry of Labour, the Joint Health and Safety Committee (JHSC), the Health and Safety Representative and the Union when a person is killed or critically injured from any cause at a workplace. The employer shall also, within 48 hours after the occurrence, send to a Director at the Ministry of Labour a written report of the circumstances of the occurrence. (Section 51(1))

Regulation 834 defines Critical Injury as an injury that:

- places life in jeopardy;
- produces unconsciousness;
- results in substantial loss of blood;
- involves the fracture of a leg or an arm but not a finger or a toe;
- involves the amputation of a leg, arm, hand or foot but not a finger or a toe;
- consists of burns to a major portion of the body; or
- causes the loss of sight in an eye.

The Scene of a Critical Injury or Fatal Accident

If a person is “critically injured” or killed at a workplace, no person is allowed to alter the accident scene without the permission of the Inspector from the Ministry of Labour. This means that no one can interfere with, disturb, destroy, alter or carry away any wreckage,

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Front Line Protocol for Critical Injuries or Fatalities

- Call 911 to engage Emergency Medical Help for the injured person.
- Call the following people in the order listed until you have reached and have spoken to one person directly to report the incident to:
 - On call Manager (905-955-9511)
 - Director of Human Resources
 - Any Representative from the Health and Safety Committee

The Right to Refuse Work

Effective Date: April 1, 2010

Policy #: HS-03

Revision Date: **March 12, 2021**

Scope: **All employees and volunteers**

The Occupational Health and Safety Act (OHSA) gives a worker the right to refuse work that he or she believes is unsafe (Section 43 (3)).

Along with this right, the OHSA also sets out specific procedures that must be followed to enact this right of a work refusal. It is important that all workers, including employees, supervisors and Health and Safety Representatives understand this procedure.

Do all workers have the right to refuse unsafe work?

Yes, but for some workers this right is limited. Certain workers cannot refuse unsafe work if the danger in question is a normal part of their job or if the refusal would endanger the life, health or safety of another person. (Section 43 (1) (a)(b)).

Workers referred to in the above paragraph that have this limited right to refuse include: Police Officers, Firefighters, Ambulance Services, workers employed in Correctional Institutions, and Health Care Workers employed in workplaces like Hospitals, Nursing Homes, Psychiatric Institutions, Rehabilitation Facilities, Mental Health Homes, Residential Group Homes, or any other facility for persons with behavioral, emotional, or physical handicaps (Section 43 (2)(a)(b)(c)(d)).

It is important to understand that just because a worker has a limited right to refuse, this does not mean that they could never refuse. It simply means that they cannot refuse work that is inherent to their job or if it puts someone's life, health or safety in danger. For example, an employee could not refuse to support an individual in the care of New Leaf based on the presence of challenging behaviour alone. These situations are considered an inherent part of their job. However, an employee could refuse to travel in a company vehicle that had defective brakes.

When can a worker refuse to work and what is the procedure?

Ontario's Occupational Health and Safety Act is very specific regarding when and how a worker can refuse to work. The work refusal procedure has basically been separated into two stages.

First Stage: A worker can refuse to work if he or she has reason to believe that one or more of the following is true:

- any equipment, machine, device or thing the worker is to use or operate is likely to endanger himself, herself or another worker (Section 43 (3)(a));

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- the physical condition of the workplace or the part thereof in which he or she works or is to work is likely to endanger himself or herself: (Section 43 (3)(b));
- any equipment, device, machine or thing he or she is to use or operate or the physical condition of the workplace or the part thereof in which he or she works or is to work is in contravention of this Act or the regulations and such contravention is likely to endanger himself, herself or another worker (Section 43(3) c).

This is considered to be the subjective stage as a worker only has to have reason to believe they could be in danger. Reason to believe can include a bad feeling, gut instincts etc.

If a worker feels that he or she has reason to believe that he or she or any other worker could be in danger if they do the work, the worker must immediately tell their Supervisor or Employer that the work is being refused and to explain why (Section 43 (4)). The Supervisor or Employer must in response investigate the situation immediately in the presence of the refusing worker and

- a Joint Health and Safety Committee member who represents workers (if possible this should be a certified member) or
- a health and safety representative in those workplaces that do not have a committee, or
- another worker who because of their knowledge, experience and training has been selected by the workers (or union) to represent them. (Section 43 (4)).

This investigation must occur immediately. Therefore, if the Supervisor or Employer is not at the project the refusing worker must contact them at home so they can respond as soon as possible. In the interim, the refusing worker must remain in a safe place near the work station until the investigation is complete (Section 43 (5)).

At this point in the work refusal no other staff is able to do the work that is being refused.

During the investigation the Supervisor or Employer, the Joint Health and Safety Representative and the refusing worker will investigate the work/machine/device/area that is being refused and the following can occur:

- find and agree that there is a hazard and order a stop work on the machine/device/area until the danger is eliminated or reduced. Worker assigned alternative duties in meantime.
- Find and agree that there could be a potential hazard and make alternative arrangement for the work to be done in a safer manner. Worker returns to work.
- Decide that there is not a safety issue. Worker returns to work.

The result of the investigation by the Supervisor or Employer and the worker and worker representative ends the first stage of the work refusal. If the refusing worker is satisfied with the response and no longer feels there is a safety issue and has returned to work, this is the end of this work refusal.

If, however the refusing worker is not satisfied with the result of the investigation the work refusal would go into the second stage.

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Second Stage: The worker can continue to refuse to do the work if he or she has reasonable grounds for believing that the work continues to be unsafe. (Section 43 (6)). This stage is considered to be the objective stage because a worker can no longer refuse on just a belief that it is not safe. The refusing worker must have some sort of objective information that makes him or her believe that it is not safe. The worker does not have to be right, but they do need some sort of objective information.

If the refusing worker still believes the work to be dangerous then the Supervisor or Employer or the refusing worker or the Health and Safety Representative must notify the Ministry of Labour to have an Inspector come out to investigate the issue. (Section 43 (6)).

While waiting for the Inspector to come out, the worker must remain in a safe place and near the work station. At this point in time an employer may assign some other reasonable work during the workers normal hours. If no such work exists, the employer can give other directions to the worker. While waiting for the Inspectors investigation the Supervisor or Employer may ask another worker to do the work that is being refused. The Supervisor or Employer can only do this after telling the other worker that the work has been refused and why. This conversation must occur in the presence of the Joint Health and Safety Representative (or Health and Safety Representative if there is no committee or a worker chosen by the workers or union to represent them) (Section 43 (11)).

When the Inspector arrives, he or she will have to investigate the work or process that is being refused. The Inspector will do the inspection with the Supervisor or Employer present, the refusing worker, and the Health and Safety Representative (Section 43 (7)). The Inspector will decide if the work/process/machine/device etc is likely to endanger the worker or another person. The Inspector's decision must be given in writing as soon as possible to the employer, the refusing worker, and the health and safety representative (Section 43 (9)). The Inspector's decision will result in one of two things happening:

- the Inspector decides the situation is unsafe. The Inspector will issue the Employer Orders that must be complied with to make the situation safe. Once the Orders have been complied with the worker will return to work
- the Inspector decides that there is not an endangerment to either the worker or another worker. The refusing worker must return to work.

It is important to note a couple of things regarding the above process. Either the refusing worker or the Supervisor/Employer may appeal an Inspector's decision to an Adjudicator at the Ministry of Labour. While the appeal is pending all decisions by the Inspector stand and must be followed until the appeal process is finished. Also, during this whole process the refusing worker and the health and safety representative are deemed to be at work and therefore must be paid for the time spent carrying out their duties. Finally, no Employer or person acting on behalf of the employer can dismiss, threaten to dismiss, discipline, suspend or impose any penalty on a worker for acting in compliance or invoking their rights under the OHSA (Section 50 (1)). However, this provision does not apply if the work refusal was made in bad faith or if the worker continues to refuse after the Ministry of Labour Inspector finds that the work is safe. If a worker believes that they were unfairly disciplined by the Employer the worker has recourse either by putting in a complaint to

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the Ontario Labour Relations Board, or by having the complaint dealt with under the grievance procedure in their Collective Agreement.

The Difference Between Reporting a Hazard and Refusing Unsafe Work

It should be rare that an actual work refusal happens. If the Internal Responsibility System is working, that is if workers are reporting hazards and supervisors or employers are being duly diligent in responding to the reports, then there should be little need for a worker to refuse to work.

A worker's duty to report hazards to the Supervisor or Employer does not prevent a right to refuse work. In fact, at any time during the reporting process of a hazard it can shift over into a work refusal. It is important to understand though, if a worker is reporting a hazard or refusing work because the duties and responses are different. For example:

Section 28	Section 43
<u>Worker's Duty to Report Hazards</u>	<u>Worker's right to Refuse Unsafe Work</u>
<i>Worker reports hazard to supervisor</i>	<i>Worker reports hazard to supervisor</i>
<i>Supervisor investigates</i>	<i>Supervisor calls in health and safety rep</i>
<i>Action taken to reduce or eliminate hazard</i>	<i>Supervisor, worker and rep. Investigate</i>
<i>Problem solved</i>	<i>Worker returns to work or Inspector called</i>
<i>If not solved right to refuse work</i>	<i>Inspector investigates and gives decision</i>

The general rule of thumb is, if a Supervisor or Employer is not sure if the worker is refusing or reporting a hazard they will ask directly if it is a report or a refusal.

Unilateral and Bilateral Work Stoppages

In addition to a worker's right to refuse work, the Occupational Health and Safety Act (OHSA) also gives certified health and safety members the right to stop work if they believe that dangerous circumstances exist at the workplace. The OHSA is very specific in their definition of "dangerous circumstance". A dangerous circumstance means a situation in which the provision of the OHSA or the Regulations is being contravened, the contravention imposes a danger or a hazard to a worker and the danger or hazard is such that any delay in controlling it may seriously endanger a worker (Section 44 (1)).

If a certified member finds that there is a dangerous circumstance and that it is likely to endanger someone if there is a delay, the certified member will enact a work stoppage and inform the workers to stop all work that is posing a danger. The certified member must report this work stoppage to the supervisor or employer right away and the supervisor or employer will investigate the matter right away in the presence of the certified member (Section 45 (1)). The certified member may request that a second certified member investigate the matter if they have reason to believe that dangerous circumstances continue to exist after the investigation and any remedial actions (Section 45 (2)). If both certified members find that the dangerous circumstance exist the employer must ensure all dangerous work ceases until either the certified

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members are satisfied that the danger no longer exists or the employer may call for an Inspector from the Ministry of Labour to come in to investigate (Section 45 (6)). After taking steps to remedy the dangerous situation the employer may request the certified members or the Inspector to cancel the direction for a work stoppage.

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The Workplace Hazardous Materials Information System

Effective Date: April 1, 2010

Policy #: HS-04

Revision Date: **March 20, 2021**

Scope: **All employees and volunteers**

WHMIS 2015

WHMIS is a program, involving federal, provincial and international (Globally Harmonized System (GHS)) legislation, which sets out a system for providing information and education about hazardous materials to workers. It was developed through negotiations between federal and provincial authorities, industry groups, and organized labour. The new WHMIS is called “WHMIS 2015” and the original version is now referred to as “WHMIS 1988”.

The purpose of WHMIS 2015

- To fulfill the worker’s Right to Know about hazards in the workplace.
- To enhance the ability of the Internal Responsibility System to identify and eliminate or control hazards in the workplace.
- To ensure consistency of hazard information systems across Canada.

Hazard

A hazard is an object, material, force, event, behaviour or condition, which is a risk to the life, health, security or activity of a person.

Hazards covered by WHMIS 2015

- Environmental hazards
- Physical hazards
- Health hazards

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Origin of “Right to Know”

- Various schools of moral philosophy agree that a person has the moral right to know about risk, which may be imposed by others.
- The moral right to know is translated into a legal right to know through a political consensus reached between labour, industry and government and executed through the legislatures of federal and provincial governments.
- The legal right to know about hazards in the workplace is now found in federal and provincial Acts and Regulations, which together create the national system called WHMIS.

The Elements of WHMIS

- The WHMIS Triad – All Canada
 - Labels
 - Materials Safety Data Sheets (MSDSs)
 - Worker Education and Training
- Extras – Ontario
 - inventory of all hazardous materials
 - floor plan showing location
 - “assessments” to determine if materials are hazardous
 - community right to know
 - eventually – physical hazards

Legal Duties under WHMIS

- Outside the Workplace
 - Importers of hazardous materials
 - Producers of hazardous materials
 - Suppliers of hazardous materials

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- Inside the Workplace
 - Employers
 - Supervisors
 - Corporate Officers
 - Workers
 - Joint Health and Safety Committee (JHSC)

Suppliers' Responsibilities

- Classify hazardous materials into the three WHMIS classes.
- Provide “supplier labels” on hazardous materials going to the workplace.
- Provide MSDSs with hazardous materials going to the workplace.

Employers' Responsibilities

- They must assess all health and environmental agents located at the workplace to see if they are hazardous materials except:
 - Wood
 - Tobacco
 - Manufactured articlesThere are no WHMIS duties concerning these.
- They do not need to ensure they have supplier labels or MSDSs for the following but may need to provide WHMIS training for them.
 - Explosives
 - Cosmetics, food, drugs
 - Pesticides
 - Radioactive materials
 - Consumer products
 - Hazardous wastes

HS-04

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- They do have to have workplace labels and worker instruction for:
 - Hazardous wastes (simple identifying label)
 - Any controlled product in the workplace, even if the supplier would not have had label and MSDS duties (i.e., materials in #2 above). A workplace MSDS is required for these.
- They must provide worker with instruction for: “fugitive emissions” (leaks and other irregular releases of gases or vapors from a pressurized containment)
- They have to ensure supplier labels with MSDS are received and worker instruction is provided for any controlled product received from suppliers. If the supplier’s material is poured out of the original container, the workplace containers must have workplace labels.
- Do an assessment of all health and environmental agents produced in the workplace for use in that workplace to determine if these agents are hazardous materials.
- In a medical emergency, provide any information they have, including trade secrets (confidential business information), to a doctor or nurse.

Supervisor Responsibilities

Supervisors have an individual legal duty to advise workers of hazards (OHSA, s.27(2) (a)). But their responsibilities go deeper than that. Supervisors must be “competent” because:

s.25 (2) (c) ... an employer shall, when appointing a supervisor, appoint a competent person ...

- s. 1 “competent person” means a person who,
- is qualified because of knowledge, training and experience to organize the work and its performance,
 - is familiar with the provisions of this Act and the regulations that apply to the work, and
 - has knowledge of any potential or actual danger to health or safety in the workplace.

Which means supervisors have a legal duty to be familiar with:

- the WHMIS requirements
- all hazards of the job

and, furthermore, they have a legal duty to advise their workers of any hazards of the job.

HS-04

The Duty of Corporate Officers

OHSA, S. 32:

Every director and every officer of a corporation shall take all reasonable care to ensure that the corporation complies with,

- this Act and the regulations;
- orders and requirements of inspectors (Ministry of Labour) and Directors;
and
- orders of the Minister

Workers' Responsibilities

- They have a legal duty to work in compliance with WHMIS.
- They must participate in WHMIS instruction.
- They must use their WHMIS training to work safely on the job.
- They must not interfere with WHMIS labels (remove or deface them).

Note: Even though WHMIS is for the purpose of protecting a worker's "right", WHMIS is not a voluntary scheme which one may choose to participate in or not. Unlike other rights, you cannot waive the "right to know".

Joint Health and Safety Committee Responsibilities

- It must receive copies of MSDSs where required.
- It must be consulted in the development and implementation of WHMIS instruction.
- It must be consulted in an annual review of WHMIS instruction.

Enforcement of WHMIS

Federal (Across Canada)

- Fines for breaching the federal WHMIS legislation range up to \$1,000,000.00.
- These fines apply mainly to Importers and Suppliers.

HS-04

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Ontario (OHSA)

- The fines for individuals under the provincial WHMIS legislation range up to \$25,000, a year in jail or both. The maximum fine for a corporation is \$500,000. (OSHA, S.66(1) and (2)).
- The MOL Inspector on his announced inspections can issue Orders for breach of the OHSA. Note: A new type of Order, an “s.57(8) WHMIS order” allows the Inspector to require that a hazardous material not be used until labels and/or MSDS are present. This can, in effect, be a “Stop Work Order”.
- Charges are laid usually where there is flagrant breach of an Order and almost always where a worker is killed or critically injured.
- Employers, supervisors, workers and, now, corporate officials individually may be charged for breach of their duties.

WHMIS Classification

Hazardous Materials are Covered by WHMIS

Suppliers must determine if any of their products fit into one of the three WHMIS / Globally Harmonized System (GHS) classes.

If it does, it is a controlled product, and the supplier must provide labels and MSDSs to the workplace receiving the product.

Classes:

- **Physical Hazards Group:** The hazardous products in this group have been classified according to their physical or chemical properties, such as reactivity, flammability, compressed gases or corrosiveness on metals.
- **Health Hazards Group:** Hazardous products are classified in this group based on their ability to cause adverse health effects such as acute toxicity, respiratory sensitization (such as breathing difficulties, asthma or allergy), eye irritation or carcinogenicity (ability to cause cancer).
- **Environmental Hazards Group:** While an environmental hazards group (products with effects on the ozone layer or on the aquatic environment) exists in the GHS, it has not been adopted in WHMIS 2015. However, WHMIS 2015 allows manufacturers, suppliers and employers to include environmental hazards in their labels and safety data sheets whenever possible.

But not:

- cosmetics, drugs, food
- pesticides
- radioactive materials
- wood
- manufactured articles
- tobacco
- hazardous wastes

Ergonomics and Musculoskeletal Disorder (MSD) Prevention

Effective Date: April 1, 2010

Policy #: HS-05

Revision Date: **March 22, 2021**

SCOPE:

All employees, volunteers, visitors and people supported

GENERAL:

New Leaf is committed to providing a safe and healthy working environment. New Leaf will demonstrate its commitment by providing financial, physical and human resources to ensure that all people understand and are aware of positive ergonomics and musculoskeletal disorder prevention.

Ergonomics can be described as the study of the interaction that occurs between a worker and their environment. The goal is to reduce the incidence of musculoskeletal injuries (MSI's) by minimizing or eliminating MSI risk factors through proper ergonomics.

PURPOSE:

The purpose of this policy is to:

- decrease the physical demands of daily tasks.
- decrease the risk of musculoskeletal disorders.
- promote and support the health and safety of all people
- provide equipment, resources and effective training.
- ensure all people are assessed for their mobility status where indicated.
- promote the use of ergonomic equipment.
- ensure people have the appropriate training and skills with respect to MSD prevention and use of all available ergonomic equipment. Training is available on HR downloads.

RESPONSIBILITIES:

All people are expected to comply with the outlined policy and procedures.

