**Health and Safety Policy**

# Summary

This practice recognises its obligations under the Health and Safety at Work Act 2015 to take all reasonably practicable steps to provide a safe environment for workers and visitors at Doctors on Riccarton. This includes:

* Ensuring that all workers are aware of the policies laid out in this document
* Providing a safe working environment for workers and visitors
* Providing appropriate facilities for workers to maintain their safety and health
* Ensuring that all equipment and instruments are safe to be used
* Minimising exposure of workers to hazards in the work place
* Working with contractors to ensue any introduced hazards are well managed
* Developing procedures for dealing with emergencies that might arise in the workplace
* Ensuring all officers of the business are actively involved in the workplace health and safety acting in the best interests of the PCBU

# Policy Statement

## Purpose

This policy outlines the Health and Safety protocols that will be followed by this practice. The policy should be read in conjunction with the policies on Infection Control, Incident Management, Emergency Management and guidelines supporting new worker orientation.

## Background

Providing and maintaining good workplace health and safety is regarded as an investment in good business. Workers and visitors have the right to expect that the environment at Doctors on Riccarton will be safe. Good workplace health and safety aids business achievement through better productivity and better worker engagement.

The Health and Safety at Work Act 2015, and supporting regulations provide the current basis for these health and safety policies and procedures.

## Scope

This policy applies to all people legally on the premises of Doctors on Riccarton including those not directly employed by the practice for example, mental health professionals, laboratory personnel, physiotherapist, contractors etc.

## Responsibilities

Workplace safety at this practice is the primary responsibility of the PCBU. The Officers of this medical practice are accountable to ensure all health and safety requirements are met and will be supported by the Health and Safety Co-ordinator who will manage compliance with the Health & Safety at Work Act 2015 by ensuring that the practice, its workers and other parties such as contractors comply with this policy.

Every worker has a duty to ensure their own safety and the safety of others. This means taking action to prevent harm to themselves or any other person. All workers are responsible for ensuring this policy is followed.

The designated Health & Safety Co-ordinator for Doctors on Riccarton is The Practice Manager and the Nurse Co-ordinator.

## Definitions & Abbreviations

|  |  |
| --- | --- |
| Accident | an event that causes any person to be harmed, or in different circumstances, might have caused any person to be harmed |
| Contractor  | means a person engaged (other than as an employee) by the general practice to do any work for gain or reward. |
| Hazard | an activity, arrangement, occurrence, process, behaviour, situation or substance that is an actual or potential source of harm. |
| HSWA | Health and Safety at Work Act 2015 |
| Notifiable Event  | is any of the following that arise from work:* a death
* a notifiable illness or injury or
* a notifiable incident.

(See the appendix or WorkSafe NZ website for a full description)  |
| Officer | anyone in a senior leadership position or with significant influence on the management of a PCBU is an officer. There can be more than one officer. |
| PCBU | a PCBU is a ‘person conducting a business or undertaking’. The PCBU may a specific person, or the organisation. It may be a sole trader. In most cases, the PCBU is an organisation (in our context, the practice).  |
| Workplace | means a place (whether or not within or forming part of a building, structure, or vehicle) where any person is to work or is working for gain or reward. This will generally be the general practice but may include the home of a patient when home visits take place. |
| Worksafe NZ | the group formally known as OSH at the Department of Labour |

*For an expanded list of definitions refer to Appendix 1.*

## Related Policies

* Infection Control Policy
* Incident and Adverse Event Management Policy
* Emergency Management Policy
* Radiation Safety Plan
* Guidelines for new staff orientation

# Policy Detail AND Procedures

Doctors on Riccarton is committed to providing and maintaining a safe and healthy workplace for all workers, and to supporting workers to achieve this.

Doctors on Riccarton will take responsibility for health and safety procedures. At the same time, workers need to be aware of their responsibilities and comply with the business’ health and safety policy.

Each worker is encouraged to play a vital and responsible role in maintaining a safe and healthy workplace through:

* Being involved in the workplace health and safety system.
* Complying with correct operational procedures.
* Wearing protective clothing and equipment as and when required.
* Reporting any pain or discomfort as soon as possible.
* Ensuring all accidents, incidents, illnesses, near misses and hazards are reported.
* Helping new workers and visitors understand the safety procedures and why they exist.
* Telling your manager/reporting immediately of any health and safety concerns.
* Keeping the work place tidy to minimise the risk of any trips and falls.

## Identification of Hazards and Risks

The process of identifying hazards will be done in a systematic fashion. A survey of the premises and medical centre activity will be carried out annually using the Audit Checklist - see Appendix 2.

All hazards that are identified will be assessed for risk (see Appendix 3) and will be recorded in the Hazard Risk Register maintained by the Health & Safety Co-ordinator. This will be kept up to date, with any new hazards to be added to the list as they are identified.

Each hazard will be risk assessed against the attached template and given a risk rating

Once identified each hazard is to be assessed to determine the level of significant of the Hazard – that is, whether the hazard is likely to lead to an accident or notifiable event. If it is assessed as being a significant hazard then one of the following two options will be used to manage it.

• **Elimination** of hazard (best option)

• **Minimising** the risk posed by hazard (e.g. wearing protective equipment when taking nasopharyngeal swab)

If the nature of the hazard is minor and easily rectified then this will be annotated on the schedule and appropriate action taken.

The Risk Register will be reviewed yearly to determine if the hazards still exists and whether the level of significance has changed.

