General Statement of Policy

This policy on Occupational Health and Safety for the Komfo Anokye Teaching Hospital (KATH) is to provide and maintain safe and healthy working conditions, equipment and systems of work for all staff, and to such information, training and supervision as may be required for this purpose. KATH accepts its responsibility for the health and safety of all persons providing or accessing services in KATH. The allocation of duties for safety matters and the particular arrangements made to implement this policy are set out below.

In order to keep pace with evolving health and safety issues in KATH, the policy will be reviewed every five years

Prof. Ohene Adjei
Chief Executive
Introduction

Occupational health is a science and art devoted to the anticipation, recognition, evaluation and control of factors and stresses (arising in or from the workplaces), which may cause sickness, impaired well being or significant discomfort, and inefficiency among workers or among the citizens of a community.

The theme for World Health Day, 7th April, 2009: “HEALTH FACILITIES IN EMERGENCIES” draws attention to the fact that, unless Health facilities and their staff are safe from disasters, they cannot save lives during and in aftermath of disasters. Disaster-safe health facilities and staff require measures from design stage of buildings, construction, selection of equipment, workplace health and safety measures including emergency response plans to provide a safe working environment for Occupational Health and safety policy for KATH, hence the need.

Employers have a legal obligation to protect the Health and Safety of their employees. Employees on the other hand must take responsibility for the health and safety of the work environment as may be provided by management. Occupational Health is a distinct branch of medicine concerned with how a worker’s health can affect his/her ability to do the job and how work and the work environment can affect an employee’s health. Occupational health thus seeks to address the impact of health on work and work on health. It seeks to reduce the incidence of illness and injury caused by work, by promoting and maintaining health, and preventing accidents and ill health caused at work.
CHAPTER ONE

1.0 The Problem

Health care work is associated with many hazards and serious risks; including infections, poor working postures, manual handling, stress, accidents etc. The WHO estimates that, sharps injuries contribute 30% new infections of Hepatitis B Virus and 2.5% HIV infections annually among health workers in Sub-Saharan Africa. Most important predisposing factors include:

- needle stick injuries from double-hand recapping
- overuse of injections-more than 75% of injections in curative sector considered unnecessary (over 5 times those used for immunizations)

In an Occupational Health and Safety survey conducted between 1999-2002, among 189 health professionals, from 7 government hospitals and health centres, in the Eastern and the Greater Accra Regions, only 6% considered health and safety measures as adequate in their facilities, 48% considered measures poor and 3 most important hazards were biological, manual handling of patients and stress factors.

There is no system for collecting and collation of health data on staff of health sector. A study carried out by the Occupational and Environmental Health Unit of Ghana Health Service, in Korle-Bu Teaching Hospital and Mamprobi Polyclinic identified hazards including lifting of patients (79%), poor-working posture (77.2%), stress (68.5%) and slips and falls (48%) as contributing to the magnitude of work related injuries and ill-health in Ghana.

1.1 Legal Context of Policy

Section 24(1) of the 1992 Constitution states: "Every person has the right to work under safe and healthy conditions.... "This fundamental human right has been upheld by the Labour Act, 2003 (Act 651).
Ratification by Ghana of a number of International Labour Organization (ILO) conventions related to occupational safety and health (OHS), (and it included the following conventions:

- C8: Labour Inspection
- C115: Radiation Protection
- C119: Guarding Machinery
- C120: Hygiene (Commerce and Office)
- C148: Working environment (air pollution, noise and vibration)

Laws that operated in Ghana, till recently (Factories, Offices and shops Act), did not specifically cover health sector.

Recently, the Labour Act 2003 (Act 651) has been promulgated; and is consistent with:

- the 1992 Constitution of Ghana
- ILO C155 (1981) on Supervision of OHS
- ILO C181 (1985) on Occupational Health services—which is even yet to be ratified.

Labour Act 651 places duty on ALL employers to ensure that every worker employed by him or her works under satisfactory, safe and healthy conditions.