Risk Factors

Common causes or risk factors that increase the likelihood of someone suffering a MSI include:

Use of excessive force
Highly repetitive movements
Awkward and/or static postures
Manual handling of heavy loads
Poor tool, equipment or workplace design
Cold/Hot temperatures
Vibrations

Employer Responsibilities:

- Enforce the policy and procedures
- Provide equipment, necessary resources and initial and ongoing staff training (on HR downloads). Employee sign off confirming training is kept in Human Resources files.
- Evaluate and update the policy and procedures as required.

Manager Responsibilities:

- Enforce policy through regular monitoring strategies.
- Conduct accident/incident investigations.
- Report all findings of investigations to senior management.
- Ensure all staff are educated in MSD symptoms and proper equipment use
- Maintain education records.
- Ensure all new staff receives general and site-specific orientation to the policy.
- Maintain ergonomic equipment assigned to their department.
- Include the auditing of worker practice in the planned and unplanned inspections and report on findings to senior management.
- Take every reasonable precaution for the protection of the employee.

Member responsibilities:

- Comply with policy and procedures and ensure safe practices are followed at all times.
- Participate in education as established by the organization.
- Report any unsafe acts, hazards, equipment problems, or any other unsafe tasks immediately to the supervisor or on call designate.
- Report any incidents, accidents, and near misses to the supervisor immediately and cooperate in the investigation as required by management.

Joint Health and Safety Committee Responsibilities:

- Review incident/accident data related to musculoskeletal disorders.
- Review lost time reports.
- Review policy and procedures annually.
- Make recommendations in writing to management.

PROCEDURES:

Inspection and Maintenance of Equipment

- Any unsafe or inappropriate equipment shall be removed from service and a maintenance request form forwarded to the maintenance department.
- Maintain all equipment in safe operating condition.
- Ensure complete and accurate documentation of preventive maintenance.

Evaluation

The MSD policies and procedures will be evaluated annually by the Health and Safety Committee. The following indicators will be collected in a timely manner by the designated authority and forwarded to the Director: Human Resources, who will collate, analyze and summarize the data and make recommendations for program enhancements to senior management.

- Employee incidents/accidents.
- Accident investigations.
- Lost time reports.
- Near misses/hazards.
- Equipment inspections.

Any changes to the policies and procedures will be documented, approved by the Executive Director and communicated immediately to all affected staff and management.

Personal Protective Equipment Use Policy

Effective Date: April 1, 2010 **Policy #:** HS-06

Revised Date: **March 23, 2021**

SCOPE:

All employees, volunteers, visitors and people supported at New Leaf (members)

POLICY STATEMENT:

New Leaf has provided personal protective equipment (PPE) to be used by any staff, visitor, volunteer or person supported as needed.

GENERAL:

New Leaf will provide personal protective equipment or devices as are necessary to protect employees, volunteers, visitors and people supported against hazards to which they may be exposed.

REFERENCES:

Occupational Health and Safety Act, Product Material Safety Data Sheet(s)

HS-06

Personal Protective Equipment

There are three possible sources for protecting workers:

- (1) at the source
- (2) along the path and
- (3) at the worker.

There are many different kinds of PPE. These can include, but are not limited to the following:

- safety headgear
- eye and face protection (ie. Masks)
- limb and body protection (ie. Gloves and Gowns)
- footwear (ie Policy on closed toe/heal footwear, and safety boots)
- buoyancy equipment (in pool area)
- respiratory protection (ie, dust masks)

It is important to note that the use and requirement of PPE is different dependent upon which regulations the work falls under and these regulations must be consulted to ensure that the appropriate protection is used.

In addition to compliance, for personal protective equipment to be effective:

- it must fit and be maintained
- workers must be trained in the proper use and care
- workers need to understand why and under what circumstances it is to be used
- where appropriate, workers should be involved in the selection
- it must be specific for the type of work being performed

It is the manager and supervisor's responsibility under the OHSA to ensure

- that the appropriate PPE is available to all workers
- that all workers wear and/or use all PPE required and provided
- and to ensure that all equipment is properly maintained.

It is each worker's responsibility

- to use all equipment in accordance with training and instructions
- to wear all PPE provided, and to report any equipment malfunction to the manager or supervisor.

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It is the Employer's responsibility

- to always ensure that the required PPE is available and is being used
- to ensure that all persons who use PPE are adequately instructed in the correct use.

Dress Code and Footwear

New Leaf has a dress code and footwear policy (HR-16) which can be found in the Personnel Policy Manual outlining provisions for how staff should dress for work and the footwear required. Shoes, boots, and athletic shoes which cover the entire foot as well as sturdy sandals with heel straps and toe cover are permitted. Footwear such as high-heeled shoes or boots, flip-flops and sandals without a heel strap are not permitted. While at the day program, steel toed shoes / boots are required for all work sites (including the wood shop, barn, greenhouse, store room) except the Recreation Centre, Voc office and the Café. All maintenance staff are to wear steel toed shoes/boots at all times while working at New Leaf. Temporary protective toe caps are available on site for occasional use. When attending the pool program or employee training and meetings in the Recreational Centre, the footwear requirements are not applicable. Staff must leave the work site immediately if protective footwear is not worn as required. Noncompliance with this policy will be followed up with discipline up to and including dismissal.

Routine Practices & Universal Precautions

Routine Practices are a proactive approach to prevention and control precautions used on a daily basis to help reduce the spread of disease or infection to others. These precautions protect both the worker and the people supported during times when body fluids may be present. It is expected that all staff adhere to these practices.

Routine Practices include:

- Frequent and thorough hand hygiene
- Use of alcohol-based hand sanitizers
- Use of Personal Protective Equipment, i.e.; gloves, face shield, aprons, goggles, etc. when appropriate
- Ongoing education to the people supported on health-related issues to promote the safety and well-being for the individual
- Food safety, handling, preparation and cross-contamination awareness
- Healthy workplace practices including frequent and thorough cleaning in all areas and disinfecting surfaces, objects and equipment on a daily basis

For personal protection:

- Wear gloves when in contact with blood or other body fluids, excrement or non-intact skin.
- Wear gloves when in contact with articles such as clothing or surfaces that have been contaminated with blood or body fluids, and while cleaning or decontaminating an area.
- Wear gloves when performing any other procedure involving blood.

- Replace torn or punctured gloves immediately.
- Wear a new pair of gloves for every person supported and for every new task.
- Wear plastic aprons or gowns when body fluids are likely to soil clothing.
- Wear masks, face shields or goggles when body fluids are likely to splash mucous membranes, e.g. eyes, mouth.
- Refer to the Pandemic Policy (HS-11) for further direction

Hand washing is the most effective way to prevent the spread of infection from one person to another. Care givers need to wash their hands before and after direct client contact, immediately when there has been any contact with blood or other body fluid and after removing gloves.

Hand washing can be performed using plain soap (it does not have to be anti-bacterial). Lather for 15 seconds rubbing your hands (and between fingers) together as it is the friction that removes the dirt/germs (not just the application of soap). Rinse off and use paper towels to wipe your hands and to turn off the taps. If you do not have visible dirt on your hands, an alcohol-based hand sanitizer is a good option, applied to all surfaces of the hands and fingers until dried.

Environmental Cleaning:

It is important to clean surfaces that have been contaminated with blood or body fluids. To clean up after a blood or body fluid spill follow these steps:

- Put on a pair of household rubber gloves.
- Clean up the spill using paper towels, and then wash the area with detergent and water.
- Wipe the surface with a cleaner that is 99% bactericidal.
- Leave the solution in contact with the surface for at least 10 minutes. This will kill any germs left on the surface.
- Dispose of used paper towels in the garbage bin, remove gloves and wash your hands.
- To clean environmental surfaces that have not been contaminated by blood or body fluid you can use any general cleaning product. It is important that you follow the manufacturer's directions to make sure it is most effective.

Handle Sharps Safely:

Take care to prevent injuries when using needles and other sharp instruments or devices; when handling sharp instruments after procedures and when disposing of used needles. Use safety engineered needles for injections. Place used disposable syringes and needles and other sharp items in puncture-resistant containers for disposal. Avoid sharing personal items such as razors and toothbrushes. Never share needles for injections.

Workplace Violence and Workplace Harassment Policy

Effective Date: April 10, 2010

Policy #: HS-07

Revision Date: November 19, 2013; November 20, 2014; September 21, 2015; March 31, 2021, February 1, 2023

Scope: All agents of New Leaf. These include employees, residents, clients, volunteers, students, visitors, contracted workers or anyone authorized to conduct work on behalf of the agency. All employees/agents are responsible for adhering to this policy and reporting any workplace violence, harassment or bullying that threatens or has the potential to threaten a safe work environment

Policy Statement:

New Leaf is committed to providing a safe working environment in which all people are treated with respect and dignity.

New Leaf will not tolerate workplace violence, harassment or bullying under any circumstances or to any degree in any of our workplace environments. This includes homes, offices, day services and other community-based locations where services may be provided. New Leaf's policy regarding workplace violence, harassment and bullying is in accordance with Bill 168 amendments to the *Occupational Health and Safety Act (OHS Act)*. Action will be taken to minimize the risk of workplace violence, harassment and bullying.

New Leaf provides services to people who, as a result of personal experiences, disability or disorder, may demonstrate disruptive and, at times, aggressive/responsive behaviour.

The OHS Act extends the right to refuse work to an employee who has reason to believe that workplace violence is likely to endanger him/her. However, as employees of New Leaf, the right to refuse work and/or stop work under The Occupational Health and Safety Act, Section 43 (2)(d)(ii) may be limited by the following:

The Occupational Health and Safety Act states the following:

The Right to Refuse Work

Certain workers cannot refuse unsafe work if the danger in question is inherent in the worker's work or is a normal condition of the worker's employment. These workers include;

- A person employed in the operation of a residential group home or other facility for persons with behavioural or emotional problems or a physical, mental or

developmental disability (*OHSA Sec. 43 (2) (d-ii)*).

New Leaf will provide the necessary information and training to minimize risk to people receiving service, to employees and agents.

Roles & Responsibilities

Supporting the workplace violence policy and the workplace violence program

Employer

- Ensure that measures and procedures identified are carried out and that management is held accountable for responding to and resolving complaints of workplace violence or harassment.
- Ensure reasonable precautions are taken to protect employees if the employer becomes aware, or should reasonably be aware, that domestic violence, that would likely expose an employee to physical injury, may occur.
- Ensure that information is provided to employees, including personal information, of a person with a history of violent behaviour if the employee can be *expected* to encounter that person in the course of their work and the risk of violence is likely to expose the employee to physical injury. The information disclosed cannot be more than what is reasonably necessary to protect the employee from physical injury.
- Ensure compliance by all persons who have a relationship with the organization, such as therapists, physicians, contractors, volunteers, etc.
- Conduct minimally an annual review of the Workplace Violence and Workplace Harassment Prevention program.
- Ensure that regular risk assessments take place, control measures are established and training and education is delivered to all employees.
- Review of all reports of violence, threats of violence or harassment in a prompt, objective and sensitive manner. This includes a review of all investigations associated with violence related incidents.
- Take corrective action and provide response measures.
- Ensure any deaths or critical injuries have been reported to a Ministry of Labour (MOL) inspector, the Ministry of Children, Community and Social Services (as required), the police (as required), the JHSC, the Health and Safety Representative (HSR) and Union representative. Ensure deaths or critical injuries are investigated with the JHSC and that a report goes to all parties in writing within forty-eight (48) hours of the occurrence on the circumstances of the occurrence, including such information and particulars as the Occupational Health & Safety Act and Regulations prescribe.
- Ensure claim forms are submitted to WSIB of all accidents where an employee loses time from work. Details of accident information (where there is no critical injury) must be provided to the JHSC within four (4) days of the occurrence as the Occupational Health & Safety Act and Regulations prescribe.

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Manager

- Enforce policy and procedures and monitor employee compliance.
- Demonstrate a leadership style that promotes a workplace that does not tolerate violence, harassment or bullying to any degree.
- Identify and alert employees/agents to any new or potentially violent situations that may arise in the course of their duties.
- Ensure employees know and follow positive behaviour support plans.
- Develop workplace procedures that minimize the risk of workplace violence, harassment and bullying.
- Identify training requirements and implement appropriate supports in collaboration with the Directors of Services and Human Resources.
- Ensure that debriefing is completed for those either directly or indirectly involved in the incident.
- Investigate incidents of workplace violence and harassment as directed by the Director: Human Resources.
- Ensure that all employees/agents understand documentation and reporting procedures.
- Ensure the security and safety of all parties involved during an investigation of incidents of workplace violence, harassment or bullying.
- Contact emergency services as needed.
- Track and analyze incidents to identify trends and make recommendations for prevention initiatives.
- Ensure protective safety equipment is available and in good repair – replaced if needed.

Employee

- Adhere to procedures that minimize the risk of workplace violence, harassment and bullying.
- Report all incidents or injuries of violence, harassment or threats of violence to their Manager or designate immediately. This may include threats of violence that may expose an employee to physical injury at work by parties not directly related to the organization (e.g. employee's spouse or family member, or community member).
- Participate in education and training programs to be able to respond appropriately to any incident of workplace violence or workplace harassment.
- Understand and comply with *Workplace Violence and Workplace Harassment Policy* and all related procedures.
- Inform management about any concerns about the potential for violence or harassment in the workplace. Inform manager if protective equipment is in need of repair / replacement.
- Contribute to the completion of any risk assessments.
- Participate in a review at least annually of the Workplace Violence and Workplace Harassment Prevention program.

Joint Health and Safety Committee (JHSC)

- Be consulted about the development, establishment and implementation of workplace violence and workplace harassment prevention measures and procedures.
- Be consulted and make recommendations to the employer to develop, establish and provide training in workplace violence and workplace harassment prevention measures and procedures.
- Take part in a review at least annually of the Workplace Violence and Workplace Harassment Prevention program.
- The employee designate should investigate all critical injuries related to violence.

Workplace Violence and Workplace Harassment Program

New Leaf is contracted by the Ministry of Children, Community and Social Services to provide residential and community support services to “hard to serve” adults. Many of the people supported are clinically diagnosed with a developmental disability and also have behavioral, emotional, psychiatric or physical difficulties. Inherent to this diagnosis is that a person supported, at times, may display aggression, both verbal and physical. Therefore, employees could be at risk of personal injury.

Current measures in place to mitigate risk are as follows:

- Staff training in Non-Violent Crisis Intervention (CPI).
- Positive Behaviour Supports training – an approach to intervention that combines the technical features of Applied Behaviour Analysis with person centered values.
- Collaboration with local community support team at in regard to the provision of behavioural supports.
- Clearly written and regularly reviewed Behaviour Support Plans (PRN protocols and Crisis Plans).
- External Behaviour Review Committee - to provide third party review and recommendations regarding the use of intrusive support strategies (including psychotropic medications).
- Work Alone Policy.
- Behaviour Policy.
- Workplace Violence and Harassment Policy.
- External monitoring supports as a tool for staff to get immediate help (particularly when working alone).
- Workplace Violence and Harassment Working Group to assess risk and make recommendations.
- Crisis Response Training – Specialized training for staff to review Crisis plans, staff response to target behaviours, and a review of training around physical interventions so staff can protect themselves during high risk times.
- Protective apparel (where required) such as Kevlar sleeves and gloves with protocols set in place outlining expectations of use.

- Adherences and/or monitoring of Support Plans and protocols - training and/or feedback provided by New Leaf where deficiencies are found.
- Video monitoring (program specific) - monitoring done from one central point also ensuring safety and security.

The assessment and mitigation of risk is a central and integral part of programming and service delivery practice by New Leaf.

Definitions

“Workplace Violence”: Any action, incident or behaviour that is unreasonable/ irrational and has negative physical/psychological and/or emotional impact on an employee/agent.

“Domestic Violence”: This type of violence occurs when a person who has a personal relationship with a worker, such as a spouse or former spouse, current or former intimate partner or a family member, who may physically harm, or attempt or threaten to physically harm him/her while at work. In these situations, domestic violence is considered workplace violence if witnessed, reported and/or suspected in the workplace.

“Workplace Bullying” exists when unwelcomed behaviour is repetitive, unnecessary, offensive, deliberate and unprovoked, and is used to intimidate, humiliate, or threaten an employee.

“Workplace Harassment”: Involves unwelcome and offensive comments, conduct or gestures, or contact based on or related to grounds covered by the Ontario Human Rights Code.

Harassment occurs when the behaviour concerned:

- Is likely to be offensive, embarrassing or humiliating;
- Might, on reasonable grounds, be perceived as placing a condition on employment, its terms, or continued employment;
- Has the purpose or effect of interfering with an individual’s work performance or creates an intimidating, threatening, hostile or offensive work environment.

Harassment occurs when the individual knows, or reasonably should know, that the behaviour is offensive. Workplace harassment includes instances of psychological harassment or bullying. In some circumstances, a single incident of inappropriate behaviour may be substantial enough to create a poisoned work environment, whether or not the behaviour is directed toward a specific individual.

Harassment may involve behaviour such as the following:

- Jokes, comments, derogatory, degrading or insulting remarks or gestures;
- Taunting or scapegoating;
- Practical jokes which cause embarrassment, endanger safety or negatively affect work performance;
- Refusing to work with or cooperate with others;
- Picking a fight, shoving;

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- Displaying or distributing offensive pictures, graffiti or other material (e.g. offensive computer screens, email);
- Verbal abuse or threats;
 - Threats or promises regarding job security, job opportunities, or treatment based on rejecting or accepting harassing behaviour.

“Sexual Harassment”: Is a particular form of workplace harassment, which involves unwelcome sexually oriented behaviour based on gender or sexual orientation, which an individual knows or ought to reasonably know to be unwelcomed.

All New Leaf employees have the right to be free of any personal invitation, advances, or sexual solicitations from any other employee, volunteer, student, visitor or contractor or person supported. Sexual harassment may occur between persons of the opposite sex or of the same sex.

Sexual harassment may involve behaviour such as the following:

- Sexist or sexually oriented jokes or comments or derogatory, insulting or degrading remarks;
- Sexually suggestive gestures, innuendos or leering;
- Sexually explicit pictures or materials (e.g. pinups, offensive computer screens or games, graffiti);
- Unnecessary physical contact such as touching, pinching or patting;
- Sexually oriented practical jokes which are likely to be embarrassing;
- Inquiries about a person’s body, sex life, relationships or physical appearance;
- Unwelcome flirtation, advances or propositions;
- Threats or promises regarding job security, job opportunities or treatment based on rejecting or accepting any of the above behaviours (e.g. insisting on dates or sexual favours or on tolerating offensive jokes or comments, etc.)

Prohibited Conduct

The following conduct is prohibited under this policy and will lead to discipline up to and including termination of employment.