## Hazardous Materials and Substances

A list of hazardous materials, chemicals and substances used in this medical centre will be maintained. Workers who use these materials/substances will be made aware of the risks, and will know how to handle them safely and what treatment may be required in the event of exposure. (Appendix 4 contains a list of substances commonly found in a medical centre).

Warning signs will be displayed at the storage site of hazardous chemicals.

The phone number for the National Poisons Centre in Dunedin is (03) 477 0509, to be used if there are any concerns about inappropriate exposure to hazardous materials.

## Accidents and near misses

All accidents and near misses are to be recorded in Incident Register which is maintained by the H & S co-ordinator. All accidents and near misses will be investigated by the practice’s H & S co-ordinator and reviewed by the officers within 10 working days of the accident or near miss.

## Notifiable events

When a notifiable event occurs as a result of a workplace accident the H & S Co-ordinator will immediately report the notifiable event to Worksafe New Zealand on 0800 030 040 (available 24/7). Notifiable events are defined in the appendix to this policy.

Notifiable events will also be recorded in the practice’s Incident register and because of the seriousness of the event will be reported to the practice’s PHO (Pegasus Health).

## First Aid Supplies

A basic first aid kit is kept on site in case an accident occurs when no clinical workers are available to assist. See appendix 5. All workers are made aware of the location of the first aid kit.

## Signs

Signs are provided when necessary to remind people of hazards, safety requirements and escape routes. They will be clear and visible at all times.

## Contractors

Contractors will be made aware of any hazards that exist on the premises by the H & S Co-ordinator or, when not available, their delegate. All contractors will be assessed and inducted into the business and will be required to complete a Contractors Agreement (see Appendix 6).

## Employee Training

All new workers are required to read this Health and Safety policy together with appendices and to then sign an acknowledgement to confirm this – See Appendix 7. The orientation process will include instruction on emergency exits, fire alarms and assembly points, fire extinguishers (their positions and how to use them), safety equipment, first aid kit, and the use and location of protective clothing and equipment. Familiarity with the Hazard Risk Register and procedural requirements for recording accidents and incidents will also form part of the new worker training.

All training shall be documented including on the job training.

## Stress

The Health and Safety at Work Act 2015 (HSWA) covers the condition of stress as an impact on health and safety in the work place. There are numerous factors that can lead to this problem, many of which may stem from conditions outside the working environment.

When a worker considers that are suffering from stress they have a responsibility to immediately report their concern to their manager.

It is Doctors on Riccarton’s responsibility to take appropriate steps to mitigate the risk which may include insisting that the worker take leave or undertake other appropriate measures.

## Smoke-Free Workplace

Doctors on Riccarton acknowledges its obligations under the Smoke-free Environments Act 1990. We will take all reasonably practicable steps to ensure that smoking does not take place within the practice environment. The Smoke-free Environments Act 1990 sets out the process for making a complaint if there is a breach of this policy.

## Workplace Harassment and Bullying

Doctors on Riccarton will not tolerate harassment or bullying. All complaints of harassment or bullying will be taken seriously, investigated and dealt with according to Worksafe guidelines. Harassment can be any form of attention which is not invited or enjoyed, and which persists to the point of making the person subject to it annoyed, uncomfortable or upset. It can be sexual or racial in nature.

WorkSafe NZ guidelines define workplace bullying as "repeated and unreasonable behaviour directed towards a worker or a group of workers that creates a risk to health and safety." To be classified as bullying, behaviour must meet all three criteria: it must be unreasonable, repeated, and a risk to health and safety. One-off incidents, low level workplace conflict, and reasonable management actions are not considered bullying.

## Cell Phone Use when Driving

All workers, who are driving whilst acting for the medical centre, will use a hands-free kit for placing or receiving phone calls on a mobile phone. If none is available then calls will not be answered. Reading or replying to text messages is also forbidden while driving.

# References

* Health and Safety at Work Act 2015 (HSWA)
* Health and Safety Regulations 2016
* Ministry or Business, Innovation and Employment
* Worksafe New Zealand

# Appendices

**APPENDIX 1 – Definition of Terms**

1. Worksafe New Zealand states that a step is practicable if it is possible or capable of being done. Whether a step is reasonable takes into account
* The nature and severity of injury or harm that might occur;
* The degree of risk or probability that injury or harm will occur
* How much is known about the hazard and ways of eliminating, isolating or minimising the hazard; and
* The availability of costs and safeguards

The degree of risk and severity of potential injury or harm must be balanced against the cost and feasibility of the safeguard. The cost of providing a safeguard has to be measured against the consequences of failing to do so. It is not simply a question of whether a medical centre can afford to provide these safeguards: where there is a risk of serious or frequent injury or harm, then the greater cost to provide these safeguards might be reasonable.

1. The practice’s Health & Safety Co-ordinator can be a doctor, nurse, manager, administrator or receptionist. There is an overlap with Infection Control policies so a nurse may be better suited to this task.
2. Worksafe New Zealand defines that a **‘notifiable event’** is any of the following events that arise from work:
* a death
* a notifiable illness or injury or
* a notifiable incident.

Only serious events are intended to be notified. These trigger requirements to preserve the site, notify the regulator and keep records.

The notifiable incident, illness, injury or death must arise out of the conduct of the business or undertaking. It could be due to the condition of the work site, the way the work activity is organised, or the way equipment or substances are used.

Notifiable events may occur inside or outside the actual work site.