The onus is on the employer to:

- Provide safe systems of work
- Ensure work environment free of risks to health and safety
- Prevent accidents and injuries
- Supply and maintain safety appliances, personal protective equipment (PPE) etc
- Provide safe drinking water, toilets and other hygiene facilities.
Workers are obligated to:
- Use safety appliances, PPE and other equipments in compliance with instructions
- Remove oneself from dangerous situation

However, the Labour Act absolves employer of liability for injuries suffered by worker due to non-compliance.

1.2 The Role of Occupational Health Services
The Occupational Health Service would be an independent confidential advisory and support service that would be available to all employees of KATH. The services provided would be based on legislation, expert guidance and good employment practices and seeks to reduce the incidence of illness and injury caused by work. It operates on the principle of impartiality to meet the needs of both the employer and employee and offers a wide range of services.

The Occupational Health service would provide specialist advice to employees and management on matters relating to the health, safety and welfare of employees of the Komfo Anokye Teaching Hospital. Services may also be extended to non-KATH staff for a fee.

The mission of Occupational Health is to deliver the best Occupational Health Services, to meet the need and expectations of KATH staff. This will be achieved through well motivated and committed staff, applying the best practices and innovations. Occupational Health aims to function effectively as an advisory service as long as, the Occupational Health and Safety practitioners are perceived by Board, Management and entire staff of the Komfo Anokye Teaching Hospital to have an independent professional status.

The confidential nature of the service is of particular importance. The function will contribute in increasing the effectiveness of the organization by enhancing staff
performance and morale by reducing the risks at work, which contribute to ill health, accidents and staff absence.

1.3 Purpose of this document

• All staff will have access to an Occupational health service and will be made aware of the range of services available to support them in maintaining optimum health.

• All staff would have the opportunity to receive the appropriate health screening and vaccinations for job purposes.

• Staff involved in duties with potentially higher risk of injury from sharp objects, or exposure to potentially infectious agents shall be made aware of services provided by the occupational health services

• All staff whose activities exposes them to potentially harmful agents (radiations, body fluids, needle stick injuries) will be made aware of the health and safety protocols and services that they can access.
1.4 The organization for carrying out the policy

The ultimate responsibility for health and safety of all staff of KATH lies with the Chief Executive. For routine health and safety matters, the line of responsibility follows the normal managerial lines as indicated below:

Chief Executive

Directors

Heads of Directorates

Staff in Managerial positions

Staff in other supervisory positions

Other staff and students (medical, nursing, Laboratory etc.)
1.5 Staff responsibility for health and safety

- In order to achieve the aforementioned purposes, the KATH board recognizes the need for active co-operation between Occupational Health and Safety Unit (OHSU), Top Management, Line Managers, Human Resource, Trade Union Representatives (Health Workers Association-KATH) and other expert advisory teams, as may be set up by the OHS committee, with recommendations from the Occupational Health and safety services unit, to ensure satisfactory outcomes for both individual employees and KATH.

- The implementation, management and monitoring of agreed safety standards shall be devolved to Occupational Health and Safety Committee (OHSC) and respective directorates/units’ representatives: the Nurse Manager for Nursing, Lead Clinician for Doctors, Pharmacy manager for pharmacists, and the Business Manager for other categories of staff.

- Managers and supervisors have the responsibility to allow staff time to attend appointments in relation to health and safety.

- The occupational health services unit shall give the appropriate advice and allow staff to make informed decisions with respect to screening, vaccinations and general management where applicable.

All staff shall have a responsibility to:

- Attend Occupational health services for purposes that would be specified by the Occupational health and services unit, through their managers/supervisors via the reporting structure, and to give an honest account of their health status.

- Take reasonable care of the Health and Safety of themselves and others who may be affected by their acts or omissions at work.
• Co-operate with managers/supervisors so far as is necessary to achieve a healthy, safe workplace.

• Not intentionally or recklessly interfere or misuse anything provided in the interest of Health and Safety.

• Immediately report any hazards, unsafe practices, accidents or incidents to their section head or Manager.
CHAPTER TWO

2.0 Range of services

Services to be delivered by KATH through the occupational health and safety unit shall be based on job profile, individual risk assessment and organisational needs, and may include:

2.1 Pre – employment health assessment

The primary purpose of pre-employment screening is to make sure that an individual is fit to perform the tasks required of a job effectively and without risk to his own or to others health and safety. Pre-employment screening is undertaken for all new prospective employees of KATH.