Workplace Violence (may include, but is not limited to):

- The use or the attempt to use physical force against an employee/agent
- A statement or behaviour that it is reasonable for an employee/agent to interpret as a threat to exercise physical force

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- An instance in which a person is assaulted, threatened, harmed or injured in the course of, or as a direct result of his/her work
- Any other act that would arouse fear in a reasonable person in the circumstances.

Workplace Harassment (may include, but is not limited to):

- Remarks or gestures that are derogatory, degrading or insulting that cause embarrassment and negatively affect work performance; examples may include gossip or spreading malicious rumors, jokes or innuendos that demean, ridicule, intimidate or offend, sabotaging someone else's work, making false allegations about someone.
- Displaying or distributing offensive material in any format (electronic, print, etc.).
- Threats or promises regarding job security, job opportunities, or treatment based on rejecting or accepting harassing behaviour.

Workplace Bullying (may include, but is not limited to):

- Attempting to coerce another employee or person to do something they don't want to through threats of violence, intimidation, or blackmail.
- Putting another person down in front of coworkers or subjecting them to constant ridicule.
- Leaving offensive messages via email or telephone.
- Spreading gossip, false or malicious rumors about a person
- Maliciously excluding a person from workplace activities.
- Creation of an oppressive and/or unhappy work environment.
- Threats of dismissal, excessive supervision or criticism.
- Using loud and abusive, threatening or derogatory language toward someone, usually in front of other employees or agents of New Leaf.

Domestic Violence (may include, but is not limited to):

- Threatening emails and phone calls.
- An incident that takes place at work.
- Unwelcome visits at the workplace.

These actions, incidents and behaviours will include but are not limited to physical, sexual, verbal assault, personal domestic violence and bullying.

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Workplace Violence, Harassment & Bullying Reporting Procedures:

Any employee/agent who is subjected to, a witness of, or has knowledge of, any incidents or threats of workplace violence, harassment or bullying, is required to immediately report the incident as per procedures below. ***In the event of immediate danger, call 911. The employee(s) must remove themselves from harmful situations if they have reason to believe that they are at risk of imminent danger due to workplace violence.***

1. Report the incident to the immediate manager and/or the Director: Human Resources. If the immediate manager is not available utilize the New Leaf on call system. If the incident involves the immediate manager, the employee/agents must report to the next appropriate level in the organizational structure and/or access the Director: Human Resources directly. The Manager or designate receiving the report must ensure that immediate measures have been taken to safeguard employees and people supported and curtail the violence or risks.
2. The employee/agents reporting the incident must record/document details on the Workplace Violence, Harassment & Bullying Complaint Form. The employee or agent must file the incident that documents his/her concerns with the Director: Human Resources.
3. Any other employee (including volunteer, student, agency staff, etc.), witnessing the incident, will complete an independent Incident Report.
4. In no circumstances will any person, who in good faith reports an incident of harassment, threats, intimidation or violence, or assists in its investigation, be subject to any form of retribution, retaliation or reprisal.
5. Any employee who makes or participates in such retribution or retaliation, directly or indirectly, will be subject to disciplinary action, up to an including termination of their employment. An employee who believes she/he has been or is being subjected to retribution or retaliation for reporting or assisting in the investigation of a report of violence, should immediately notify their Manager, the Director of Services, the Director of Human Resources or the Executive Director.

Investigative Procedures:

1. Upon receipt of a formal complaint of workplace violence, harassment or bullying, the Director: Human Resources will initiate an investigation as follows:
 - a) Advise the person who has reported the incident/made a complaint of the investigation process.
 - b) Assign the investigation to a minimum of 2 management employees or external people.
 - c) Oversee the investigation.

During an investigation, every effort will be made to ensure that the person reporting the incident/complaint and the person who is accused are accommodated to promote a positive, safe working environment. Employees may be assigned alternative work assignments. Where an assignment of reasonable alternative work is not practical, the Director: Human Resources may give other direction to the employee(s). The Director: Human Resources may also suspend an employee with pay pending the outcome of the investigation.

2. The investigators will promptly and impartially explore all allegations by interviewing both parties and others who may have knowledge of the incident or circumstances that led to the incident/complaint.
3. The investigators will make a recommendation of:
 - a) Sufficient evidence to support a finding of violation of this policy.
 - b) Insufficient evidence to support a finding of violation of this policy.
 - c) No violation of this policy.
 - d) False allegations (employee to employee).
4. Following the recommendations, the investigators will:
 - a) Make a written report of investigation findings with recommendations.
 - b) Forward the report to the Director: Human Resources.
5. When the investigation is complete the manager, in consultation with the Director: Human Resources, shall determine what actions are necessary and will meet with the complainant and respondent to discuss the path forward. will with the support of the manager.

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Monitoring and Evaluation

Risk Assessment

New Leaf, with employee involvement, through the Workplace Violence and Harassment Prevention Working Group in consultation with the JHSC will assess workplace violence and workplace harassment risks in all jobs and in the workplace as a whole.

A Workplace Violence and Workplace Harassment assessment will be completed and reviewed annually.

The Workplace Risk Assessment will be updated / reviewed following any incident of workplace violence not otherwise reviewed by the JHSC, or whenever new jobs or worksites are created or substantially changed.

Education and Training

A copy of the Workplace Violence and Workplace Harassment Policy will be posted on the Health and Safety Board at all New Leaf locations.

All new employees, students and volunteers, will receive both general and site-specific orientation to the Workplace Violence and Workplace Harassment Prevention program. In addition, all employees will complete an annual review of both the general and site-specific components of the program.

Where appropriate, incidents and their outcomes will be shared with employees through memos, team meetings or site-specific training.

Program Evaluation

The Workplace Violence and Workplace Harassment Program is evaluated annually by the Workplace Violence and Harassment Prevention Working Group which includes the Director of Services and the Manager of Human Resources and reviewed by the JHSC. This evaluation will include a review of all incidents of workplace violence not otherwise reviewed by the JHSC. The evaluation will be shared with the Executive Director. Everyone is accountable for the policy and procedures related to workplace violence and workplace harassment.

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NEW LEAF: LIVING AND LEARNING TOGETHER INC.

WORKPLACE VIOLENCE COMPLAINT FORM

CONFIDENTIAL

To investigate your complaint, it will be necessary to interview you, the alleged offender(s), and any witnesses with knowledge of the allegations. New Leaf will notify all persons involved in the investigation that it is confidential and that unauthorized disclosures of information concerning the investigation could result in disciplinary action.

*Submit complaints by mail or in person to:
New Leaf: Living and Learning Together Inc.
Director Human Resources
19601 Leslie Street, P.O. Box 230
Queensville, Ontario L0G 1R0*

*Exceptions for submission:
If the complaint is against a Director,
the form is filed with the Executive
Director. If it is filed against the
Executive Director, it is filed with the
President of the Board of Directors.*

Name of complainant:

Date:

I wish to complain against: _____
(Identify the person(s) directly responsible for the alleged violation)

Date of incident of alleged violation: _____

Place of incident of alleged violation: _____

Describe in detail the specific incident that is the basis of the alleged violation:
(Please be as detailed as possible. Use additional paper if needed.)

List and identify all witnesses to the incident(s) or persons who have personal knowledge of information pertaining to your complaint:

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Policies and Procedures

Have you previously reported or otherwise complained about this or related acts of workplace violence? If so, please identify the individual to whom you made the report, the date you made the report and the resolution.

Please submit any additional information pertaining to the alleged violence:

What would you like New Leaf to do as a result of your complaint – what resolution are you seeking?

If an advisor will assist you in the complaint process, indicate the individual's name:

Complaint Acknowledgement:

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Policies and Procedures

I certify that to the best of my knowledge the information that I have provided is accurate and the events and circumstances are as I have described them.

I understand and acknowledge that a copy of this complaint, along with attachments, will be furnished to the alleged offender (“respondent”). I have attached to this complaint any supportive evidence and/or documentation such as e-mails, records, materials which I believe supports my allegation. I also understand and consent to the disclosure of information contained in this complaint to appropriate administrators and witnesses interviewed for the purpose of investigating this complaint. I am willing to cooperate fully in the investigation and provide whatever evidence New Leaf deems relevant. I understand that the nature of this complaint, correspondence, and all discussions conducted in the course of investigation of the information contained in this complaint are confidential to the extent permitted by law and unauthorized disclosures of information concerning the investigation could result in disciplinary action. I agree to abide by these guidelines.

Signature: _____ **Date:** _____

Please note: If you indicate you will be assisted by an advisor, your signature below authorizes the named individual to be privy to the information contained in this complaint and to accompany you to any meetings.

Signature: _____ **Date:** _____

WORK ALONE POLICY

EFFECTIVE DATE: ___November 21, 2011___ **POLICY #:** ___HS-08___

REVISION DATE: March 31, 2021, September 8, 2021

SCOPE:

New Leaf: Living and Learning Together Inc. is committed to providing a safe work environment for all employees, volunteers, students and independent contractors. In doing so, New Leaf will take all reasonable and practical measures to eliminate or minimized risks of injury of people who are performing their duties in areas or conditions, where they are required to work alone.

Each worksite must develop their own protocols according to the hazards identified, their needs and this policy.

POLICY STATEMENT:

The goals of this protocol are to:

- Increase staff awareness of safety issues relating to working alone;
- Ensure that the risk of working alone is assessed in a systematic and ongoing way and that safe systems and methods of work are put in place to reduce the risks so far as is reasonably practicable;
- Ensure that appropriate training is available to all staff to equip them to recognized risks within their workplace and provide practical advice to maintain their personal safety at all times;
- Ensure that appropriate support is available to staff who have to work alone;
- Encourage full reporting and recording of all incidents, near misses, and injuries to staff relating to working alone.

REFERENCE:

Occupational Health and Safety Act and Regulations (R.S.O.1990), Section 25.

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Policies and Procedures

DEFINITIONS:

“**Working alone**” means that the employee is the only worker at that worksite or is working in an area removed from other persons at the work site in circumstances where assistance is not readily available to the worker in the event of an injury, illness and emergency.

RESPONSIBILITIES:

Executive Director:

- Ensure that appropriate policies and procedures for all aspects of health and safety at work are developed
- Ensure that these policies and procedures are applied fully and consistently, and that all employees are aware of the standards and behaviours required under them
- Ensure that there are arrangements for identifying, evaluating, and managing risk associated with working alone
- Ensure that there are arrangements for monitoring incidents linked to working alone and that the Joint Health and Safety Committee regularly reviews and updates with regard to the effectiveness of this policy

Managers:

- Ensure that staff are aware of the policy
- Ensure that risk assessments are carried out and reviewed regularly as required
- Ensure that each employee reviews behavioural program/protocols on a monthly basis and have signed off indicating a review took place
- Ensure all staff is adequately trained yearly in safe and effective methods of preventing violence in the workplace
- Evaluate worker performance and safety concerns and enforce safe work practices and procedures
- Ensure that incident report investigations are conducted for all violent incidents and that appropriate recommendations and corrective actions are taken to reduce the risk of reoccurrence
- Ensure that all Serious Occurrences are reported within 24 hours

Supervisors and Employees:

- Take reasonable care of themselves and others affected by their work activities
- Report any dangers or potential dangers, and concerns identified in respect of working alone
- Review annually the behavioural program or protocols for individuals receiving behavioural services
- Participate in creating and maintaining a safe work environment by following the work alone policy

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- Be aware of the behaviour support plans for all individuals they are servicing
- Request additional training as required
- Report unusual behaviours
- Establish, maintain and demonstrate competency in the application of prevention strategies
- Attend required training sessions.

Health and Safety Committee:

- Aid in the hazard assessment if required and provide recommendations to management to reduce and minimize the risk of injury
- Bring forward working alone concerns to management
- Review this policy and any health and safety procedures on an annual basis and make recommendations for revisions.

TRAINING

Appropriate training is an essential component in protecting staff from the risks of working alone. Managers must ensure that all staff has the level training that is relevant to their work site. All staff at New Leaf is required to participate in mandatory CPI training and First Aid training as well as recertification.

EMPLOYEES WHO TRAVEL AWAY FROM THEIR HOME BASE WITH SUPPORTED INDIVIDUALS

Have someone contact the employee periodically to ensure the employee's safety. Contact can be made in person, by telephone or by any other means. Some examples of this include:

- Telephone contact at regular intervals
- Visual contact

EMPLOYEES WHO TRAVEL ALONE

Some of the risks to employees travelling alone involve injuries from motor vehicle accidents. The risk is greater when employees cannot communicate in remote areas or are unable to summon help.

Well maintained vehicles prevent exposing employees to unnecessary risk.

The employer will establish a procedure (travel plan) appropriate to the hazards to track

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the whereabouts of their employees. Make sure you include rest time in the plan.

Appropriate First Aid and emergency supplies must be provided.

EMPLOYEES WHO WORK THE NIGHT SHIFT

Employers must closely examine and identify existing or potential safety hazards in the workplace.

Employers must ensure that all employees are trained and educated so they can perform their jobs safely.

Prominently display emergency phone numbers.

Use other prevention tips as required which can be used for a wide variety of situations.

For example:

- Telephone contact at regular intervals
- Visual contact

Each worksite must develop their own protocols according to their needs and this policy.

PROCEDURE:

In order to provide an added degree of safety to our staff while working alone, we are implementing the use of an external monitoring system.

The system is backed up by live, two-way communication support; 24 hour / 7 days per week response notification personnel.

The following protocol will ensure maximum effectiveness with minimal false alerts:

- 1) Staff are to, **at all times when working alone**, wear the alert bracelet as well as carry the house portable phone (as outlined in the current Work Alone Policy HS-08).
- 2) Staff are to use the on-call Manager number (905-955-9511) to contact management with important questions or concerns that are **not an immediate emergency**, but may have the potential to escalate unless addressed.
- 3) If, at any time, a staff member is in a dangerous situation and requires immediate assistance, they should activate the alert system bracelet.
Upon activation, the monitoring company will respond in the following manner:
 - a) Monitoring company will speak directly to you using the two-way voice communicator located in the office.
 - b) If monitoring company is unable to speak with you they will immediately call 911 for emergency response units, then the contact numbers on file (on call manager; Director of Services; Executive Director).

Note: Once safe, you are required to immediately notify the on-call manager (905-955-9511) as to the nature of the emergency and of the steps taken up to that point.

- Situations where employees may be working alone must be examined and identified.
- Potential workplace hazards and safety risks must be identified and communicated to affected employees. Employees must be consulted when identifying risks and discussing potential corrections.
- The Joint Health and Safety Committee or Health and Safety Representative, as applicable, shall be involved in the process of assessment, identification and elimination or reduction of any risks.
- Any identified hazards or risks shall be eliminated or reduced if practicable.
- An effective means of communication and other security measures shall be available to all employees who work alone, and appropriate training related thereto shall be provided.
- Employees must take the program cell phone when away from the location. Employees must carry the cordless phone when alone at the location. Telephones are pre-programmed with emergency contact numbers.
- All incidents, occurrences, concerns of employees will be recorded and assessed. Where possible, corrective measures will be taken to prevent recurrences.
- All security practices and working alone procedures shall be thoroughly reviewed regularly (minimum every 12 months) and adjusted accordingly.

SEVERE WEATHER POLICY

Effective Date: April 1, 2010 Policy #: HS-09

Revision Date: June 23, 2021

SCOPE:

All employees, volunteers and people supported

RATIONALE:

We recognize the importance of being informed, having a plan in place when weather conditions dictate normal operating procedure be interrupted or suspended.

General:

The Manager of Day Services, or his/her designate, will be responsible for monitoring special weather statements, watches and warnings, those which affect us most often being listed below, informing those affected of impending changes to scheduled services.

High Heat and Humidity / Heat Waves / Humidex:

When the humidex reaches or exceeds 35, during the hours in which we would normally operate, all **outdoor activity** will be suspended.

When the humidex reaches or exceeds 40, during the hours in which we would normally operate, Day Services will close for the day.

Wind Chill:

When a wind chill warning is issued, all outdoor activity will be suspended. Day Services will commence at the regular time, breaks to be taken at individual sites so as to minimize our exposure to the elements. When the wind chill is forecast to be below -35, during the hours in which we would normally operate, Day Services will close down for the day.

It is expected that those who participate in the Day Services program, come appropriately prepared for prevailing, forecasted weather conditions. This includes the application of products designed to protect the individual from the harmful effects of the sun, insect bites, etc.

Remember and know the drugs that the people supported are taking and the advisories these medications have around sun exposure. Ensure people supported are properly protected from the effects of the sun. Extreme temperatures should also be avoided as some drugs impair the body's ability to regulate temperature.

FIRE SAFETY POLICY

Effective Date: April 1, 2010 Policy #: HS-10

Revision Date: March 31, 2021

SCOPE:

All employees, volunteers, visitors and people supported

POLICY STATEMENT:

A teamwork approach to fire safety and prevention is emphasized in order to reduce the chances of harm and injury residents and property. We continue to work closely with the local fire departments in order to maintain a high level of safety.

RATIONALE:

In order to minimize risk to the people we support and to the staff who provide that support it is critical that all people working at New Leaf locations and those receiving service at New Leaf be ever vigilant regarding fire safety practices. Staff must be able to identify fire hazards and take steps to correct them, must understand fire suppression and evacuation procedures in addition to the steps that must be taken should a fire occur at one of New Leaf's locations.

GENERAL:

Every residence shall be provided with a Fire Safety manual that includes a Fire Evacuation Plan and Fire Safety Procedures specific to that building and the people who live there. The manual shall remain on site and all forms filled out shall remain in the manual. The staff assigned to that residence shall be familiar with the manual and the procedures and practices required upon the orientation provided during their first shift. Staff members will receive additional competency-based training related to fire safety (review of policies and procedures, participation in emergency response drills at minimum – located on HR downloads)

REFERENCES:

Ontario Fire Code, New Leaf Fire Safety Plans

FIRE SAFETY POLICY

GENERAL:

Fire Prevention: Procedures and Practices for Residences

Staff will complete the nightly checklist related to client and property safety and security which includes inspection of cigarette butt boxes, dryer lint traps, fireplaces, appliances, miscellaneous heating equipment and any other fire hazards and will rectify any and all concerns immediately and record remedial action required on the nightly checklist.

The Supervisor or their designate, will ensure that:

- the Fire Safety Plan at their location is available and reviewed regularly by staff in addition to a documented review at a staff meeting on an annual basis at minimum.
- The Fire Safety Plan is centrally located and posted at all access and egress doors at the location.
- All nightly checklists are completed, reviewed, corrective action taken and documented and filed at the location.
- All monthly checks of fire equipment are completed and all fire equipment deficiencies are reported to the Maintenance Manager immediately.
- All new employees are instructed on fire safety, fire evacuation procedures and how nightly checklists are to be completed.
- All program employees are provided with competency-based training related to fire safety on an annual basis

The Maintenance Supervisor and/or Maintenance Manager will ensure that:

- All fire equipment in need of repair is repaired or replaced immediately.
- All fire equipment and suppression systems are inspected on a yearly basis by an authorized service agent.