Deaths, injuries or illness that are unrelated to work are not notifiable events eg:

* a diabetic worker slipping into a coma at work
* a worker being injured driving to work in his or her private car when the driving is not done as part of their work
* injuries to patients or rest home residents that are triggered by a medical reason (eg injuries from a fall caused by a stroke)
* a worker fainting from a non-work related cause.

A **notifiable injury or illness**, in relation to a person, means—

(a) any of the following injuries or illnesses that require the person to have immediate treatment (other than first aid):

(i) the amputation of any part of his or her body;

(ii) a serious head injury;

(iii) a serious eye injury;

(iv) a serious burn;

(v) the separation of his or her skin from an underlying tissue (such as degloving or scalping);

(vi) a spinal injury;

(vii) the loss of a bodily function;

(viii) serious lacerations;

(b) an injury or illness that requires, or would usually require, the person to be admitted to a hospital for immediate treatment:

(c) an injury or illness that requires, or would usually require, the person to have medical treatment within 48 hours of exposure to a substance;

(d) any serious infection (including occupational zoonoses) to which the carrying out of work is a significant contributing factor, including any infection that is attributable to carrying out work:

(i) with micro-organisms; or

(ii) that involves providing treatment or care to a person; or

(iii) that involves contact with human blood or bodily substances; or

(iv) that involves handling or contact with animals, animal hides, animal skins, animal wool or hair, animal carcasses, or animal waste products; or

(v) that involves handling or contact with fish or marine mammals:

(e) any other injury or illness declared by regulations to be a notifiable injury or illness for the purposes of this section.

A **notifiable incident** is where someone’s health or safety is seriously endangered or threatened. This is generally an unplanned or uncontrolled incident in relation to a workplace that exposes the health and safety of workers or others to a serious risk arising from immediate or imminent exposure to:

* a substance escaping, spilling, or leaking
* an implosion, explosion or fire
* gas or steam escaping
* a pressurised substance escaping
* electric shock (from anything that could cause a lethal shock, for example it would not include shocks due to static electricity, from extra low voltage equipment or from defibrillators used for medical reasons)
* the fall or release from height of any plant, substance, or thing
* damage to or collapse, overturning, failing or malfunctioning of any plant that is required to be authorised for use under regulations
* the collapse or partial collapse of a structure
* the collapse or failure of an excavation or any shoring supporting an excavation
* the inrush of water, mud, or gas in workings in an underground excavation or tunnel
* the interruption of the main system of ventilation in an underground excavation or tunnel
* a collision between two vessels, a vessel capsize, or the inrush of water into a vessel
* any other incident declared in regulation to be a notifiable incident, for example those listed in:
* regulation 6 of the Health and Safety At Work (Asbestos) Regulations 2016
* Schedule 5 of the Health and Safety At Work (Mining Operations and Quarrying Operations) Regulations 2016
* regulation 33 of the Health and Safety At Work (Major Hazard Facilities) Regulations 2016
* regulation 70 of the Health and Safety at Work (Petroleum Exploration and Extraction) Regulations 2016.

A **notifiable incident** also covers the incidents specified above which may have only resulted in minor (non-notifiable) injuries but had the potential to cause serious injury, illness or death.

Definitions of **notifiable illness or injury** and **notifiable incident** will follow Worksafe NZ standards - <http://www.business.govt.nz/worksafe/information-guidance/all-guidance-items/hswa-fact-sheets/what-events-need-to-be-notified>

1. Common types of hazards

These notes can be used to help identify and assess hazards that might occur in a workplace (source = Worksafe New Zealand).

***Chemical hazards***

Chemicals can affect the skin by contact or the body either through the digestive system or through the lungs if air is contaminated with chemicals, vapour, mist or dust. There can be an acute (immediate) effect, or a chronic (medium to long-term) effect from the accumulation of chemicals or substances in or on the body.

***Noise hazards***

Excessive noise can disrupt concentration, interfere with communication, and result in loss of hearing. High impact noises are particularly damaging. Noise can also mask out signals, affecting communication or danger warnings.

***Radiation hazards***

Equipment such as the X-ray machine, radioactive gauging devices or the radioactive trace element used in analytical chemistry produce Ionising radiation. Non-ionising radiation covers infrared radiation (heat-producing processes), lasers, ultraviolet radiation (welding, sunlight), and microwaves (high-frequency welders, freeze drying).

***Electrical hazards***

These include the risk of injury from all forms of electrical energy.

***Lighting hazards***

Inadequate lighting levels are a potential safety hazard. A common problem area is the reaction time needed for the eyes to adjust from a brightly lit to a darker environment — such as a forklift driver coming indoors from bright sunlight. Temporary lighting is often inadequate.

***Vibration hazards***

This includes whole-body vibration — for example, truck drivers, people standing on vibrating platforms, and operators of mobile equipment — and also more localised vibration effects from such equipment as hand tools, chainsaws, and pneumatic hammers.

***Temperature hazards***

Extremes of cold or heat can cause problems such as tiredness, vulnerability to infections or reduced capacity to work.

***Biological hazards***

These include insects, bacteria, fungi, plants, worms, animals and viruses. For example, poultry workers exposed to bird feathers and droppings to which they are allergic can contract a medical condition. Brucellosis is a well known problem in New Zealand associated with people handling meat and meat products infected with brucella. Hepatitis and the AIDS virus are other biological hazards.

***Ergonomic hazards***

Ergonomics (the ‘fit’ between people and their work) covers risk of injury from manual handling procedures, incorrectly designed desks or workstations, audio and visual alarms, and colour coding control mechanisms.