Fire Evacuation: Procedures and Practices for Residences

The Supervisor will ensure that:

- Monthly fire drills and forms are completed and filed
- All residents are familiar with fire evacuation procedures and participate in monthly fire drills.

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- Monthly fire drills occur at different times ensuring that all shifts experience and practice evacuation procedures.
- All program employees are provided with annual competency-based training (on HR downloads) related to evacuation policies and procedures as part of the Performance Appraisal Process.
- Residents who have basement bedrooms practice evacuation procedures through egress windows (where installed) at least once every two months. This is to be reflected on the fire drill report.

The Program Manager will ensure that:

- Fire drills are conducted and forms completed and filed at all program locations and at the office.
- All staff members, including Supervisors are familiar with evacuation procedures and participate in evacuation drills.

Fire Response: Procedures and Practices for Program Locations

- Staff members on shift at program locations are responsible to immediately evacuate the site in a manner consistent with the posted evacuation plan as practiced in monthly fire drills.
- Staff members on shift at program locations are responsible to facilitate safe evacuation for all clients and visitors and to account for those individuals upon evacuation ensuring the safety of all evacuees.
 - Once evacuated safely, staff members are to call 911 for emergency fire response. This is to be immediately followed by a call to the On-Call Manager at (905) 955-9511 who will ensure that the Director of Services is also contacted.
- Once evacuated all occupants are to proceed to the designated meeting place, consistent with the posted evacuation plan for the particular location. Individuals are to remain in that location until directed otherwise.
- All residential locations will have an established alternate location to attend in order to offer refuge from darkness, poor weather and other dangerous and disagreeable situations. Staff members are to contact the alternate location and make arrangements for shelter and accommodation following safe evacuation. The On-Call Manager should be notified of this relocation so they are apprised of the whereabouts of effected clients and staff.
- Management staff members will ensure proper notification of appropriate authorities as the circumstances require.

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PANDEMIC/EPIDEMIC/ OUTBREAK POLICY

Effective Date: __April 1, 2010__

Policy #: __HS-11__

Revision Date: __April 12, 2013, June 8, 2018, November 30, 2018, June 12 2020, April 21, 2021

Scope: All employees, volunteers, visitors and people supported

General:

This policy relates to any disease of public health significance. Specific reference to Corona virus, Influenza, etc. is not intended to limit the scope of this policy. Specific instructions regarding PPE procedures, IPAC procedures, etc., are to be referenced in the Contagion Outbreak Guidelines manual located in each program. These manuals will be updated as per instruction received by the local public health department, specific to a particular contagion in question.

References:

Local public health department; Provincial health department; Federal health department

NOTE: All questions posed to New Leaf regarding the status of a particular situation will be forwarded to the Executive Director for response.

Definitions

An Outbreak is a greater-than-anticipated increase of number of diseased or infected cases. It can also be a single case in a new area. If it is not quickly controlled, an outbreak can become an epidemic

An Epidemic is defined as a disease that affects a large number of people within a community, population, or region

A Pandemic is defined as an epidemic that has spread over multiple countries and continents

The following are New Leaf's Pandemic/Epidemic declaration procedures:

Once a pandemic/epidemic has been declared by health authorities the following procedures will be implemented, even if New Leaf does not have an outbreak at the time. The following procedures are in place to reduce the risk of infection/outbreak. The direct care and well-being of the people supported will be the highest priority of the residential staff. The primary care focus will be the reduction of opportunities for infection (re-infection), as well as, access to and provision of appropriate and relevant medical care.

PPE Inventory

- New Leaf will endeavor to maintain a centralized inventory comprised of 8 weeks' worth of PPE to address full agency outbreak. PPE inventory consisting of surgical masks, disposable and reusable gowns, gloves, and goggles will be kept either at the main office or in storage on the main Farm property.
- New Leaf will also maintain a reserve of hand sanitizer, face shields, and N95 masks to use if circumstantial needs warrant use.
- New Leaf will ensure that all residential programs have access to pandemic/emergency outbreak kits at their program with enough emergency PPE for each programs' staffing compliment for 2 days.
- Inventory of in-house outbreak kits will be taken monthly and supplies replenished where required.

Training

- New Leaf will endeavor to ensure staff are trained in Epidemic/Pandemic best practices annually, which will include epidemiology of diseases, proper PPE usage, including donning, doffing, and infectious control etc. The training will be delivered via current Pharmacy's certificate-based learning portal.
- New Leaf will ensure that all new hires will have access to and will complete the training within 8 weeks of start date.

Reduced Opportunities for Infection/Re-infection:

(The following responses to a declared Epidemic/Pandemic will also apply to Outbreaks)

All staff to practice universal precautions and assist residents to do the same.

Working Remotely

- New Leaf may require administrative, or non-essential staff to work remotely when possible to do so. Work from home assignments will be implemented on a case by case basis.
- If working from home is assigned, New Leaf will ensure that staff have access to tools and equipment that will make it possible to accommodate the work required.

Location

- At the onset of a declared pandemic/epidemic New Leaf may restrict employees to working at only one agency (community care) or one employer (retail, etc.). If this occurs, staff will be asked to declare which employer they will work for. If the employee chooses not to work for New Leaf they will be placed on a non-paid leave of absence, until the end of the epidemic/pandemic
- Internally, New Leaf may restrict staff movement to only one location with the goal to reduce the possibility of spread or to reduce the risk of an outbreak.

Screening/Reporting illness and staying home

- If directed by management, in consultation with the local health authority, staff may be required to monitor temperature and symptoms when arriving on shift in addition to bringing a change of clothes for work purposes. If required, staff may be required to wear masks (see Contagion Outbreak manual) and/or gloves or other protective equipment provided by New Leaf.
- If during the screening process staff is deemed a risk, staff must not enter the house and must notify the manager or designate immediately.
- As part of the screening process staff will self-monitor signs and symptoms.
- Staff will report any symptoms to their manager/supervisor before or during a shift.
- Staff will stay at home if ill, even if they only have mild symptoms.
- Staff will stay home until cleared to return to work in consultation with the local public health unit.
- All staff to practice universal precautions and assist residents to do the same.
- Access to the community or other locations may be limited in order to reduce the threat of infection/ re-infection.

Family Visits/Communications

- Family visits to New Leaf will be suspended for the duration of the epidemic/pandemic
- Home visits to family will only be permitted if the resident stays with the

family for the duration of the epidemic/pandemic, and until they are instructed that they may return to the residential setting.

- New Leaf will endeavor to assist and support residents with the use of teleconference or other virtual means of communication.
- New Leaf will share and post on the New Leaf website, communication around what measures have been taken due to the declaration of epidemic/pandemic.

Staff Communication

If an epidemic/pandemic is declared New Leaf will ensure that communication between all management and staff is accessible through the SOP portal, and is frequently updated as situations evolve.

- New Leaf will utilize various forms of communications such as SOP memos accessible to all staff, virtual meetings, teleconferences etc.
- Communications between all admin (Manager, Directors) will be conducted minimally once per day, including weekends, after hours via teleconferences, video conferencing or when appropriate in person (social distancing implemented)

Basic Personal Needs

- Provision of nutritious food. On-line grocery ordering will be carried out where possible.
- Homes to be maintained to the highest standards of cleanliness and order possible. Increased participation of residents may be required. Cleaning staff may be limited to assigned locations to reduce possible spread of infection.
- Clothing to be maintained, laundered and kept in good repair as appropriate for the season. Shopping opportunities may be limited so a stock of clothing and personal items (such as hygiene supplies) should be maintained at all times.
- Regular medication administration to continue in addition to any newly prescribed or OTC medications. New Leaf will work with current pharmacy to develop epidemic/pandemic plan which will include but not be limited to change in delivery and pick up procedures that will focus on one location drop off rather than multiple home drop offs, a reduction in medication disposal pick-ups etc.

Medical Care

- Residents will continue to receive relevant and appropriate medical care in situations that are deemed to be necessary (urgent and/or critical cases).
- Non-urgent medical appointments may need to be cancelled in an effort to reduce the possibility of exposure to infection. Such appointments may include: optometrist, dentist, podiatrist, massage and physiotherapist and perhaps psychiatric reviews.

Maintenance and Farm Program

- New Leaf's maintenance staff directly provides approximately 95% of the maintenance requirements for our agency. Therefore, if staffing levels were to be maintained as normal, most of our maintenance requirements would be met.
- If staffing were to be reduced the maintenance needs would be adjusted to the most necessary requirements with water, hydro and heat being a priority. The resident's safety, care and well-being would continue to be our highest priority. Pre-planned maintenance programs may have to be suspended until staffing levels return to normal. Protocols on entering affected residence will be developed and adhered to, including the use of PPE and enhanced disinfection procedures. (see Contagion Outbreak manual)
- New Leaf's homes all have generator back-up therefore water, heat, cooking and refrigeration would be maintained.
- It should be assumed that the Day Program would be temporarily closed down; maintenance staff would therefore maintain and feed the farm animals. Animal feeds generally have a 2-3-month supply on hand; animal feed should not be a concern. Housekeeping staff may have to be limited to certain areas to reduce the spread of possible infection.
- Housekeeping and maintenance staff may also assist in the provision of groceries and supplies to the programs as required.

Staffing

- Relations with third party employment services shall be developed and maintained.
- Outside agency staff personnel will be used to offset reduction in New Leaf Support Staff

Finance / Administration Department

Should New Leaf be affected by an epidemic/pandemic/outbreak, the direct care and well-being of the residents will be the highest priority of the administrative staff. The provision of basic personal needs, reduction of opportunities for infection and the provision of necessary medical care will be of the utmost importance.

The Finance Department will endeavor to provide the following services in the case of such a situation:

- **Residents:** The personal needs portion of ODSP funds will be transferred to the residents' personal bank account to provide the necessary personal needs (i.e.: hygiene) and dietary needs (groceries). Residents' personal needs funds will be managed by program staff, not the finance department.
- **Employees:** Payroll distribution will continue as usual. If specifics regarding staff and hours worked are not available, payroll will be based on published schedules. Any debits or credits to employees will be reconciled upon return.
- Benefits will continue to be provided as usual.
- **Vendors:** Utilities will continue to be paid via automatic bank debit. Vendors paid directly will be addressed on an individual basis.
- **General Public Inquiries:** Phone messages will be adjusted to reflect the situation and will be amended on a daily basis where possible.

Supply Chain

- A List of key suppliers and service providers is maintained by the Executive Assistant.
- Alternative methods of acquiring supplies and services will be arranged on a case by case bases with suppliers. These may include by electronic ordering, curb side pick-up, and delivery to a central location

Managing Outbreaks in Congregate Living Settings

An outbreak is defined as one or more cases of a disease in residents or staff associated with the facility

A possible outbreak is a cluster of ill residents and or visitors

In cases where New Leaf experiences an outbreak and daily routines are disrupted and/or social isolation must be imposed, staff are to make every effort to ensure that, inasmuch as is possible, a daily routine is established that is based around the needs and desires of the people in their care. A routine that provides stability and predictability is essential for the continued mental health of the people we support. Community and Day Program and Respite Program participation may be altered or suspended for some or all attendees and staff during an Epidemic/Pandemic/Outbreak.

New Leaf's First Steps When Managing an Outbreak or Possible Outbreak are as Follow

In the event of an outbreak New Leaf will begin communications with our local public health unit and MCCSS if:

- We have a confirmed case of a reportable disease (contagion such as COVID-19) at one of our residential and community supports program (which is considered an outbreak), OR
- An outbreak is possible based on ill residents, staff and/or frequent visitors.
- The local public health unit will decide whether to declare an outbreak
- Cases of reportable diseases among staff, essential visitors or among residents – whether suspected or confirmed through testing – are serious occurrences under Ministry of Children, Community and Social Services (MCCSS) policy and New Leaf is required to report both to MCCSS and our local public health unit.

New Leaf will also advise

- Workplace Joint Health and Safety Committee
- Health and Safety representatives
- Union

Outbreak Management Team

The Outbreak Management Team will be activated. The team will include the local public health unit along with the following members:

Executive Director 905-478-1418 ext.202

If the Executive Director is unable to manage the crisis, the person(s) below will assume management duties.

Director of Services	905-478-1418 ext.216
Director of Human Resources	905-478-1418 ext.213
Director of Finance	905-478-1418 ext.214

Pandemic emergency contact information

Public Health Agency Canada Toll-free Number: 1-800-484-302

Health Canada: 1-800-999-7612

York Region Public Health: 905-895-4511

Ministry of Children, Community & Social
Services:

Toronto Region –1-416-325-0500

Central East Region –1-905-868-8900

Emergency Planning Team

The following people will participate in emergency planning and crisis management:

Executive Director

Director of Services

Director of Human Resources

Director of Finance

Manager of Operations and Property Development

Manager of Clinical Supports

All current Joint Health and Safety (JHSC) Members

Critical Operations

The following is a prioritized list of our critical operations, persons in charge and action plans we need to recover from a pandemic/epidemic/outbreak emergency:

<u>Operation:</u>	<u>Person in charge:</u>
Human Resources	Director of Human Resources
Residential Services	Director of Services
Maintenance	Manager of Operations
Purchasing	Director of Finance
Finance	Director of Finance

Identify the outbreak area

- In conjunction with the local public health unit, we will determine if all or only part of the facility will be considered an outbreak area.
- Residents in the outbreak area should not mix with those in the non-outbreak area. (refer to the Contagion Outbreak manual)

New Leaf will provide information to the public health unit, which may include:

- Total numbers of people supported and staff in the facility.
- A list (line list) of ill residents, staff and visitors including when they became ill, if they were tested and results of the tests, when they were in the facility, and if they remain at the facility or were transferred to hospital.
- A list of people who had high risk close contact (e.g., roommates, dining table mates, etc.) with those with infectious disease. Note that in some outbreaks this may include the whole unit or facility.

Ensure access to key services and supports

New Leaf will ensure that people supported have access to key services and supports, such as:

- Medical care
- Routine medications (e.g., prescription medications, acetaminophen, ibuprofen)
- Mental health supports/counselling
- Harm reduction supplies
- Addiction services and supports including for alcohol or drug use (including opioid agent treatment e.g., methadone, suboxone)
- Nicotine replacement
- Non-urgent medical appointments may need to be cancelled in an effort to reduce the possibility of exposure to infection. Such appointments may include: Optometrist, dental, podiatry, massage and physiotherapy and perhaps psychiatric reviews.

People supported in outbreak area

If ill or contagion positive people are moving to another facility:

- Prior to transfer, New Leaf will endeavor to place person in a private room.
- Instructions provided by the local public health department (refer to the Contagion Outbreak manual in the home) will be followed.

New Leaf will determine where people supported will stay if cohorting is possible

- As much as possible, cohort (group) people supported in the **outbreak area**, keeping each group separate from the other (i.e., in separate areas of the facility).
- Within most of the groups, people supported should stay as far apart as possible from each other (in private rooms or as advised by public health department).
- New Leaf may consider partitions to support separation between those who cannot be in private rooms.
- The public health unit will assist with determining how to cohort and how to keep people separate within the cohorts.

Prevent mixing of residents

- Staff will strive to ensure those from the outbreak and non-outbreak areas stay separated.
- Staff will strive to ensure those from different cohorts in the outbreak area stay apart. (refer to the Contagion Outbreak manual in the home)

Private rooms

- New Leaf will continue to use private rooms to ensure the safety of people supported. Public health guidelines (see Contagion Outbreak manual) will be followed.

Monitor for worsening symptoms

- New Leaf staff will monitor and document Contagion positive people supported and those that are ill for worsening symptoms so medical care can be arranged quickly if needed.
- For assistance, call TeleHealth (1-866-797-0000), or contact the resident's health care provider or outreach health care services (if available) or call 9-1-1 in case of emergency.

Admissions and re-admissions

- New Leaf will limit new admissions. Best practice is that there are no new admissions to the outbreak area until the outbreak is over, however this may not be possible in some settings. New Leaf will decide with our local public health unit how admissions and re-admissions are to be handled.

Masking to protect others (source control)

- If tolerated and if it can be done safely, all people supported in outbreak areas should wear a mask to protect others when there is a possibility of close contact.
- Provide education on the use of non-medical masks where possible and safe to do so. Refer to the Contagion Outbreak manual in the home for more details.

Staff and Essential Visitors

An essential visitor is generally a person (including a contractor) who performs essential services to support the ongoing operation of a service agency or is a person considered necessary by a service agency to maintain the health, wellness and safety, or any applicable legal rights, of a resident.

Working during an outbreak if exposed

- New Leaf will work with the public health unit to identify potentially exposed staff based on past work assignments on outbreak areas and exposure to known cases of the infectious disease.
- In consultation with the public health unit, New Leaf will determine appropriate management of exposed staff
- New Leaf will endeavor to support staff who have tested positive, and cannot safely return home, or have a safe area to isolate. New Leaf will look at accommodations in the form of lodging and food to ensure support staff can isolate without putting the community or their families at risk.

Work assignments (cohorting) – (local public health department will advise)

- If there are outbreak areas and non-outbreak areas, New Leaf will assign staff to only one area for all of their shifts.
- Staff who have already worked in the outbreak area may be assigned to the outbreak area.

Reporting illness and staying home

New Leaf will ensure staff and essential visitors know to:

- Report any symptoms to their manager/supervisor.
- Stay at home if ill, even if they only have mild symptoms.
- Stay home until cleared to return to work in consultation with the local public health unit.

New Leaf will only allow essential visitors into the facility.

An essential visitor, for someone who has an intellectual and/or developmental disability, could be defined as someone whose lack of visiting might cause:

- A person's inability to function as a self because the visitor plays an integral role in supporting the person's autonomy.
- A person's inability to function to their cognitive and emotional capabilities
- A person to engage in or be at increased risk to engage in harmful and unhealthy behaviours in relation to themselves or others.
- An incorrect medical treatment or decision to be made because the visitor is an integral member of the person's care decision-making team
- An immediate decline in the individual and it has been determined that the individual is at risk of harm to self or others.
- A situation where New Leaf support staff have exhausted all avenues of supporting the individual in coping with the situation (e.g., isolation) with access to

family members through phone calls and other technology resources and self-harming behaviours or aggression to others is continuing and/or increasing. Consultation with all appropriate members of the multidisciplinary team have exhausted all strategies to assist the individual and a further decline has been witnessed. All usual modes of dealing with behaviours and changes in physical and mental health have not made a difference with the individual. The individual is now at risk of mental and/or physical health deterioration now and/or in the future.

In regards to the above definitions New Leaf will adhere to the following:

- New Leaf will ensure that only essential visitors are allowed into the facility. This must be determined in collaboration with Management before entering the facility.
- All visitors to the program will be subject to New Leaf screening process and will abide by the same rules as staff and medical professionals.
- Staff and essential visitors will be asked not to work at other workplaces or agencies if that was not already implemented during the declaration of Epidemic/Pandemic.

Ensure staff and visitors maintain physical distancing:

- New Leaf will consult with the local public health department to determine required distancing in each situation. Please refer to the Contagion Outbreak manual in the home for further instruction.
- No group meetings to take place.
- Staff training such as CPI, First Aid, and any large cohort training may be suspended until further notice during a declaration of an epidemic/pandemic or during infectious outbreaks.

Identify potentially exposed visitors

- New Leaf will keep records of those who entered the facility, identify potentially exposed visitors.
- New Leaf will provide the information to the public health unit for follow-up as requested

Personal Protective Equipment (PPE)

- Staff and visitors will follow the guidance provided by the local public health department. Refer to the Contagion Outbreak manual located in each home for further instructions.

Testing

Ill residents

- New Leaf will arrange to offer testing for all ill residents either on-site or transport to appropriate testing location.
- Obtain the results from the tests and refer to plans to manage ill residents as per Contagion Outbreak manual.

Ill staff members and essential visitors

- New Leaf will arrange to offer testing on-site or advise ill staff and essential visitors to be tested at an appropriate testing location.
- New Leaf will endeavor to obtain the results from staff members and essential visitors

People with no symptoms

- Based on factors such as the extent of spread in the home, the local public health unit will advise New Leaf about testing of residents, staff and essential visitors with no symptoms.

Transportation of residents

Transportation

- Residents from the outbreak area who require transportation (e.g., to an assessment center, health care provider or facility, offsite location) should use a private vehicle which can include a taxi if necessary. **Do not take public transit.** New Leaf has access to vans that have plexiglass partitions that can safely transport individuals while providing a barrier for safety. These vans can be coordinated by supervisors or management.
- Limit the number of people in the vehicle to only those who are essential. The driver and other passengers should wear a surgical/procedure mask. The window should be down, weather permitting.
- Resident should wear a surgical/procedure mask if safe to do so and sit in the back seat. Refer to the Contagion Outbreak manual in the home for more details.

Activities and Meals

Meals

- Avoid group meals if possible
- Staff will, where safe and able to supervise, provide meals in the residents' rooms (tray service) for infected positive and ill residents if at all possible.
- Staff will try and provide meals in the residents' rooms (tray service) for well, exposed residents. If not possible staff will:
- Stagger meal times to support physical distancing.

- Clean and disinfect surfaces, such as table tops and arm rests of chairs, between each meal time.
- Increase space between people standing in lines or sitting at dining table by marking floors with tape at a distance recommended by public health department.
- Remove shared items like salt and pepper shakers, ketchup, mustard, and food containers (e.g., water pitchers, coffee and cream dispensers). Provide single use items.

Kitchen

- Staff will ensure kitchen is not used by contagion positive or ill person.
- Staff may allow well people only to use the kitchen with their cohort, and stagger times so as few people are in the kitchen at a time to support physical distancing.
- Staff will ensure kitchen is cleaned and disinfected between uses by each group if possible, and at least twice daily, and when dirty.

Bathrooms

- Assignment of bathrooms will be in consultation with public health department and outlined in the Contagion Outbreak manual in each home.
- Staff will develop a schedule for use of the bathroom for hygiene activities (e.g. washing, bathing, showering, teeth brushing and shaving) so that people supported can remain as far apart as possible while in the bathroom.
- If a contagion positive or ill person must use a bathroom used by another group, staff will ensure they use it when no one else is there and they wear a surgical/procedure mask.
- Staff will ensure shared bathrooms are cleaned and disinfected between uses by each group of residents if possible, particularly after use by contagion positive or ill residents and at least twice daily and when dirty. Recommendations made by public health are to be followed (see Contagion Outbreak manual).

Discontinue activities and use of common areas

- Staff /Management will discontinue all non-essential activities and all group activities including group meetings.
- Common areas should not be used by contagion positive or ill residents.
- If possible, staff will discontinue use of common areas by all people supported. If common areas must be used, staff will stagger use for each group of well people, and clean and disinfect surfaces after use by each group of people.

- Enable access to phone and online communications. Encourage people supported to clean their hands before and after use.
- Clean and disinfect any shared equipment after use by each person (using products that are safe for electronic equipment).
- If phones are shared and cannot be appropriately disinfected between uses, cover them with a new disposable plastic bag for each use.

Infection Prevention and Control (IPAC)

New Leaf will reinforce and audit IPAC through in-house adherences for the following:

New Leaf may implement direction for hygiene and cleaning to occur more frequently than public health recommendations based on the cognitive level of the individual's understanding and capability of proper hygiene and cleaning.

Reinforce cleaning of hands

- Reinforce the importance of hand hygiene as recommended by public health
- Upon entering the facility
- Before and after touching surfaces or using common areas or equipment
- Before eating
- Before and after preparing food
- Before putting on, and after taking off a mask and/or eye protection
- Before touching the face (including before and after smoking)
- After using the bathroom
- When dirty.
- New Leaf will ensure access to liquid hand soap, paper towels or automatic hand dryer and alcohol based-hand rub (60-90% alcohol).
- Handwashing procedures, as recommended by public health department, will be placed near all handwashing areas

Reinforce respiratory etiquette

- Staff, people supported, and visitors are provided with training via posters signage and SOP memos on respiratory etiquette (i.e., cough and sneeze into a tissue or into your elbow or sleeve, followed by cleaning your hands). (see the Contagion Outbreak manual in each home)
- Ensure access to tissues and no-touch garbage cans.
- Where there are concerns that residents may drink the alcohol-based hand rub, New Leaf will consider alcohol-based foam products, wipes or locked wall-mounted units, staff carrying the alcohol-based hand sanitizer, or temporary sinks for hand washing.

Cleaning and disinfection

- Clean and disinfect frequently touched surfaces at least twice daily using usual cleaning supplies.
- Have and post a regular schedule for cleaning and disinfecting all surfaces.

- Clean and disinfect the mattress and resident's living space between residents.
- Wearing a surgical/procedure mask, eye protection, gown and gloves, thoroughly clean and disinfect the room where a contagion positive or ill person stayed after they have moved out of the room, and if they remain in the room, after their symptoms resolve and they are determined to be no longer infectious.
- Ensure the use of the appropriate products and that the product remains on surfaces for the appropriate time (refer to Contagion Outbreak manual)
- Remove shared items that are difficult to clean

Laundry and bedding

- Wear gloves and a gown when handling dirty laundry.
- Handle laundry gently without shaking.
- Use regular laundry soap and hot water (60°C-90°C) for laundering.
- Supported person should have their own clean bedding and towels, which are not shared.
- Bedding and towels should be washed on a regular schedule for those who stay in the facility.
- Change bedding every one to two weeks (minimally)
- Change bath towels after used minimally about three times

Remind residents and staff of physical distancing (as recommended by public health)

- New Leaf will use signage, posters, and SOP memos, along with adherences and verbal reminders for people supported and staff regarding the need to maintain physical distancing at all times.
- In busier environments New Leaf may mark the floors to indicate where chairs and tables should remain and residents should stand to maintain recommended physical distancing. Refer to the Contagion Outbreak manual for specific details.

Monitoring

Continue screening

- New Leaf will continue screening including on entry into the facility.

Ongoing monitoring (to be determined in consultation with public health)

- Staff will monitor and document people who reside in the facility for illness at least twice daily.
- Monitor people in outbreak and non-outbreak areas.
- Monitor ill people closely for worsening symptoms and need for health care.
- Staff will advise people supported to inform staff if they are not feeling well, and staff and visitors to inform a manager/supervisor, if they feel unwell.
- New Leaf will ensure to document and monitor staff and essential visitors for symptoms at the start and end of their shift.
- Monitoring will occur until public health deems it unnecessary. New Leaf may

continue monitoring post outbreak if they feel there is a posed risk of reinfection, or the pandemic/epidemic is still active.

- New Leaf will keep and maintain a log of ill people supported, staff and visitors including any test results, and will share these with our public health unit as arranged.

Communications

Ensure awareness of the outbreak

- New Leaf will ensure people supported and their family members, staff and visitors are aware of the outbreak and measures being implemented.
- New Leaf will ensure family members/legal guardians (e.g., Office of the Public Guardian and Trustee) are aware of illness in people supported, as appropriate.
- Signs will be posted indicating there is an outbreak in the facility.

New Leaf will post signs about key outbreak messages as directed by local public health unit.

Notify health care providers of the outbreak prior to transfer of any resident

- If transporting via emergency medical services (EMS), notify them. When and where Droplet and Contact Precautions are needed in the facility (refer to Contagion Outbreak manual)

Media

If New Leaf is contacted by the media

- The Executive Director has been identified as the spokesperson for New Leaf in all aspects of media communication.
- New Leaf will coordinate messaging with the local public health unit and will provide regular updates to public health as per their recommendations.

Advise others of the outbreak

- Advise health care providers.
- Advise nearby facilities that may share people supported at New Leaf.

- New Leaf will also advise various other entities (e.g., Board Members, relevant Ministry officials, funders, unions, staffing agencies).

Communications about ill staff members

- New Leaf will advise the Ministry of Labour, Training and Skills Development of any staff member who acquires an infectious disease in the workplace.
- New Leaf will inform and meet every 2 weeks minimally with the Joint Health and Safety Committee or Health and Safety representative at the facility of the outbreak and any ill staff members.

Resolved Cases and Declaring the Outbreak Over

Resolved cases

- New Leaf will collaboratively work with our local public health unit to determine when cases are considered resolved and programs can come out of isolation. Generally, outbreaks are declared over when no new cases are reported in those supported or staff after a set period of time. Refer to the Contagion Outbreak manual for specific information



New Leaf: Living and Learning Together Inc.

Business Continuity Plan

Emergency Preparedness

&

Disaster Response

Plan

(General)

Introduction to this Manual

This is the New Leaf “Emergency Preparedness & Disaster Response Policies and Procedures” Manual. This manual contains information pertaining to operations within New Leaf: Living and Learning Together Inc. during an emergency situation or disaster.

The purpose of this plan is to insure the safety and well-being of both our clients and our staff if an emergency situation or disaster occurs.

Emergency situations include, but are not limited to, the following:

Natural disasters such as tornadoes, earthquakes, floods

- Fire
- Pandemic outbreaks (see pandemic policy – HS-11)
- Power outages
- Bomb threats
- Medical emergencies
- Missing clients

You will be informed when a situation is identified as an emergency or disaster at New Leaf and this manual will take effect. Please ensure you read this manual and understand its contents.

Internal Decision–Making Process During a Disaster

When a disaster/emergency situation takes place, communication is vital. Management will continually monitor the situation, both externally and within the New Leaf residences and keep everyone informed as frequently as possible regarding procedures and updates. Staff on duty need to stay in contact with their residential manager or On Call manager.

Once it is determined that a disaster/emergency is directly impacting the safe operation of New Leaf, the Executive Director and/or their designate will declare an emergency situation. At that time, this manual will take effect and specific policies and procedures will need to be followed as outlined for each type of situation.

Business Continuance/Essential Services

Essential Services are defined as those services, within New Leaf, that must continue to operate at all times. In the case of a disaster or large-scale emergency, this means that specific programs/departments are deemed a “high priority” and must continue to operate with services being offered. Within New Leaf, the Essential Services have been defined as the following (in alphabetical order):

- **Accounting** (payables, receivables, budgets, government reporting, etc.)
- **Administration** – Front Office (main centre for communication, visitor screening)
- **Adult Residential Program** (care for people supported)
- **Delivery Services** (medicines, etc)
- **Environmental Services** (cleaning and housekeeping, security, maintenance, etc)
- **Human Resources** (payroll, benefits, health records, absences, etc)
- **IT** (computer, communication systems)
- **Purchasing** (food, cleaning supplies, hygiene products, personal care products)

Other departments and services within New Leaf have been given a low to medium priority. This means that we will continue to offer these services to the best of our ability. If a situation should worsen, these departments and services may need to be limited or closed as necessary to ensure the health and safety of all. They are as follows (in alphabetical order):

- **Day Program**
- **Meetings/Visitors**
- **Safebed**

Where it is necessary to relocate, all essential services will be housed in a safe location away from any disaster/emergency situation. This location will be dependent upon the extent of the disaster and the safe means to get to that alternate location. Where possible this will be 19601 Leslie St. Queensville, Ontario.

GENERAL PROCEDURES DURING A DISASTER/EMERGENCY

- 1) At the onset of any emergency situation the manager for the program (or On Call Manager) must be contacted immediately. If this is not possible due to circumstances of the emergency (i.e. Power outage) staff should begin to implement the plan in place for the program and continue with attempts to contact the manager. The manager will also be expected to be making attempts to contact the program and assist with the implementation of the plan. Staff would also inform the people supported of the situation (using discretion around amount of detail shared) and reassure them of the plan for their well-being and safety.
- 2) People supported will be able to remain within the residence for no longer than 48 hours after the onset of an emergency situation. During this time, if the emergency situation allows for people to be able to safely leave the residence, staff will assist people supported to make all necessary arrangements to find alternate accommodation. The first option will be to have clients go home with family. If the client does not have a safe alternate accommodation, the second option will be to have clients go to an alternate New Leaf residence. The third option will be one of the Day Services buildings. Fourth option will be to contact staff to see who may agree to support people within their own homes until they are able to return to their residence.
- 3) By the end of the 48 hour time frame all those within the program must be out of the house and safely within their alternative accommodations. Staff remaining will secure the house and notify their manager upon leaving the house. Once the situation allows for staff to return to the home they will connect with all people supported to assist with their return to the program.

The above procedures apply to emergency situations that would allow for both people supported and staff to be able to leave the premises safely to find alternate accommodation. If the situation does not allow those supported or staff to leave under safe conditions, such as a snow or ice storm, the following procedures would apply:

Staff on duty would contact the residential manager (or On Call Manager) to provide details of the situation. Staff on duty would be expected to stay within the home with the people supported until conditions are safe enough for replacement staff to relieve them, and/or people to leave to alternate accommodations (someone within their supportive network, or a designated manager willing to house them during the emergency). The manager would be expected to have ongoing contact with the staff remaining within the program to remain updated on the situation.

Important Contact Information

Note: Third Party contacts are generally contacted by a Manager or Director. Please contact the appropriate Manager before contacting outside help, as the issue may have a special process or may have been dealt with.

A list of services provided and suppliers is maintained and available at the Administration Office.

Emergency Service Contacts

Police, Ambulance or Fire (emergency) – 911

Police (non-emergency) – (905) 895-1221

York Region Public Health – (905) 895-4511

TeleHealth Ontario – 1-866-797-0000 [voice]
1-866-797-0007 [TTY]

Poison (information) – 1-800-268-9017

MEDICAL EMERGENCY PROCEDURES

EMERGENCY MEDICAL SERVICES (EMS)

Where emergency medical services are required, residential staff must:

- Dial 911 to notify of medical emergency
- Ensure medical needs of person supported are managed
- Communicate all pertinent medical information to attending EMS staff
- Contact on-call manager. On-call manager will ensure family / guardian is notified
- Where required, provide direct support to person supported at regional hospital
- Effectively communicate medical information with medical staff at hospital
- Complete documentation as required including incident report and/or medical incident report. Ensure documentation is forwarded to on-call manager within 24 hours.

CLIENT MISSING PROCEDURE

It is the responsibility of the staff on shift to at all times know the whereabouts of the individuals who reside at the home. These persons will be considered missing immediately upon staff becoming aware of their absence. There should be no delay in initiating the search and find protocols below.

In the case of a person supported who has unsupervised access outside of the home he/she will be considered missing when they are unaccounted for after one hour of the expected time of arrival/return at the residence or program destination point.

Search and Find:

If suspicion of disappearance is evident, the staff on duty will do the following:

- Check the individual's last known place of whereabouts
- Question persons there about the missing person's departure in regard to his/her mood, mode of transportation, verbal remarks on departure, and indications of his/her destination.
- If no success arises from this check, the staff on duty will then organize a brief search of the immediate area of known places of interest to the individual.
- Check all areas of the house ie: every room! Check the grounds. In the case of the Farm residence, check all outbuildings. Walk down the lane and look up and down the road (do not walk up the road, just look and see if you can see the person). Walk back to the house calling the person's name loudly.
- If unsuccessful the staff on duty will contact the manager on-call. Managers are able to access and review in house cameras.

- Obtain the person's emergency file, which always includes a photo, and write down the person's name, height, hair and eye colour, weight, complexion, type and colour of clothing he/she was wearing.
- Call a member of management staff.
- If, after one (1) hour of searching (less than one hour in the case of a very vulnerable individual, an individual who may pose a potential threat to harm themselves or others, or extreme weather), the person cannot be located, call the police. Tell them who you are, the steps and measures you have taken; give them the physical description you have written down. Usually the police will come to the particular residence. Show the picture in the emergency file and provide a complete physical description, including the clothing the missing person was wearing.
- If a supported individual becomes missing during an outing do not leave the area, he/she may return. If possible, send someone to search the area and bring him/her back. If not quickly located, call the police (or security personnel if at a mall or theme park) and ask for their assistance in locating the missing person. If the missing person is not located within one (1) hour of informing the police or security personnel call the on-call manager at 905-955-9511.
- The missing individual's next of kin will be notified by the manager on-call. If unsuccessful in locating the missing person the manager will contact the Executive Director, and a Serious Occurrence Report will be filed with MCCSS.

Follow Up:

The staff involved/on duty are required to complete a fully detailed incident report. The staff member on duty is responsible to ensure that all relevant information related to the search is passed on to replacement staff and the next shift.

It is at the discretion of the on-call manager as to whether staff then on duty will remain on duty until the situation is resolved.

If the missing person is located the staff on duty will contact all parties involved in the search to apprise them of the situation.

FIRE PROCEDURES

If staff see a fire, call 911 immediately.

Refer to New Leaf Fire Safety Plans located in the residence office and at each entrance.

EVACUATION PLAN

RESIDENTIAL PROGRAM

See Fire Safety Plan as per individual residence/program instructions.

DAY PROGRAM

Refer to each Day Services building Fire Safety Plan

Note: The building that will be chosen for relocation during a fire emergency will be determined by the location of the building on fire. Generally, the choice of relocation would be as far away as possible from the burning building. For example, if the Wood shop was on fire, the relocation building would be the Pool/Rec Centre.