***Physical hazards***

These include a wide range of injury risks— as diverse as being caught in or by machinery, buried in trenches or hurt by collapsing machinery. This category also includes the hazards from working in confined spaces, being hit by flying objects, caught in explosions, falling from heights and tripping on obstacles.

***Other hazards***

Include stress, fatigue, the effects of shift work, and even assaults from other people.

**Appendix 2 Occupational Health and Safety Audit Checklist**

Carried out by: Marina Chin Last review on: 25-01-25

**Premises and Housekeeping**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Item**  | **Comment (things to pay special attention to)** | **✓ if met, 🗶 if action required** (add comment) |
| 1.1 | Building and floors – clean and in good state of repair | No loose carpets, joins, trip hazards, steps, hand rails, slippery surfaces, sharp edges, overhead obstacles. | ✔ |
| 1.2 | Good lighting; either natural or artificial | Particularly in key work areas for safe working. | ✔ |
| 1.3 | Adequate ventilation; natural or artificial |  | ✔ |
| 1.4  | Occupational hygiene facilities | Sinks, hot and cold water in clinical rooms and areas, alcohol hand rub, staff rooms, toilet facilities for patients and staff. | ✔ |
| 1.5 | Housekeeping and layout | Adequate aisles, escape routes, workspace. Ability to supply privacy needs of patient. | ✔ |
| 1.6 | Good stacking and storage facilities | Shelving is safe and containers secure. Sterile/clean material stored appropriately. Medication and restricted medicines in adequate storage. | ✔ |
| 1.7 | Area outside of premises is clean, tidy and free of hazards | Check surfaces, paths, gates for tripping hazards. | ✔ |
| 1.8 | Rubbish removal adequate | Volume of rubbish should not be excessive. | ✔ |
| 1.9 | Removal and disposal of medically related items | Sharps containers (check not overfilled), biological waste, rubbish bins secure. | ✔ |
| **Mechanical, Electrical and Personal Safeguarding** |
| 2.1 | Handling and storage of compressed gases and liquid nitrogen | Large cylinders should be chained, have trolley available for moving, safe pouring decanting procedures for liquid nitrogen. | ✔ |
| 2.2 | Pressure vessels/autoclave test records |  | ✔ |
| 2.3  | Portable electric equipment register in use and equipment tagged | Electrical certification up to date. | Electrical Testing By Meditest |
| 2.4 | Ergonomic factors | Computer stations for doctors, nurses and receptionists. Check for excessive lifting, stretching, reaching or repetitive tasks. | ✔ |
| 2.5 | Head, eye, hand, face protection | Protective goggles. Masks, aprons, gloves. | ✔ |
| 2.6 | Notices, pictograms and signs | Fire exit, no entry, fire extinguishers, toilet signs, notice to alert of hazards where present. | ✔ |
| **Fire Protection and Prevention** |
| 3.1 | Correct number and types of apparatus | In accordance with fire regulations | ✔ |
| 3.2 | Fire extinguishers clearly marked, valid date and accessible | Check inspection tag. Automatic Annual Review in October | Aug 2023 **✓** |
| 3.3  | Functioning alarm system | When was it last tested?  | 09-01-24 **✓** |
| 3.4 | Emergency planning in place and drill carried out | Fire drill records | Last Fire Drill 20-12-23 **✓** |
| 3.5 | Fire co-ordinator/warden appointed and aware of role | Last reviewed – 09-01-2024 | **✓** |
| 3.6 | Ensure no obstruction of emergency exits | Last reviewed – 09-01-2024 | **✓** |
| **Accident Recording and Investigation** |
| 4.1 | Incident and event register in use | Inspect to verify. | ✔ |
| **Contractors** |
| 5.1 | All contractors have signed the practice’s Contractor H & S Agreement prior to undertaking work | Standard agreement should be in place for all contractors | ✔ |
| 5.2 | All contractors have been advised of the any hazards that exist in the Practice |  | ✔ |
| 5.3 | Contractors have provided the practice with details of any hazards the contractor is introducing to the worksite as a result of the activity that the contractor is carrying out (and this is updated whenever any new hazards are introduced). |  | ✔ |

**Appendix 3 - Hazard Register**

**HAZARDOUS SUBSTANCES INVENTORY**

D.O.R INVENTORY PIN= F84CFO. Enter this into the Hazardous Substances Calculator to add or edit substances we have at D.O.R.

<https://www.hazardoussubstances.govt.nz/workbook>

DATE: 30/11/2023. Hard copy filed in office 503 (Lynnes) in red Health and safety folder

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of product and UN number** **(4 digit no.)** | **Approval number (HSR) Section 15) and group standard name (if applicable)** | **Hazzard classification (UN class and packing group)** | **Current SDS available (may not be if over 5 years old)** | **Specific storage and segregation requirements****Section 7 and or 10 of SDS** | **Container size** | **Open or closed container** | **Gas, liquid or solid** | **Location (eg Flammable goods cabinet, storage room)** | **Maximum likely amount** | **Safety for staff** |
| 1. Aesculap

UN1950  |  | Flammable5F | Out of date 22/05/18 | Keep away from heat | 300ml | Closed | Aerosol | Cupboard under sink in steriliser room | 600ml | Wear gloves |
| 1. No ants barrier spray

UN3082 | HSR101157 | 6.5A, 6.5B, 9.1A, 9.4B B Harmful to human organs if ingested or prolonged or repeated exposure | Out of date 19/06/18 |  |  | Closed | Liquid |  |  | Wear gloves and mask. Wash hands after using |
| 1. Cutan foam hand cleaner

(ethanol) | 528/2012 | Flammable720 | Replace 09/26 | Keep away from heat | 400ml | Closed | Foam | In all rooms and front desk | Many bottles. 2 in each consult room | Eye irritation. Do not touch eyes when used. Empty containers must go into hazardous waste |
| 1. Soluprep/ Riotane. Chlorhexadine 0.5%and alcohol 70%
 |  |  | Out of date 25/10/19 |  | 500ml | closed | liquid | In cupboard above laundry sink | several | Don’t use on child under 2 mths |
| 1. Sodium hypochlorite

1791Bleach/chlorine/ janola | HSR004692 | 8.2C, 8.3A, 9.1BCorrosive | Review 02/25 | Store away fromHydrogen peroxide, 20 - 60% aqueous solution,Nitrous oxide,Oxygen Cylinder,Silver nitrite | 1000ml | closed | liquid | Cupboard under sink in steriliser room.In cupboard above laundry sink | 1000ml | Wear gloves, mask and goggles |
| 1. Oxygen

Gas code 180 | HSR001029 | Oxidising agent.Gas under pressure5.1.2A | Review Aug 26 | Incompatible with:Mortein Powergard All in One Insect KillerAcetic acid >80% aqueous solutionAcetoneBleach - Sodium hypochlorite, >5 - 25% in a non hazardous diluentCitric acidCutan-1-PropanolHydrogen peroxide, 20 - 60% aqueous solutionIsopropanolMethanolt-Butanol, >20 - 54% in a non hazardous diluent | Size A | Closed | Gas | In emergency cupboard, triage room and East wing behind KC’s desk | 4 on site | Sit in o2 cradle or lye on the ground. Do not stand vertically. May explode if heated |
| 1. Formalin Pottles 10%. With under 4% formaldehyde and under 1% methyl alcohol
 | HSR001583 | Serious toxicity,Health hazard,Corrosive4.0 | Replace Dec 24 | Heat sensitive | 10 ml | Closed | liquid | In cupboard under bench in surgery room | 1 litre | Wear gloves and mask.Wash off with water immediately if contact with skin.If ingested call poisons centre immediately |
| Microshield hand gel with EthanolUN 1170 | HSR? | Flammable. Health hazard or hazard to ozone layer3 | Replace 9/25 | Incompatible with:Mortein Powergard All in One Insect KillerOxygen CylinderSilver nitriteHydrogen peroxide, 20 - 60% aqueous solution | 500ml | Closed | Gel | In various hand hygiene stations | 500ml to 1 litre | Don’t touch eyes after use. Wash immediately with fresh water |
| 1. Silver nitrate stix

1910 | HSR006137 | Flammable, Corrosive and Hazard to environment5.1.1B, 6.4A | Out of date 06/2022 | Incompatible with:Mortein Powergard All in One Insect KillerAcetic acid >80% aqueous solutionAcetoneBleach - Sodium hypochlorite, >5 - 25% in a non hazardous diluentCitric acidIsopropanolMethanolMicroshield hand gel with EthanolHydrogen peroxide, 20 - 60% aqueous solutionCutan-1-Propanol | Sticks with tiny bit on head | Closed | Solid | Drawer in steriliser room | 2 bottles | Keep container closed when not in use away from light.Keep dry |
| 10)Springflow Descaler & Cleaner for Distiller | HSR002526 | Corrosive6.1D, 8.2C, 8.3A, 9.1C, 9.3C | Out of date 6/22 | Incompatible with:Oxygen CylinderSilver nitriteHydrogen peroxide, 20 - 60% aqueous solution | 300ml | Closed | solid | Cupboard under sink in Steriliser room | 1 bottle | Harmful if swallowed, skin burns and eye damage. Wear gloves, mask and eye protection |
| 11)Clean shineDOR Cleaners substance. | HSR002530 | 6.1D 6.3A, 6.9A 9.3C | 14/03/19.  | nil | 5 litres | Closed | Liquid | In cleaner’s cupboard under sink in laundry | * + 1. itre
 | Harmful if swallowed, skin burns and eye damage. |
| 12)All KleenDOR Cleaners substance. | HSR002530 | 6.1E 6.3A, 6.4A, 9.1D | 21/10/21 | nil | 5 litres | Closed | Liquid | In cleaner’s cupboard under sink in laundry | 1. litre
 | Harmful if swallowed, skin burns and eye damage. |
| 13)Challenge Fresh and CleanDOR Cleaners substance. | HSR002530 | 6.1E, 6.3A, 6.4A, 6.5A, 6.5B, 6.9B, 9.1C | 31/08/21 | nil | 5 litres | Closed | Liquid | In cleaner’s cupboard under sink in laundry | 1. litre
 | Harmful if swallowed, skin burns and eye damage. |
| 14)Splash AlpineDOR Cleaners substance. Unable to find numbers on SDS so can’t add to hazard calculator |  |  | Sept 2016 out of date | nil | 5 litres | Closed | Liquid | In cleaner’s cupboard under sink in laundry | 1. litre
 | Harmful if swallowed, skin burns and eye damage. |
| 15)CRC 808 silicone  | HSR002515 | Flammable,Could be toxic to environment.Moderate Hazard2.1.2A,6.3A, 6/9B, 9.1B | 05/07/23 | Incompatible with:Acetic acid >80% aqueous solutionAceneCutan-1-PropanolHydrogen peroxide, 20 - 60% aqueous solutionIsopropanolMethanolOxygen CylinderSilver nitriteMicroshield hand gel with Ethanol | 500ml | closed | Aerosol | IN cupboard above laundry sink | 1000ml | Keep away from heat |
| 16)Betadine | nil | 3077 | Revision date 11/22 Out of Date | Nil | 500ml | Closed | Liquid | In different clinical rooms. Mostly surgery room | Several bottles in practice | Don’t use in eye’s |
| 17)Isopropyl alcohol | HSR001180 | Flammable3.1B, 6.1E, 6.3B, 6.4A | TO BE REVISED 11/06/24 | Incompatible with:Mortein Powergard All in One Insect Killercrc silicone 808 aerosolHydrogen peroxide, 20 - 60% aqueous solutionOxygen CylinderSilver nitrite | 250 to 500ml | Closed | Liquid or in gel | In clinical rooms | Many around practice | Keep away from heat |