During the critical moments staff must be sure to do an accurate head count of all residents and staff. One staff member should gather the fire plan and be prepared to provide instructions and assistance to the fire department upon their arrival.

CONTAMINATION OF WATER OR LACK OF WATER PROCEDURES

If, as a result of monthly water sampling, an adverse water notification has been issued, New Leaf management will advise the involved program of the notification. At this time management will provide instructions as to the procedures that will need to be followed. Re-sampling schedules, further advisories issued and alternative drinking water options will be implemented until the re-sample tests have been completed and the regional health unit had deemed the water safe for use again.

If the well water system goes into alarm and the water shuts off, staff are to notify the maintenance department and will be instructed to attempt to reset the system.

WATER EMERGENCY SUPPLIES

- Switch to bottled water for drinking, cooking, hygiene and general cleaning. Ensure there is enough in stock and purchase more as required.
- Extra hand sanitizer – check to ensure that all hand sanitizer dispensers are full. Extra bottles should be available.
- Pails of water for flushing toilets.

BOMB THREAT PROCEDURES

Any bomb threat will be taken seriously and immediate evacuation will occur. The following steps must be taken:

- Evacuate the building immediately and make your way to a safe alternate location. The minimum distance for evacuation is 300 ft in every direction, including the areas above and below.
- Call 911 to notify police immediately
- Notify your manager/manager On Call immediately
- No one is to tamper with anything when conducting the evacuation. Leave in a calm, organized manner and use a buddy system to ensure no one is left behind.
- Once contact has been made with 911 and the Manager in charge, you will be directed to a safe alternate location. If you are evacuating a residential program, you will make your way to the New Leaf Recreational Centre at 19601 Leslie St. Queensville, Ontario.
- The police will involve the Explosives Removal Unit (ERU) who will conduct a search of the facility.
- Re-entering the premises can only be done once a thorough search has been completed and it deemed safe by the police, ERU and Executive Director.

POWER OUTAGE PROCEDURES

Most power outages will be over almost as soon as they begin, but some can last much longer. Power outages are often caused by freezing rain, sleet storms and/or high winds which damage power lines and equipment. Cold snaps or heat waves can also overload the electric power system.

All residential homes are equipped with a stand-alone generator. If there is a power outage the following is the protocol that must be followed:

1) call Ontario Hydro power outage information line 1-800-434-1235. You will be required to provide the address of the home plus the Ontario Hydro account number (please refer to the list below)

Aspens	# 20011658 7806
Birches	# 20002792 9705
Cedars	# 20011904 4431
Drake Will	# 20006198 1452
Elms	# 20002664 6069
Farm	# 20007420 7189
Lindens	# 20011619 4247
Maples	# 20009599 7635
Oaks	# 20009608 9379
Pines	# 20001404 0921
Sycamores	# 20023516 4444
Tamaracks	# 20007705 0707
Willows	# 20009677 6665
Pool/Rec & Voc	# 20007420 7189
Main Office	# 20007419 5065

When you get through, the system will tell you the expected length of the outage. If the outage is expected to be greater than 2 hours, the on-call manager and the maintenance department are to be notified. The on-site generator will automatically start and will provide some of the power requirements. Generally, water, heat, freezers and fridges, septic pumps and some lighting are provided.

NOTE: staff **ARE NOT** permitted to start the generators – maintenance staff must be notified if the generator fails to start.

During a Power Outage

First, check whether the power outage is limited to your location. If neighbours' power is still on, check the circuit breaker panel or fuse box. If the problem is not a breaker or a fuse, check the service wires leading to the house. If they are obviously damaged or on the ground, stay at least 10 meters back and notify your manager or the On-Call manager and maintenance immediately.

Evacuation Procedures

Evacuation will only take place if directed by the Executive Director and/or their designate.

In the event of an extended or prolonged power outage, staff and people supported will be directed to an alternate location by a Director.

If the program must be evacuated, maintenance and management will take the following precautions:

- Turn off the main breaker or switch of the circuit-breaker panel or power-supply box.
- Turn off the water main where it enters the house. Protect the valve, inlet pipe, and meter or pump with blankets or insulation material.
- Drain the water from your plumbing system. Starting at the top of the house, open all taps, and flush toilets several times. Go to the basement and open the drain valve. Drain the hot water tank by attaching a hose to the tank drain valve and running it to the basement floor drain.
Note: If you drain a gas-fired water tank, the pilot light should be turned out – call the local gas supplier to re-light it.
- Unhook washing machine hoses and drain.
- Do not worry about small amounts of water trapped in horizontal pipes.
- Remove all fridge and freezer foods and relocate to the Farm/Day Services.

After the power returns:

- Do not enter a flooded basement unless you are sure the power is disconnected.
- Do not use flooded appliances, electrical outlets, switch boxes or fuse-breaker panels until they have been checked and cleaned by a qualified electrician.
- Replace the furnace flue (if removed) and turn off the fuel to the standby heating unit.
- Switch on the main electric switch (before, check to ensure appliances, electric heaters, TVs, microwaves computers, etc. were unplugged to prevent damage from a power surge).
- Give the electrical system a chance to stabilize before reconnecting tools and appliances. Turn the heating-system thermostats up first, followed in a couple of minutes by reconnection of the fridge and freezer. Wait 10 to 15 minutes before reconnecting all other tools and appliances.
- Close the drain valve in the basement.
- Turn on the water supply. Close lowest valves/taps first and allow air to escape from upper taps.
- Make sure that the hot water heater is filled before turning on the power to it.
- Have security systems and fire alarms reset.
- Restock the fridge and freezer.

FLOOD PROCEDURES

Floods are the most frequent natural hazard in Canada. They can occur at any time of the year and are most often caused by heavy rainfall, rapid melting of a thick snow pack, ice jams, or more rarely, the failure of a natural or man-made dam.

Emergency Procedures

- Contact your residential manager or On Call manager immediately and 911 if the situation is life threatening
- Gather all clients and staff and prepare for possible evacuation
- Take emergency files and all emergency contact information with you
- Take 4 days' worth of client medications
- Take client profile information to share with emergency response personnel
- If safe to do so, turn off basement furnace and outside gas valve if so equipped
- Do NOT attempt to shut off electricity if any water is present. Water and live electrical wires can be lethal
- Keep informed about what roads are safe, where to go and what to do if the local emergency team asks you to leave the program. Contact the On-Call manager immediately if this is the case.

Evacuation Procedures – Note: NEVER cross a flooded area

- Vacate the program immediately when you are advised to do so by local emergency authorities and/or the residential manager or On Call manager.
- Take the emergency files with you.
- Count all clients as you vacate the program and have a buddy system in place so no one is left behind.
- Follow the routes specified by officials. Don't take shortcuts. They could lead you to a blocked or dangerous area.
- Ensure that you have the Emergency files with you at all times.
- If you are on foot, fast water could sweep you away.
- If you are in a car, do not drive through flood waters or underpasses. The water may be deeper than it looks and your car could get stuck or swept away by fast water.
- Avoid crossing bridges if the water is high and flowing quickly.
- If you are caught in fast-rising waters and the vehicle stalls, leave it and save yourself and your clients and co-workers.

Re-entering the Program

- Do not return until directed by the residential manager or On Call manager.
- If the main power switch was not turned off prior to flooding, **do not** re-enter until maintenance staff or a qualified electrician has determined it is safe to do so.
- Use extreme caution when returning after a flood.
- Appliances that may have been flooded pose a risk of shock or fire when turned on.

- Do not use any appliances, heating, pressure, or sewage system until electrical components have been thoroughly cleaned, dried, and inspected by maintenance staff or a qualified electrician.
- The main electrical panel must be cleaned, dried, and tested by a qualified electrician to ensure that it is safe.
- Depending on where you live, your municipal or the provincial inspection authority is responsible for the permitting process required before the electric utility can reconnect power to the home.

Before Moving the People Back Into the Program

Once the flood waters have receded, you must not move people back in the program until:

- The regular water supply has been inspected and officially declared safe for use.
- Every flood-contaminated room has been thoroughly cleaned, disinfected and surface-dried.
- All contaminated dishes and utensils have been thoroughly washed and disinfected – either by using boiling water or by using a sterilizing solution of one-part chlorine bleach to four parts water. Rinse dishes and utensils thoroughly.
- Adequate toilet facilities are available
- Permission is granted by the Executive Director or designate

TORNADO PROCEDURES

Warning signs include:

- Severe thunderstorms, with frequent thunder and lightning
- An extremely dark sky, sometimes highlighted by green or yellow clouds
- A rumbling sound or a whistling sound
- A funnel cloud at the rear base of a thundercloud, often behind a curtain of heavy rain or hail.

Canada's tornado warning system

Environment Canada is responsible for warning the public when conditions exist that may produce tornadoes. It does this through radio, television, newspapers, its internet site, as well as through its weather phone lines and cell phones.

What to Do During a Tornado

If you are in a house

- Take the clients to the basement or take shelter in a small interior ground floor room such as a bathroom, closet or hallway.
- If there is no basement, have everyone take shelter under heavy tables or desks.
- In all cases, stay away from windows, outside walls and doors.

If you are in an office or apartment building

- Take shelter in an inner hallway or room, ideally in the basement or on the ground floor
- Do not use the elevator
- Stay away from windows

Avoid cars

- More than half of all deaths from tornadoes happen in mobile homes.
- Find shelter elsewhere, preferably in a building with a strong foundation.
- If no shelter is available, lie down in a ditch away from the car or mobile home. Beware of flooding from downpours and be prepared to move.

If you are driving

- If you spot a tornado in the distance go to the nearest solid shelter.
- If the tornado is close, get out of your car and take cover in a low-lying area, such as a ditch.

EARTHQUAKE PROCEDURES

What to expect during an earthquake:

Small or moderate earthquakes

- These can last only a few seconds and represent no emergency risk.
- Ceiling lights may move and some minor rattling of objects may occur
- You may feel a slight quiver under your feet if you are outside.
- If you are close to its source, you may hear a loud bang followed by shaking.

Large earthquakes

These can last up to several minutes and constitute a natural disaster if its epi-centre is near a densely populated area, or its magnitude is sufficiently large for the region. The ground or floor will move, perhaps violently.

- Whether far away or close to the source, you will probably feel shaking followed by a rolling motion, much like being at sea.
- If you are far away from the source, you might see swaying buildings or hear a roaring sound.
- You may feel dizzy and be unable to walk during the earthquake.
- If you are in a high rise or a multi-story building, you may experience more sway and less shaking than in a smaller, single-story building. Lower floors will shake rapidly, much like residential homes. On upper floors, movement will be slower but the building will move farther from side to side.
- Furnishings and unsecured objects could fall over or slide across the floor.
- Unsecured light fixtures and ceiling panels may fall.
- Windows may break.
- Fire alarms and sprinkler systems may be activated.
- Lights and power may go off

Emergency Procedures

- 1) Contact your residential manager or On Call manager immediately and 911 if you need emergency response immediately
- 2) Stay calm
- 3) Ensure everyone is safe and that you move to a safer location if possible
- 4) Wherever you are when an earthquake starts, take cover immediately
- 5) Move a few steps to a nearby safe place if need be. Stay there until the shaking stops

If you are indoors: "DROP, COVER, HOLD ON"

- Stay inside.
- **Drop** under heavy furniture such as a table, desk, bed or any solid furniture.
- **Cover** your head and torso to prevent being hit by falling objects.
- **Hold** onto the object that you are under so that you remain covered.
- If you can't get under something strong, or if you are in a hallway, flatten yourself or crouch against an interior wall.
- If you are in a shopping mall, go into the nearest store.
- Stay away from windows, and shelves with heavy objects.
- For any clients in a wheelchair, lock the wheels and protect the back of their head and neck.

If you are outdoors:

- Stay outside.
- Go to an open area away from buildings.
If you are in a crowded public place, take cover where you won't be trampled.

If you are in a vehicle

- Pull over to a safe place where you are not blocking the road. Keep roads clear for rescue and emergency vehicles.
- Avoid bridges, overpasses, underpasses, buildings or anything that could collapse.
- Stop the car and stay inside.
- Listen to your car radio for instructions from emergency officials.

- 6) Do not attempt to get out of your car if downed power lines are across it. Wait to be rescued.
- 7) Place a HELP sign in your window if you need assistance.
- 8) If you are on a bus, stay in your seat until the bus stops. Take cover in a protected place. If you can't take cover, sit in a crouched position and protect your head from falling debris.

AVOID the following in an Earthquake:

- Doorways. Doors may slam shut and cause injuries.
- Windows, bookcases, tall furniture and light fixtures. You could be hurt by shattered glass or heavy objects.
- Elevators. If you are in an elevator during an earthquake, hit the button for every floor and get out as soon as you can.
- Downed power lines – stay at least 10 metres away to avoid injury.
- Coastline. Earthquakes can trigger large ocean waves called [tsunamis](#).

After an earthquake

Stay calm. Help others if you are able.

- Ensure all clients are accounted for and safe.
- Contact the residential manager or On Call manager immediately.
- Be prepared for aftershocks.
- Watch television for information from authorities. Follow their instructions.
- Put on sturdy shoes and protective clothing to help prevent injury from debris, especially broken glass.
- Check the program for structural damage and other hazards. If you suspect it is unsafe, do not re-enter and contact your residential manager or On Call manager immediately and keep them informed of your location.
- If you are told by your manager to leave the program, take the emergency files and client medications and any other essential items with you. Do not waste food or water as supplies may be interrupted.
- Do not light matches or turn on light switches until you are sure there are no gas leaks or flammable liquids spilled. Use a flashlight to check utilities and do not shut them off unless damaged. Leaking gas will smell.
- If tap water is still available immediately after the earthquake, fill a bathtub and other containers in case the supply gets cut off. If there is no running water, remember that you may have water available in a hot water tank (make sure water is not hot before touching it) and toilet reservoir (not the bowl).
- Do not flush toilets if you suspect sewer lines are broken.
- Carefully clean up any spilled hazardous materials. Wear proper hand and eye protection.

- Organize rescue measures if people are trapped or call for emergency assistance if you cannot safely help them and contact On Call.
- Place a HELP sign in a window if you need assistance.

APPENDIX

RESOURCES

www.emergencymanagementontario.ca

www.getprepared.gc.ca

www.publicsafety.gc.ca

www2.bobruhall.org

New Leaf: Living and Learning Together
Inc. Policies and Procedures

SNOW AND ICE MAINTENANCE -POLICY

Effective Date: April 1, 2010 **Policy #:** HS-12

Revision Date: March 31, 2021

SCOPE:

All employees, volunteers and people supported (with supervision)

RATIONALE:

Winter conditions that can lead to the accumulation of snow and ice can present as safety hazards. The vigilant monitoring and treatment of snow and ice buildup will minimize personal risk to all staff, volunteers, residents and guests at New Leaf.

POLICY STATEMENT:

It is the responsibility of all staff and management at New Leaf to maintain a safe winter work environment. In order to maintain the safest possible workplace, maintenance, office, residential and Day Program staff must work collaboratively in keeping all areas of pedestrian traffic sanded and salted.

GENERAL:

All areas where pedestrian traffic occurs or will likely occur need to be maintained constantly in terms of snow removal and the application of sand and salt. These critical areas include all stairs, ramps, decks, and walkways including any parking lot areas on which staff are likely to walk either in general passage or in order to access vehicles.

Maintenance is tasked with plowing, sanding and salting all driveways and parking areas as required. It is the responsibility of staff to contact the maintenance department when plowing, sanding and salting is required for these areas. It is a requirement of program staff to maintain snow removal, sanding and salting on pedestrian walkways at each program location at all times. Further, if ice or snow accumulates in parking areas during times when maintenance is not immediately available, it is the responsibility of program staff to remove snow and sand/salt any and all parking areas related to their program location.

Sand and salt pails are provided to each location at the beginning of the winter season and staff are required to ensure that supplies are maintained as required.

REFERENCES:

Occupational Health and Safety Act

HS-12

New Leaf: Living and Learning Together Inc.
Policies and Procedures



NEW LEAF
LIVING AND LEARNING TOGETHER INC.

Policy: Pool, Hot Tub & Open Water Safety	
Policy Number: HS - 13	Version #: 2
Effective Date: April 1, 2010	Review Date: May 26, 2023 Previous: April 12, 2013; June 23, 2021 June 27, 2022
Approved by: Executive Director	Responsible: Director Human Resources

Scope:

New Leaf supports worker safety and working conditions. New Leaf supports every supported individual's right to make choices and is committed to optimize their personal safety.

This policy covers the use of swimming pools, hot tubs and access to open water (lake, river, pond, ocean or similar), including use of water vessels (boats, canoes, paddleboat, kayak and similar), by individuals receiving services from New Leaf (Program Participants) and all employees, students, volunteers and subcontractors.

All New Leaf employees, students, volunteers and subcontractors are responsible, individually and collectively, for the proper application of this policy and procedures and for the performance of their duties in a safe manner.

Definitions:

Lifeguard

As per R.R.O. 1990, *Reg. 565: PUBLIC POOLS* under the *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7

A lifeguard has current CPR / First Aid **and** current certification through one of two national programs:

- National Lifesaving Society <https://www.lifesavingsociety.com/lifeguarding/national-lifeguard.aspx>
- Canadian Red Cross <https://www.redcross.ca/training-and-certification/course-descriptions/swimming-and-water-safety-courses/lifeguarding>

Near Water

Strong currents; seasonal flooding, and trails along unsupervised shorelines are outdoor examples that require increased water safety vigilance – even though it might not be one's intent to go swimming.

"Near Water", for the purpose of this policy, is defined as being less 15 feet or 5 meters from a water source without a barrier (a railing).

Swimming Instructor

As per R.R.O. 1990, *Reg. 565: PUBLIC POOLS* under the *Health Protection and Promotion Act, R.S.O. 1990, c. H.7*

A swimming instructor has current CPR / First **and** current certification through one of two national programs:

- Red Cross Water Safety Instructor - <https://myrc.redcross.ca/en/home-course-details/sw-wsi/>
- National Lifesaving Society Swim Instructor - <https://www.lifesavingsociety.com/media/326106/98onprereq%20at%20a%20glance%20chart%20-%20july%201,%202020.pdf>

Personal Flotation Device (PFD)

A Canadian approved PFD is designed to keep you afloat in the water. PFDs are generally smaller, less bulky and more comfortable than lifejackets. They have less flotation than lifejackets, and have limited turning capacity.

PFDs must have a label that says the device has been approved by any of the organizations below:

- Transport Canada
- Canadian Coast Guard
- Fisheries and Oceans Canada
- Canadian General Standards Board (CGSB) CAN/CGSB-65.11-88

A PFD is sized according to a person's weight. All PFDs must be in good condition. PFDs must be inspected prior to use specifically looking for rips, signs of wear or torn/damaged/inoperable fasteners. It must fit securely and snugly and provide buoyancy.

Residents who own their own PFD will keep it at their residence. Each residence will have at least two PFDs available for employee use.

Inflatable PFDs : An inflatable is a type of PFD that either automatically inflates when immersed in water, or is inflated by the wearer using either an oral or manual inflation device. ***INFLATABLE PFD's are prohibited for use*** by New Leaf employees/student/volunteers/program participants under all circumstances.

Note: Adaptive / Assistive flotation devices (excluding pool noodles) for persons with physical disabilities can be used in a pool in lieu of a PFD only under supervision of the Lifeguard / Swimming Instructor and with 1 Staff to 1 Participant (1:1) support. These **cannot** be used as a PFD in open water, or on a boat / water vessel.

Lifejackets

Lifejackets provide more flotation in water than most PFDs.

A Canadian approved standard lifejacket, when worn properly, is designed to turn an unconscious person from face down to face up in the water, allowing them to breathe. They provide protection from cold water shock. The standard lifejacket is keyhole style and comes in two sizes - one for people who weigh over 40 kg (90 lbs), and one for people who weigh less than 40 kg (90 lbs).

Lifejackets come only in red, orange, and yellow allowing for increased visibility while in water.

All Lifejackets must be in good condition. Lifejackets must be inspected prior to use specifically

looking for rips, signs of wear or torn/damaged/inoperable fasteners. It must fit secure and snugly and provide buoyancy.

New Leaf will maintain an additional inventory of at least ten (10) Adult lifejackets and 2 Youth (less than 90lbs) lifejackets available for sign out at any point in time. ***In advance of an approved outing, Lifejackets must be signed out from Day Services Monday-Friday 8:00am-3:30pm through the Community Participation Supports Manager or the Aquatic Supervisor.***

Swim Test

- **For Employees – Swimmers**

Conducted by a Lifeguard or Swim Instructor, the swim test requires:

- Foot- first jump into the deep end with a safe recovery to the surface followed directly by a 50 m unassisted, uninterrupted front-crawl; breaststroke; or side stroke swim followed by,
- Tread water for 2 minutes
- The Lifeguard or Swim Instructor is responsible for ensuring strokes meet the following definition of a quality stroke: proper arm movements, breathing and coordination, and kick. It does not have to be a perfect stroke technique

- **For Employees – Non-Swimmers**

Conducted by a Lifeguard or Swim Instructor, the swim test will be conducted as above with a PFD on. If the employee is unable to pass the above with a PFD on, they must remain in water below chest deep at all times. They **cannot** go into open-water areas without a lifeguard present.

- **For Program Participants - Swimmers**

Conducted by a Lifeguard or Swim Instructor, the swim test requires:

- Seated slide, or foot first jump into the deep end with a safe recovery to the surface followed directly by a 50 m unassisted swim, followed by,
- Tread water for 2 minutes

- **For Program Participants – Non-Swimmers**

Conducted by a Lifeguard or Swim Instructor, the swim test will be conducted as above with a PFD on. If the program participant is unable to pass the above with a PFD on, they must remain in water below chest deep at all times. They CANNOT go into open-water areas without a lifeguard present.

NEW LEAF RECREATION CENTRE & DRAKE WILL RESIDENCE POOLS

AS AT MAY 26, 2023 THE RECREATION CENTRE & DRAKE WILL RESIDENCE POOLS ARE CLOSED. THIS SECTION OF THE POLICY WILL BE REVIEWED PRIOR TO RE-OPENING.

As per R.R.O. 1990, Reg. 565: PUBLIC POOLS under the *Health Protection and Promotion Act*, R.S.O. 1990, c. H.7 New Leaf's Recreation Centre and Drake Will Residence Pools are classified as a **Class B Pool** as they are, *operated in conjunction with a child care centre, a day camp or an establishment or facility for the care or treatment of persons who have special needs, for the use of those persons and their visitors* (Sec 2: Part 2: vi).

- A Pool Safety Plan and Emergency Procedures (Appendix A) is reviewed and updated

annually, in consultation with the Occupational Health & Safety Committee, and posted in a visible location.

- Annual inspections of New Leaf owned and operated pools will be conducted by the York Region Public Health Department. Corrective action is to be taken in a timely fashion by the Community Participation Supports Manager / Designate using the inspection report as a guideline. Additional inspections may be conducted by others (e.g. Ministry of Labour) and similar corrective action must be taken. In the event that work is delegated to others to complete, it is the Community Participation Supports Manager who is responsible to ensure that the work is completed and that interim measures are in place to support safety.
- The Community Participation Supports Manager and Aquatics Supervisor must complete National Lifesaving Society's Pool Operator Level 1 and Level 2 and maintain current certification.
- The pool will not be used without a Lifeguard present.
- The **Lifeguard must remain on the pool deck at all times when swimmers are present**, unless a water rescue is necessary.
- The pool, including deck area, is not to exceed 10 persons total excluding the Lifeguard.
- Posted pool rules and guidelines must be followed at all times.
- The New Leaf employee/student/volunteer to Program Participant ratio must be 1:1 or 1:2 (one staff: two participants), **excluding the Lifeguard**.
- Any New Leaf employee, student, volunteer, Program Participant, or visitor ***who has not successfully completed an annual Swim Test***, must have a ***Personal Flotation Device (PFD)*** on at all times when in the pool or on the pool deck.
- The Lifeguard / Swim Instructor can direct any person in the pool or on the pool deck to put on a PFD, regardless of a successfully completed swim test, at any time.
- The Community Participation Supports Manager is responsible for the strict enforcement of safety regulations and procedures, and for the establishment and implementation of a comprehensive pool safety training program.

To fulfill these responsibilities the Community Participation Supports Manager will:

- i. Ensure all aspects of the Pool Safety Plan and Emergency Procedures are implemented and reviewed / updated by the OHS Committee each year.
- ii. Ensure all records (training; certification; maintenance; checklists; etc.) are current and stored in a readily accessible location.
- iii. Ensure the Aquatics Supervisor maintains valid Lifeguard certification
- iv. Ensure all New Leaf employees, volunteers, students and visitors are orientated to and familiar with this policy and the Pool Safety Plan and Emergency Procedures. This is documented at hire and annually thereafter.
- v. Ensure a monthly Emergency Evacuation is completed and recorded.
- vi. Ensure that the pool is not used by anyone unless a certified Lifeguard is present.
- vii. Ensure that all New Leaf employees, volunteers, students, visitors and Program Participants have completed a Swim Test, conducted by a Lifeguard or Swim

- Instructor, prior to entering the pool.
- viii. The following records must be posted on a visible bulletin board in the pool area:
- a. Pool Safety Plan and Emergency Procedures
 - b. Current Certificate of completion in Pool Operator Level 1 & 2 for Community Participation Supports Manager & Aquatics Supervisor
 - c. Current certification of any Lifeguard and Swim Instructor providing supervision and/or instruction in the pool area
 - d. List of all New Leaf employees with current valid First Aid / CPR training
 - e. List of all New Leaf employees and residents (identified by First Name/Site) who have completed a Swim Test and date last completed (annual testing required).
 - f. Results /action for **all** relevant inspections conducted in the past twelve (12) months.

PUBLIC POOL / OPEN WATER / WATERCRAFT VEHICLE USE

The reporting Manager / Designate is responsible for the strict enforcement of safety regulations and procedures, and for the establishment and implementation of a comprehensive safety training program as it relates to water-based activities as described below.

To fulfill these responsibilities the Manager / Designate will:

- i. Ensure all New Leaf employees, volunteers, students and visitors are orientated to and familiar with this policy. This is documented at hire and annually thereafter.
- ii. Ensure all New Leaf employees have completed the "Water Safety Quiz". This is documented at hire and annually thereafter.
- iii. Ensure that all New Leaf employees, volunteers, students, visitors and Program Participants have **current** Swim Test, on file, conducted by a Lifeguard or Swim Instructor, as necessary.
- iv. Ensure all New Leaf employees have **current** valid First Aid / CPR training.
- v. Have on file, any appropriate consents for Program Participants to participate in any activity as required for activities described below.
- vi. Have any required approval from Executive Director / Designate prior to any activity.
- vii. Ensure that any special consideration or decision that is not in compliance with, or detailed in, the procedures below, IS APPROVED by the Executive Director / Designate prior.

PUBLIC POOL / OPEN WATER - LIFEGUARD PRESENT

- A New Leaf employee must have a current New Leaf Swim Test and current First Aid / CPR before they support any Program Participant in a public pool or open water source (lake, river, pond, ocean or similar) with a Lifeguard present.
- A New Leaf employee who has NOT successfully completed the New Leaf Swim Test and current First Aid / CPR must wear a **PFD or Lifejacket** at all times while in or near water.
- Any Program Participant who has NOT successfully completed the New Leaf Swim Test will strongly be encouraged to wear a Personal Flotation Device (PFD) or lifejacket at all times while in or near water.
- The New Leaf employee to Program Participant ratio must be no less than 1 Staff to 2 Participant (1:2)
- The Employee must have eyes on the Program Participant at all times and no less than 5 m (15 feet) away.
- The policies, procedures and general safety rules of the public pool / open water area must

be followed at all times.

PUBLIC POOL / OPEN WATER - LIFEGUARD NOT PRESENT

- No New Leaf employee will swim, or support an individual in a swimming pool or open water source (lake, river, pond, ocean or similar), without a Lifeguard present, unless prior approval has been issued by the Executive Director / Designate. Consideration will be given to:
 - Capacity / skill of program participants
 - Capacity / skill of New Leaf employees
 - Direction if change in employee work schedule
 - Access to emergency services
 - Presence of others
 - Water source
 - Staff to Participant Ratio [this may vary depending on the site and proximity of others]
- A New Leaf employee who has NOT successfully completed the New Leaf Swim Test and current First Aid / CPR must wear a **PFD/Lifejacket** at all times while in or near water.
- Any Program Participant who has NOT successfully completed the New Leaf Swim Test must wear a **PFD/Lifejacket** at all times while in or near water.
- A Program Participant has the **right to refuse to wear a PFD/Lifejacket**, if they have the capacity to do so. However, they will only be supported to swim at locations where a lifeguard is present.
- The Executive Director/Designate will consult with the Program Participant's substitute decision maker or legal guardian (as appropriate) prior to any decision.
- ***Fishing (from shore):***
 - Employee to Program Participant ratio must be no less than 1 Staff to 2 Participant (1:2)
 - Any New Leaf Employee or Program Participant who has not completed the New Leaf Swim Test will wear a **PFD/Lifejacket** when fishing from shoreline at all times.
 - A Program Participant has the **right to refuse to wear a PFD/Lifejacket**. If a Program Participant refuses to wear a lifejacket, or is unable to (i.e. in a wheelchair) prior approval must be given by the Executive Director / Designate.

HOT TUBS

- A Hot Tub could be public (e.g. hotel; recreation centre) or private owned (e.g. a cottage)
- A Program Participant must be able to independently enter and exit the Hot Tub. If they are unable to do so, approval is required, in advance, by the Executive Director / Designate with consideration given to level of assistance and supervision required, and the appropriate staff: participant ratio.
- A New Leaf employee must have current First Aid / CPR.
- The employee does not have to be in the hot tub at the same time as the Program Participant but they must be within 3 meters (10 feet) at all times and have eyes on the individual at all times.
- The New Leaf employee to Program Participant ratio must be no less than 1 Staff to 1 Participant (1:1)
- The policies, procedures and general safety rules of the hot tub must be followed at all times.

WATERCRAFT VEHICLES

Motor-powered watercraft (Motorboat; Motor Assisted Sailboat; Sea-doo; and similar)

- Executive Director / Designate must approve participation in advance with consideration given to:
 - Capacity / skill of program participants
 - Capacity / skill of New Leaf employees
 - Direction if change in employee work schedule
 - Access to emergency services
 - Presence of others
 - Water source
 - Staff to Participant Ratio
- New Leaf employees are NOT allowed to operate a motor-powered watercraft in the course of their work/placement.
- Program Participants must have guardian / substitute decision maker's consent, in writing, prior to participation.
- A New Leaf employee must have a current First Aid / CPR before they accompany any Program Participant on a motor-powered watercraft.
- Motor-powered watercraft must be operated by an insured and licensed person.
- Applicable law and rules associated with the legal operation of the watercraft must be followed.
- With the exception of a Ferry or Cruise, New Leaf employees and Program Participant ***must wear a Lifejacket*** while on a motor-powered watercraft at all times.
- **All other forms of PFDs are not accepted**, unless prior approval from the Executive Director/Designate
- When on a Ferry or Cruise, employees must review all safety measures and know where the lifejackets are stored. In the event of an emergency they must put on their own lifejacket first before assisting Program Participants to put on theirs.

Human-powered watercraft (e.g. sailboat; canoe; kayak; row-boat; paddle-boat)

- Executive Director / Designate must approve participation in advance with consideration given to:
 - Capacity / skill of program participants
 - Capacity / skill of New Leaf employees
 - Direction if change in employee work schedule
 - Access to emergency services
 - Presence of others
 - Water source
 - Staff to Participant Ratio
- No New Leaf employee or Program Participant will be on a human-powered watercraft **alone** unless approved by Executive Director / Designate in advance.
- Program Participants must have guardian / substitute decision maker's consent, in writing, prior to participation.
- A New Leaf employee must have a current New Leaf Swim Test and current First Aid / CPR before they accompany any Program Participant on a human-powered watercraft.
- The New Leaf employee to Program Participant ratio must be no less than 1 Staff to 1 Participant (1:1)
- Watercraft must include required safety equipment and be visually inspected prior to use.

- New Leaf employees and Program Participant **must wear a Lifejacket** while on a human-powered watercraft.
- **All other forms of PFDs are not accepted**, unless prior approval from the Executive Director/Designate

First Aid

Effective Date: April 1, 2010 **Policy #:** HS-14

Revision Date: March 31, 2021

Scope: All employees, volunteers and visitors

General:

Under the Occupational Health and Safety Act there is a Regulation for Employers to follow regarding First Aid. This is Regulation 1101 and it states that a First Aid Station shall contain:

- (a) all items required by the regulation
- (b) a notice board displaying the Form 82 poster (in case of an accident)

The Regulation further explains an employer's duty to ensure that the First Aid Kit is easily assessable, contains as a minimum the first aid items as required by this regulation, that it is at the expense of the employer, that a record is kept of all uses of the first aid kit, and that the kit is inspected at least quarterly.

Regulation 1101 then goes on to explain the exact items that must be located in the First Aid Kit. The items required depends on the number of workers you have on per shift and New Leaf follows the requirements for employers employing more than five but not more than fifteen workers per shift.

New Leaf: Living and Learning Together Inc.
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Equipment Operation Safety Policy

Effective Date: April 1, 2010 _____ **Policy #:** HS-15 _____

Revision Date: March 31, 2021 _____

SCOPE:

All New Leaf employees, volunteers and people supported.

RATIONALE:

It is recognized that machines and equipment can make task completion simpler. New Leaf also acknowledges that the operation of any machinery and equipment can pose safety hazards if a person is not trained in its use for the specific purpose for which it was intended.

POLICY STATEMENT:

Use of designated equipment and machinery is limited only to persons who have received specific training related to the safe use of that piece of equipment.

GENERAL:

Training must be provided by a competent person and staff are required to read and understand operating instructions and indicate, in writing, that they possess the requisite knowledge required for the safe operation of machines and equipment used in the day to day operations at New Leaf. A record of training which includes the staff's written confirmation will be kept in their personnel file in the Human Resources office indefinitely.

REFERENCES:

Ontario Occupational Health and Safety Act

LOCKOUT POLICY

Effective Date: April 1, 2010

Policy #: HS-16

Revision Date: March 31, 2021

SCOPE:

All New Leaf employees, volunteers, visitors and contractors while providing service at any New Leaf location.

RATIONALE:

“Lockout” means to physically neutralize all energies in a piece of equipment before beginning any maintenance or repair work. Lockouts generally involve:

- * stopping all energy flows (for example, by turning off switches, or valves on supply lines)
- * locking switches and valves
- * securing the machine, device, or power transmission line in a de-energized state (for example, by applying blocks or blanks, or bleeding hydraulic or pneumatic pressure from lines).

If a lockout is not performed, uncontrolled energies could cause:

- * electrocution (contact with live circuits)
- * cuts, bruises, crushing, amputations, death, resulting from:
 - entanglement with belts, chains, conveyors, rollers, shafts, impellers
 - entrapment by bulk materials from bins silos or hoppers
 - drowning in liquids in vats or tanks
- * burns (contact with hot parts, materials, or equipment such as furnaces)
- * fires and explosions
- * chemical exposures (gases or liquids released from pipelines)

Often power sources are inadvertently turned on, or valves opened mistakenly before the work is completed, resulting in serious injuries and fatalities. Therefore, it is important not only to ensure that all energies are properly locked out, but also that they remain locked out until the work is completed.

For lockouts to be effective, a clear, well-defined lockout policy supported by administrative and control procedures, and proper training is essential.

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POLICY STATEMENT:

New Leaf is committed to ensuring that work performed by New Leaf employees, volunteers, visitors and contractors adheres to the relevant safety laws and regulations in order to protect the health and safety of the company as a whole.

New Leaf's employees, volunteers, visitors and contractors who perform maintenance or service on energized equipment will adhere to New Leaf's procedure for lock out in order to prevent injury from unexpected energizing, start up or release of stored energy.

If an employee, volunteer, visitor or contractor must interact with a machine (other than normal operating mode) in a manner which may have the potential to cause injury to himself or others, then he or she must lock out the machine, electrical fixture, or any other system where the flow of fluids, or gases could have a potential to cause injury.

ADMINISTRATIVE REQUIREMENTS:

All administrators are responsible for ensuring that their areas of responsibility comply with New Leaf's lockout policy and procedures and all other safety laws and regulations.

All Managers and Supervisors are responsible for ensuring that designated staff in their area(s) of responsibility comply with New Leaf's lockout policy and also ensure that such designated staff have received the necessary lockout training.

New Leaf's Health and Safety Committee is responsible for health and safety in general of all staff, volunteers, visitors and contractors.

GENERAL PROCEDURES:

This procedure is to be utilized each time a designated worker may come into contact with energized equipment. Whenever such work is performed, the worker shall isolate and make inoperative (lockout) all affected equipment.

Management Responsibilities:

Management shall:

- Develop specific procedures for controlling hazardous energy for each piece of equipment that falls under this procedure.
- Identify New Leaf employees requiring training, including re-training.
- Communicate procedures to affected workers or contractors and ensure compliance.
- Provide and maintain any required material (ie: locks, tags, etc.) in order to isolate equipment from energy sources.

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- Take all reasonable precautions necessary to protect the safety of workers as required under the terms of the Occupational Health and Safety Act, Ontario Electrical Code and related regulations.