* HSNO IS Hazardous Substances and New Organisms Act 1996. HSNO classifications (eg 3.1A - flammable liquids, 6.1E acute toxicity)
* Need either its HSNO classifications (eg 3.1A - flammable liquids, 6.1E acute toxicity) - or hazard statements from the Globally Harmonised System (GHS) (eg extremely flammable liquid and vapour, causes mild skin irritation), which are likely to be more meaningful to workers – precautions for using the substance:
* UN number is found on Safety Data Sheet (SDS)
* PCBU Person or business (us)
* GHS= Classification codes include information about the safe way to store, use and dispose of chemicals. We use the Globally Harmonised System (GHS 7) hazard classification system in New Zealand.
* **The hazard class**. This refers to the nature of the hazard the substance poses.
* **The hazard category**. This refers to the severity of the hazard within a hazard class. The lower the category number, the more severe the hazard.
* **Approval number You can usually find approval numbers on the safety data sheet (SDS) in Section 15:**
* Any substance on the Inventory needs to be listed on our Hazard risk register as well
* Household cleaners/ everyday consumer products: Do not need to be entered into the inventory if used in ways consistent with household use.
* Sphyg mercury is considered a manufactured article and is excluded from regulation
* Liquid nitrogen is used for treatment and therefore not classed as a hazardous substance
* Formalin pots are diluted to strength and do not require certified training

A safety data sheet—or [SDS](https://hsi.com/solutions/chemical-management)—is a document prepared by chemical manufacturers for any chemical which presents a hazard to health and safety. A safety data sheet includes information about each chemical, covering the physical and environmental hazards, precautions for safe handling, storage, and transportation of the chemical, and more.

There are 16 sections in a safety data sheet. Section 1 identifies the chemical on the [SDS](https://hsi.com/solutions/chemical-management) as well as its intended use. It also provides the essential contact information of the supplier.

* Section 2 outlines the hazards of the chemical and appropriate warning information.
* Section 3 identifies the ingredient(s) of the chemical product identified on the SDS, including impurities and stabilizing additives.
* Section 4 of the safety data sheet describes the initial treatment protocol for untrained responders to incidents of chemical exposure.
* Section 5 provides recommendations for fighting a fire caused by the chemical.
* Section 6 details the appropriate response to chemical spills, leaks, or releases, including containment, and cleanup to prevent or minimize exposure to people, property, or the environment.
* Section 7 of the safety data sheet provides guidance on the safe handling practices and conditions for safe storage of chemicals.
* Section 8 list chemical exposure limits, engineering controls, and personal protective measures that can be used to minimize worker exposure.
* Section 9 identifies physical and chemical properties associated with the product.
* Section 10 describes the reactivity hazards of the chemical and chemical stability information. This section is broken into three parts: reactivity, chemical stability, and other.
* Section 11 identifies toxicological and health effects info, if applicable
* Section 12 explains the environmental impact of a chemical(s) if released to the environment.
* Section 13 covers proper disposal, recycling or reclamation of the chemical(s) or its container, and safe handling practices.
* Section 14 explains classification information for shipping and transporting of hazardous chemical(s) by road, air, rail, or sea.
* Section 15 of the safety data sheet identifies the safety, health, and environmental regulations specific to the product.
* Section 16 tells you when the SDS was originally prepared or the last known revision date. This section of the SDS may also state where changes have been made to the previous version.

Keep in mind that some Safety data sheets may be 15 pages or more! Depending on the complexity of the chemical or substances therein, each section may have multiple descriptive fields with additional detail, providing different levels of information.

A hazard classification comes in two parts:

1. **The hazard class**. This refers to the nature of the hazard the substance poses.
2. **The hazard category**. This refers to the severity of the hazard within a hazard class. The lower the category number, the more severe the hazard.

For example: Acute oral toxicity Category 1:

* acute oral toxicity is the **hazard class**
* Category 1 is the **hazard** **category**.
* A substance with this hazard classification is more toxic than a substance with the hazard classification acute oral toxicity Category 4.

The hazardous properties of a substance are classified to determine how the risks can be managed. There are eight key hazard classes:

* Class 1: explosives
* Class 2: flammable gases
* Class 3: flammable liquids
* Class 4: flammable solids
* Class 5: oxidising substances
* Class 6: substances toxic to people
* Class 8: corrosive substances
* Class 9: substances toxic to the environment
* (Class 7 is missing as it covers radioactive materials which are regulated under the Radiation Safety Act 2016.)

<https://www.epa.govt.nz/industry-areas/hazardous-substances/rules-for-hazardous-substances/hazardous-substances-classification-codes/#:~:text=You%20will%20find%20hazard%20classifications,classification%20system%20in%20New%20Zealand>.

Approvals, hazard classifications and controls

<https://www.hazardoussubstances.govt.nz/media/1062/wsnz_2268_working_safety_with_haz_sub_v25-1_fa_lr_section_20.pdf>

Abbreviations TERM DEFINITION

GHS Globally Harmonised System

HSNO Hazardous Substances and New Organisms Act 1996

PCBU Person conducting a business or undertaking

PPE Personal protective equipment

SCBA Self-contained breathing apparatus

SDS Safety data sheet

**Appendix 4 - Risk Register**

**RISK REGISTER**

Date: 28/11/23. Lynne Doubleday For review annually: Next due 28/11/24

Location: In Office cupboard room 503 (Lynne’s office). In red Health and Safety folder.

* Household cleaners/ everyday consumer products: Do not need to be entered into the inventory if used in ways consistent with household use.
* Sphyg mercury is considered a manufactured article and is excluded from regulation
* Liquid nitrogen is used for treatment and therefore not classed as a hazardous substance
* Formalin pots are diluted to strength and do not require certified training
* List all actual and potential hazards
* Must contain everything that has the potential to cause harm eg injury from physical environment,
* Injury from equipment or substance, Mental Health such as burn out or stress, Robbery or aggressive behaviour/ dangerous people
* OOROC= Out of reach of children

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Risk identified** | **Potential Harm** | **Significant Risk****Yes/No** | **Eliminate** | **Isolate** | **Minimise** | **Risk controls** | **Training or information required** | **Date of last risk controls Check** |
| Liquid Nitrogen1977 | Non-hazardous but may cause cryogenic burns | Yes. If prolonged contact | Read label before use | Keep Ooroc | Store in well-ventilated area in vacuum flask in steriliser room on metal bench. | Inert gas. Attached by bungee cord to wall in staff only area.  | Wear cold insulating gloves, face shield and eye protection when using. Do not rub affected area | 11/23 |
| Cigarette smoke | Lung damage | Yes | DOR has a no smoking policy |  |  | DOR has a no smoking policy |  | 11/23 |
| Plaster saw Noise | Hearing damage | Yes |  |  | All staff and patients to wear supplied ear muffs while using | All staff and patients to wear supplied ear muffs while using or if in the same room. These are kept with saw in the steriliser room. | All staff and patients to wear supplied ear muffs while using | 11/23 |
| Wet floors | Injury from fall | Yes | Clean up any spillage immediately | Use wet floor signage | Clean up any spillage immediately | Use wet floor signage | Staff trained on how to clean a spill and where the spill bucket is kept. (In cupboard above laundry sink. Restock immediately if used. | 11/23 |
| Mental health | Decreased ability to work as expected and enjoyment of job | Yes |  |  | Support. If staff member not performing well discuss with manager who will then talk to person to find out if and what help/support may be needed.  | Be aware of others needs and be kind |  | 11/23 |
| Repeat stress injury | Decline in work ability | Yes | Provide ergonomic work station e.g. high/low chair, exercises etc |  | Ask for an assessment so that risk can be minimised if your work station is causing harm | Provide ergonomic work station e.g. high/low chair, wrist support, exercises, ear muffs etc | Ensure all staff feel comfortable asking for what they need and that they know who to ask. | 11/23 |
| Risk of violence/ verbal abuse | Feeling afraid to experiencing physical harm | Yes | Call the police |  | The practice has a code. If a clinician calls you to ask for a cup of tea that is code for call the police. All available staff to go to front desk if patient abusive to support other staff by their presence. If have a weapon and demand drugs give them to the person.  | Physical barrier at front desk. Emergency call button on computer. All desks situated so that staff member is nearest the door | All staff to train in how to manage difficult patients | 11/23 |
| Working late or early and only person in building | Potential for someone to walk in needing emergency help/ do harm | Yes | Ensure all doors are locked if there is one staff member present. Lock doors gates at night |  | Ensure all doors are locked if there is one staff member present. Lock doors gates at night | Ensure all doors are locked if there is one staff member present. Lock doors gates at night |  | 11/23 |
| Emergency equipment difficult to access | Delay in essential emergency care | Yes | Nothing is to obstruct the emergency cupboard door |  | Ensure the staff corridor is clear of unnecessary clutter | Nothing is to obstruct the emergency cupboard door | Reminder at staff meeting and move anything you see that is obstructing the door | 11/23 |
| Fire | Risk to life | Yes |  |  | Evacuate as soon as the alarm sounds or investigate unusual smells.  | Sprinkler system installed | 6 mthly evacuation drills and training for all new staff | 11/23 |
| Infection from unwell patients, staff | Risk to life for immunocompromised and those with other comorbidities | Yes | We wish | Physically isolate from others where possible | Wear appropriate PPE as per D.O.R infection control policy | Staff to stay home when unwell or wear mask while at work and work in isolated area  |  | 11/23 |
| 12) Cleaning Solutions | Skin/eye irritation. (See hazard risk if using solution that has a hazard rating) | Yes | Replace toxic chemicals with non-toxicsubstitutes if possible.Use good ventilation | Keep Ooroc | Replace toxic chemicals with non-toxicsubstitutes if possible.Use good ventilation | Wear appropriate PPE. Never mix with other cleaning solutions. Keep containers upright. Keep out of sunlight, | Notify Nurse team leader if you develop an allergy/rash and we will order a substitute product | 11/23 |
| 13)Aerosols | Aesculap | Yes | Replace with non- aerosol if a problem | Keep Ooroc.  | Do not punctureKeep away from sunlight.Keep containers upright.Use in well- ventilated areas. | Do not punctureKeep away from sunlight.Keep containers upright.Use in well -ventilated areas. | Do not punctureKeep away from sunlight.Keep containers upright.Use in well- ventilated areas. |  |
| 14)Poor lifting technique | Back injury | Yes |  |  | Identify tasks that require lifting and ask for assistance. Use stepping stools and adjustable beds | Refer to Work safe publication, Code of Practice for Manual Handling | Refer to Work safe publication, Code of Practice for Manual Handling |  |
| 15)Xray equipment | Excess radiation | Yes |  |  | According to Radiation Safety Plan | According to Radiation Safety Plan | According to Radiation Safety Plan | 12/06/23 |
|  |  |  |  |  |  |  |  |  |