Worker Responsibilities:

The worker shall:

- Evaluate hazards of the work to be performed and confirm a zero state of energy has been achieved. Eliminate the possibility of any release of stored energy.
- Ensure the safety of themselves and others by adhering to the lockout procedures.
- Advise their Supervisor of any alterations or changes that would require the addition/change of a lockout device.
- Advise the Supervisor if lockout device(s) is not available or will not function.
- Participate in mandatory lockout training (where required).
- Employees shall not remove, interfere or disturb any locks or tags that are not their own.
- Report to the Supervisor any hazards that he/she becomes aware of.
- Work in compliance with the Occupational Health and Safety Act, Ontario Electrical Code and related regulations.

Training:

All New Leaf employees performing maintenance or servicing equipment are required to participate in lockout training. Supervisors of these employees are also required to attend. The training program will include the following:

- Hazard recognition of energy sources
- Methods of energy isolation and control
- New Leaf Lockout Policy
- Lockout and tagging procedures
- Lockout removal procedures

Lockout Procedures:

The procedures for lockout may vary slightly depending on the piece of equipment and its location, but the basic principles will remain. The procedures are to be used for any work involving electrical, pneumatic, gravitational, hydraulic or stored energy (ie: springs, pressurized fuel gases, batteries, etc).

1. Review work to be performed to identify equipment requiring lockout. This requires knowledge of the system.

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2. If the machine or equipment is operating, shut it down using normal stopping procedures. This may require the participation of the operator.
3. Isolate the equipment from its main power source.
4. Lockout and tag the device with assigned lock and tags.
5. Relieve any additional stored or residual energy from equipment to ensure zero state of energy exists.
6. Verify that all steps above have been followed.
7. Prior to work being performed, ensure isolation or de-energizing has been achieved by testing with proven testing equipment. use test alive, test dead, test alive method.
8. Each employee who is called to work on equipment/machinery requiring a lockout will be issued locks and keys for their personal use only. At no time may a key be left in a lock which is being used to lock out equipment/machinery. Lockout tags which identify the holder of the key must be used in conjunction with the lock.
9. Before proceeding employees must check themselves for correct clothing:
 - * no loose fitting clothing
 - * wear personal protective equipment the job calls for
 - * tie back long hair or put under cap/hardhat
 - * do not wear rings, watch, bracelet or long necklaces
 - * do not wear gloves around rotating equipment
10. Stop the machine/equipment by using the stop button. Trace energies to acceptable disconnect points. An acceptable disconnect effectively cuts off the energy supply to the equipment and can be secured with a lock so that no one except the person working on the equipment can reconnect the power.
11. All energy sources which could activate the machine must be locked out.
 - Trace energies to learn:
 - how it moves through the system
 - how many locks and other devices will be needed
 - which stored energies need to be neutralized
 - which residual pressures need to be released

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Primary energies:

- electrical
- hydraulic (fluid under pressure)
- pneumatic (air under pressure)
- gas/water/steam/chemicals (usually in piping systems)

Secondary (stored) energies:

- mechanical motion (rotation)
- gravity
- stored mechanical energy (springs)
- thermal (temperature extremes)
- residual electricity (in capacitors or batteries)
- residual pressure (fluids, air, gas, steam, chemicals)

Any mechanics under tension or pressure such as springs, should be released and blocked. Objects subject to gravitational forces which could permit some part or all of the machine or equipment to move or fall must be blocked. This must be performed in order to obtain a zero energy state.

12. Prior to commencing repairs or adjustments on any machine or equipment, the worker must put his/her own lockout tags on the machine lockout device(s).

13. Where multiple crew or group lockout devices are used, the following procedure must be used so that each worker has the same level of protection as afforded by a personal lockout.

* A single assigned individual will be given primary responsibility for all the workers under the protection of a particular lockout. This person will assume the overall job lockout and control responsibility. Lockout devices should be installed and removed only by direction of the person who has control over that procedure.

* Use only an approved multiple lockout device.

* Never use “daisy-chaining”.

14. The lockout devices must be tested by the person performing the lockout to ensure that the power cannot be turned back with the locks in place.

* make certain that everyone stands clear, then operate the equipment controls (push buttons, switches, etc.) to assure that the machine is inactive. HS-16

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- * Ensure that the equipment controls have been returned to the off or neutralized position immediately after the test.

15. In situations where energy neutralizing devices are locked out and there is need to test or position the equipment the following procedure should be followed:

- * Clear all personnel to safety.
- * Clear away tools and materials from equipment.
- * Remove lockout devices and re-energize systems following established safe procedure.
- * Proceed with try-out or test.
- * Neutralize all energy sources once again, purge all systems and lockout prior to continuing work.

16. When work has been completed on a machine or equipment and before releasing the equipment to production operations:

- * Remove all tools and materials from the equipment
- * See that all equipment components are operationally intact, including guards and safety devices.
- * Inspect for obstructions, incomplete work, etc.
- * Repair or replace defective safeguards or safety devices before removing lockouts
- * Remove all lockout devices
- * Make visual check before restoring energy to ensure that everyone is physically clear of the equipment.
- * Notify the supervisor and operator that work is completed.

17. If work is not completed by the end of the work day, locks and warning tags must remain in place. **AT NO TIME SHOULD MACHINERY/EQUIPMENT BE LEFT IN AN UNSAFE CONDITION WITHOUT BEING LOCKED OUT.**

18. Where a worker is not available to clear their personal locks and tags due to illness, absenteeism, etc. the Maintenance Supervisor in control of the project will use his/her discretion in removing the lock. A lock inadvertently left on a lockout device by a worker would indicate that the worker has not followed procedure before releasing equipment/machinery into use. This worker is responsible for returning to the worksite, checking that the equipment/machinery is safe, removing lock and notifying supervisor of release.

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19. All portable equipment such as electric drills, etc., found to be in an unsafe condition, must be tagged “**DANGER, DO NOT USE**”, the cord cut off of the item, and taken out of service immediately.

20. Disciplinary measures up to and including discharge may be taken against personnel who fail to comply with this policy and procedure. Failure to comply also violated the Occupational Health and Safety Act and could result in legal charges being laid against the worker or workers involved.

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NEW LEAF

LIVING AND LEARNING TOGETHER INC.

Policy: Disconnect from work	
Policy Number: HS - 17	Version #: 1
Effective Date: June 2, 2022	
Approval by: Executive Director	Responsible: Director Human Resources

Introduction:

New Leaf: Living and Learning Together Inc. (the “Agency”), provides a wide variety of essential services and support to people with developmental disabilities and their families on a 24-7 basis. The provision of these services works to promote and facilitate community inclusion, meaningful participation and full citizenship of people with developmental disabilities.

Our employees are of the utmost importance to us, and we encourage and support our employees in protecting their health and well-being. Regardless of the nature of an employee’s working arrangement (whether they work in-person, remotely, or in a hybrid arrangement), taking appropriate time to disconnect from work is vital for the wellbeing, and is essential for maintaining work-life balance

Employees are therefore encouraged to review and follow the guidance set out in this policy to ensure that they are taking time to disconnect from work when it is appropriate to do so.

Scope:

This policy applies to all employees, students, and volunteers of New Leaf, whether their primary location of work is in the workplace, at home, on the road, or a combination of any or all of the above.

As an organization of more than 25 employees, New Leaf is subject to the terms of Bill 27, Working for Workers Act, 2021. While this Bill has yet to receive Royal Assent, the Ontario government has passed the Bill.

Policy:

Disconnecting from Work Pursuant to the Employment Standards Act, 2000 (ESA), all provincially regulated employers with 25 or more employees must put in place a “Right to Disconnect Policy” by June 2, 2022.

To date, the province has not released further details as to what is required to be in this policy. The ESA defines “disconnecting from work” as “not engaging in work related communications, including emails, telephone calls, video calls or the sending or receiving of other messages, to be free from the performance of work.”

The Agency recognizes that disconnecting from work is important for all employees.

Hours of Work:

Based on the continuous nature of the Agency’s operations, regular hours of work vary from one employee and one location to the next. Further, given the unpredictable nature of the Agency’s business, work outside of established working hours for any person or location may be required from time to time.

All employees are encouraged to know and conduct their assigned work within their established work hours, subject to ensuring that they meet their responsibilities and the needs of people supported by the Agency are not neglected.

Aside from times when work may be required outside of an employee's working hours (e.g. with the employee's agreement, to deal with urgent matters that cannot wait until an employee's regular hours of work), the Agency encourages employees who are off duty to disconnect from work.

Communications:

Given that employees across the Agency's organization have differing hours of work it is not possible to ensure that all communications are only sent during employee's on-duty hours. All employees are expected to use their best judgment when determining whether to send a communication during a recipient's off hours. Similarly, all employees are expected to use their best judgment when determining whether to review or respond to a communication received during their off hours and also set reasonable expectations for response times.

Nonetheless, employees continue to be expected to review and respond to communications from their employer and to participate in employer processes such as scheduling, investigations, absence management, accommodation planning, performance management and other types of contact, communications and meetings that occur outside of regular working hours, as may be reasonably expected for the management of their employment. The Agency will communicate expected response times for various types of communications.

Questions:

Any questions or concerns relating to this policy can be directed to Human Resources department.

HANDHELD POWER BLOWER SAFE OPERATING POLICY

Effective Date: __April 1, 2010__

Policy #: __ HS-API-01 __

Revision Date: March 31, 2021

Scope: All staff, volunteers and any person who may at any time use a power blower at New Leaf.

Rationale: Power blowers can be a valuable time and labour saving device, but they can also present significant safety issues if used improperly.

Policy Statement: It is New Leaf's position that no one shall use a power blower unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

Eye Protection

Wear your eye protection whenever you operate the unit.

Hand Protection

Wear non-slip, heavy-duty work gloves to improve your grip on the blower handle. Gloves also reduce the transmission of machine vibration to your hands.

Breathing Protection

Wear a face mask to protect against dust if required.

Hearing Protection

Most manufactures recommend wearing hearing protection whenever unit is used.

Proper Clothing

- Wear snug fitting, durable clothing;
- Wear pants; Do Not wear shorts
- DO NOT WEAR TIES, SCARVES, and JEWELRY.
- Wear sturdy work shoes with nonskid soles:
- DO NOT WEAR OPEN TOED SHOES.
- DO NOT OPERATE UNIT BAREFOOTED.
- Keep long hair away from engine and blower intake. Retain hair with a cap or net.

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Read the Manuals

- All users of this equipment must review the Operators Manual and Safety Manual.

Clear the Work Area

- Spectators and fellow workers must be warned, and children and animals prevented from coming nearer than 15m (50 ft.) while the unit is in use.
- Take wind conditions into account: avoid open doors and windows.
- Do not point blower at people or animals.

Keep a Firm Grip

- Hold the front and rear handles with both hands, with thumbs and fingers encircling the handles.

Keep a Solid Stance

Maintain footing and balance at all times. Do not stand on slippery, uneven or unstable surfaces. Do not work in odd positions or on ladders. Do not over reach.



Hand Held Power Blower Use Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the power blower operator's manual and New Leaf's policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

New Leaf: Living and Learning Together Inc.
Policies and Procedures

RIDE ON MOWER POLICY

Effective Date: __ April 1, 2010 __ **Policy #:** __ HS-API-02 __

Revision Date: March 31, 2021

Scope: All staff/volunteers and any person who may at any time operate and/or maintain a ride on mower at New Leaf

Rationale: The use of ride-on lawn mowers can be a very efficient way to maintain large lawn surfaces. These machines also present significant safety issues if used or maintained improperly.

Policy Statement: It is New Leaf's policy that no staff shall operate a ride-on mower unless they have read and understand the contents of the owner/operator manual and have read, understand and have signed this policy. Further; only staff who have received approval from Management may operate this equipment

References: Riding Mower Operators Manual

HS-API-02



Ride-On Mower Use – Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the ride-on mower operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

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SNOW BLOWER USE AND SAFETY POLICY

Effective Date: __ April 1, 2010 __

Policy #: __ HS-API-03 __

Revision Date: March 31, 2021 _____

Scope: All staff, volunteers and any person who may at any time use a snow blower at New Leaf

Rationale: While a snow blower can be a valuable time and labour saving device, it also presents significant safety issues if used improperly.

Policy Statement: It is New Leaf's position that no staff shall use a snow blower unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only staff who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Snow Blower user manual; Occupational Health and Safety Act



Snow Blower Use – Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the snow blower operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

New Leaf: Living and Learning Together Inc.
Policies and Procedures

SKID STEER LOADER SAFETY POLICY

Effective Date: __ April 1, 2010 __

Policy #: __ HS-API-04 __

Revision Date: __ March 31, 2021 __

Scope: All staff, volunteers and any person who may, at any time, operate a skid steer loader at New Leaf.

Rationale: The use of a skid steer loader can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use a skid steer loader unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Skid Steer Operators Manual



Skid Steer Use – Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the skid steer operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

Kubota RTV Safety Policy

Effective Date: ___March 28, 2017___

Policy #: _HS-API-05_

Revision Date: ___March 31, 2021___

Scope: All staff, volunteers and any person who may, at any time, operate a Kubota RTV at New Leaf.

Rationale: The use of an RTV can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use an RTV unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Kubota RTV Operators Manual



Kubota RTV Use – Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the Kubota RTV operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

GRASS TRIMMER SAFE OPERATING PROCEDURE

Effective Date: __ April 1, 2010 __

Policy #: __ HS-API-06 __

Revision Date: __ March 31, 2021 __

Scope: All staff, volunteers and any person who may, at any time, operate a Grass Trimmer at New Leaf.

Rationale: The use of a grass trimmer can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use a grass trimmer unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Grass Trimmer Operators Manual



Grass Trimmer Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the grass trimmer operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual(s).

Staff signature

Date

CHAINSAW SAFE OPERATING PROCEDURE

Effective Date: April 1, 2010 _____ **Policy #:** __ HS-API-07 __

Revision Date: __ March 31, 2021 __

Scope: All maintenance staff using the Chainsaw

Note: ALL staff using the chainsaw must have completed the Chainsaw safety course.

Rationale: The use of a chainsaw can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use a chainsaw unless they have completed the Chainsaw Safety training course, read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Chainsaw Safety course; Chainsaw operators manual

Chainsaw Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the chainsaw operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual(s). I have completed the Chainsaw Safety course, as required.

Staff signature

Date

ROTOTILLER SAFE OPERATING PROCEDURE

Effective Date: __ April 1, 2010 __

Policy #: __ HS-API-08 __

Revision Date: __ March 31, 2021 __

Scope: All staff, volunteers and any person who may, at any time, operate a rototiller at New Leaf.

Rationale: The use of a rototiller can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use a rototiller unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Rototiller Operators Manual



Rototiller Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the Rototiller operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual(s).

Staff signature

Date

MANURE SPREADER SAFE OPERATING
PROCEDURE

Effective Date: __ April 1, 2010 __ **Policy #:** __ HS-API-09 __

Revision Date: __ March 31, 2021 __

Scope: All maintenance staff

Rationale: The use of a manure spreader can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly. **Use of this machine is restricted to maintenance staff only.**

Policy Statement: It is New Leaf's position that no person shall use a manure spreader unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Manure spreader Operators Manual

HS-API-09



Manure Spreader Usage Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the manure spreader operators manual and New Leaf's policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manuals.

Staff signature

Date

QUICK CUT SAW SAFE OPERATING PROCEDURE

Effective Date: __ April 1, 2010 __

Policy #: __ HS-API-10 __

Revision Date: __ March 31, 2021 __

Scope: All staff

Rationale: The use of a quick cut saw can be a valuable time and labour saving device, however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no person shall use a quick cut saw unless they have read and understand the contents of the owner/operator manual and have read, understand and signed this policy. Further; only those who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Quick cut saw Operators Manual



Quick Cut Saw Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the Quick Cut Saw operators manual and New Leaf's policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual(s).

Staff signature

Date

**Genie Hydraulic Boom
Lift Policy**

Effective Date: ___ April 23, 2013 ___ **Policy #:** ___ HS-API-11 ___

Revision Date: ___ March 31, 2021 ___

Scope: All staff/volunteers and any person who may, at any time, operate a Genie hydraulic lift at New Leaf.

Rationale: The use of a hydraulic lift can be a valuable time and labour saving device; however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no staff shall use a hydraulic lift unless they have read and understood the contents of the owner/operator manual and have read, understood and signed this policy. Further; only staff who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References: Genie TZ-50 Operator's Manual,



Hydraulic Lift Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the Genie Hydraulic Lift operators manual and New Leaf’s policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual(s).

Staff signature

Date

SNOW THROWER SAFE OPERATING PROCEDURE

Effective Date: ___ December 18, 2018 ___

Policy #: ___ HS-API-12 ___

Revision Date: ___ **March 31, 2021** ___

Scope: All staff/volunteers and any person who may, at any time, operate a snow thrower at New Leaf.

Rationale: The use of a snow thrower can be a valuable time and labour saving device; however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no staff shall use a snow thrower unless they have read and understood the contents of the owner/operator manual and have read, understood and signed this policy. Further; only staff who have received approval from Management may operate this equipment.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manual before starting and operating the unit. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Snow Joe snow thrower user manual

Snow Thrower Safety Orientation Confirmation

I, _____ have read and understand the instructions and safety precautions outlined in the snow thrower operators manual and New Leaf's policy on Equipment Operation Safety.

I have been oriented on the use of this machine and understand the safety and operational features explained through demonstration and in the operator manual.

Staff signature

Date

WOOD SHOP MACHINERY SAFE OPERATING POLICY

Effective Date: ___ March 31, 2021 ___

Policy #: ___ HS-API-13 ___

Revision Date: ___ June 23, 2021 _____

Scope: All staff/volunteers and any person who may, at any time, operate any machinery in the wood shop at New Leaf.

Rationale: The use of wood shop machinery can be a valuable time and labour saving device; however, use of this equipment presents significant safety issues if used incorrectly.

Policy Statement: It is New Leaf's position that no staff shall use the machinery in the wood shop unless they have read and understood the contents of the owner/operator manuals and have read, understand and signed this policy. Further; only staff who have received approval from Management may operate this equipment. The wood shop supervisor, acting under the delegated authority from management, may allow staff to utilize the machinery once they have read and understand the user manuals associated with the particular machine. With the exception of maintenance staff, there must be two staff in the wood shop at all times when power is activated on the machinery.

General:

It is crucial to read, understand, and follow all safety practices in the Owner/Operator Manuals before starting and operating any piece of machinery in the wood shop. Make sure you understand the functions of all controls and how to operate them, and how to **STOP** in an emergency. Failure to follow instructions could result in personal injury and/or damage to the unit.

References:

Machinery operational manuals