**Appendix 4 – Commonly Used Hazardous Materials**

* Aesculap
* Alcohols; Isopropranolol. ethanol
* Bleaching agents, Janola.
* Chlorhexadine.
* CRC
* Cutan foam hand sanitiser
* Formalin
* Iodine / Betadine
* Liquid nitrogen
* Microshield
* No Ants barrier spray
* Oxygen
* Silver nitrate
* Soluprep/Riotan
* Springflow descaler and cleaner.
* Paraffin liquid

**Doctors on Riccarton cleaners’ substances**

* Clean and Shine
* All Kleen
* Challenge Fresh
* Splash Alpine

**Appendix 5 – Contents of First Aid Kit**

Packed by: Lynne Doubleday. Checked. 24/01/24

|  |
| --- |
| **Description** |
| Aspirin tablets - 2 |
| Crepe Bandage |
| Dressing - large |
| Dressing - small |
| Face mask |
| Gloves – disposable (2 pairs) |
| Mouth shield |
| Scissors |
|  |

**Appendix 6 – Engagement of Contractors**

**CONTRACTORS TO** Doctors on Riccarton

# ACKNOWLEDGMENT OF RESPONSIBILITIES for HEALTH & SAFETY:

1. The contractor shall take all reasonable precautions in the provision of the services to ensure the contractor and its employees and/or subcontractors’ safety and the safety of staff, patients and other visitors to the Doctors on Riccarton.
2. The contractor agrees to comply with the Health & Safety policies and procedures of Doctors on Riccarton and acknowledges it has been advised of the relevant workplace hazards already existent at the medical centre.
3. The contractor will make clear to the Health & Safety co-ordinator (or their deputy) at Doctors on Riccarton all hazards and risks introduced to the workplace as a result of the work to be carried out and will take all reasonably practicable steps to minimise or eliminate those risks. This includes placing appropriate signage, advising the practice manager of any risk or hazard to employees, patients or other visitors to the practice,
4. The contractor and its employees and/or subcontractors have the requisite skills, knowledge, and experience to carry out the required task(s) safely, including relevant qualifications and current registrations necessary to undertake the task.
5. The contractor is fully conversant and complies with:
* The Health and Safety at Work Act 2015 and other relevant legislation or regulations.
* National Standards or Codes of Practice.
1. The contractor accepts responsibility for the supervision of its personnel to ensure that they strictly adhere to all applicable safety requirements.
2. The contractor has appointed one of its personnel as its safety advisor, and that person is responsible for coordinating all applicable health and safety matters.
3. The contractor has adequate insurance cover to indemnify the practice for any damage or loss caused by the contractor, or any penalties the practice may incur as a consequence of the contractor, his employee or sub-contractor failing to meet the expected Health and Safety standards for the task involved.

**PRIVACY AND CONFIDENTIALITY:**

1. **The contractor and its staff and/or subcontractors agree not to use or disclose to anyone any confidential information which they may come across in the course of this contract, or which belongs to or concerns the medical centre, its business, employees or patients or other people with whom it has relationships. For the purposes of this acknowledgement, “confidential information” means any information, which is not known to the public generally and includes patient notes, health information and personal information.**
2. **These confidentiality provisions will continue to apply after termination of the contract.**

SIGNED FOR AND ON BEHALF OF THE CONTRACTOR

Name: (please print) ……………………………………………………………

Company Name: ……………………………………………………………

Contact Ph No. ………………………………. Date: …………………

Signature: ……………………………………………………………

**APPENDIX 7 - Health & Safety Acknowledgement**

**Health & Safety Acknowledgement**

Staff working at this medical centre will be exposed to health and safety issues and have a responsibility toward their own safety and the safety of other people around them.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read and understand the provisions of Doctors on Riccarton Health and Safety Policy and understand that whilst working here I have and responsibilities towards my own safety and the safety of others around me.

I am familiar with the practice’s Hazard and Risk Register which identifies health and safety risks affecting Doctors on Riccarton.

I acknowledge that I have a duty of care as a worker (or Officer) to take all practicable steps to ensure:

* **my own safety** at work; and
* That no action or inaction by myself while at work causes harm to any **other person**.

When suitable protective clothing or equipment is provided by the employer, I agree to use it.

I have been made aware of the requirements of the Health & Safety at Work Act 2015 as it relates to my employment at this practice.

I know that I need to report all incidents (including accidents and near misses / good catches) to the practice’s health and Safety co-ordinator so that they can be recorded in the practice’s Incident Register for review and follow up action.

……………………………………… ……………………….………..

Name Signature

…………………………………... …………………………………...

Position Date