Pre-employment health assessment of all employees would be carried out by any of the following:

i. The Occupational Health and Safety Unit (OHSU) shall ensure that all staff completes a Health Questionnaire, as may be contained in their terms and conditions of service.

ii. A medical examination by the OHSU, or a medical officer designated by the OHS unit.

iii. Assessment by other health professionals (specialist referral) when deemed necessary, and monitoring where applicable.

iv. Health screening on commencement of employment includes a baseline health interviews, investigation, physical and immunization assessment for all new staff before or during their induction/orientation period and management of an individual immunization programme based on the job profile and risk assessment.
v. Immunisation and screening regime will be in accordance with the Ministry of Health policies on certain diseases, including Sickle cell haemoglobinopathies and Hepatitis B.

vi. Final health clearance will only be given when adequate information pertaining to the physical and psychological health of the individual has been obtained and assessed.

vii. The health information so obtained shall be kept on the individual's file in confidence, and will serve as a reference point for subsequent monitoring.

2.2 Periodic Health Assessment
There shall be periodic health screening of staff by the Occupational Health and safety unit (OHSU):

I. Provision of appropriate advice, to allow staff to make informed choices regarding screening, vaccinations and general management where applicable.

II. Provision and monitoring of immunization programmes would be put in place to protect staff and patients against infectious disease such as Tuberculosis, Hepatitis B, among others. Specific attention would be given to staff whose activities expose them to potentially infectious body fluids from patients.

III. Periodic assessment of health status of staff, in relation to specific job roles.

IV. Referral of staff seen at Occupational Health Clinic to the appropriate specialist clinic where indicated

2.3 Assessment and advice on job related risks
This shall be conducted by OHSU and will include:

I. Offering specific job related advice, including clinical management of associated job related conditions

II. Conducting specific job related hazards and risks.
2.4 Periodic health surveillance

Although hazards will be identified through risk assessment and all reasonable adjustments made to negate or control the effects on health, special categories of staff may require periodic health surveillance.

The Occupational Health services unit will liaise with managers and supervisors to ensure that appropriate surveillance programmes are implemented and documented.

2.5 Management of absence from duty due to sickness

Although the prime responsibility for managing absenteeism rests with the manager, they may refer employees for assistance in the management of short term frequent absence or long term sickness absence in accordance with the existing Ministry of Health and KATH Human Resource policy.

The Occupational Health Services unit will maintain confidentiality when dealing with medical information and will liaise with the individual employee regarding disclosure of information pertinent to their current situation.

2.6 Rehabilitation

The Occupational Health service unit will work with other agencies (Labour office) and hospital specialists to offer appropriate advice to ensure an effective and safe return to work following ill health, accidental injury that may have caused temporary or permanent disability. This advice, where appropriate will adhere to all relevant acts. Advice may include for example, workplace assessment and readjustment of tasks, adjustment of the environment or equipment, or result in a recommendation for redeployment or ill-health retirement in line with Health and Work Policy and relevant laws.
2.7 Psychological wellbeing

Individuals may experience a wide range of difficulties leading to increased stress levels, anxiety and depression. There may be some overlap between work and home life. The Occupational Health and safety unit would provide a confidential support service for all members of staff.

An Occupational Health Psychologist (in the absence of this, a Clinical Psychologist) would provide specialist care for all employees who require specialist counseling. They would also have a proactive programme to deal with work related stress issues.
CHAPTER THREE
3.0 Contractors, self-employed persons and visiting researchers

- Management shall be responsible for applying all practical measures to ensure that persons hired as staff, contractors, subcontractors, as well as any other persons who happen to be at the work site, are not injured while the contracted work is performed. This does not absolve the contractor or subcontractor from his or her responsibilities as employer.

- The OHSC shall develop adequate administrative and procedural policies to deal with contractors and subcontractors in order to arrange their responsibilities to management and ensure that all subcontracted work complies with expected standards.

- Before contract work can begin, the OHSC shall ensure that all contractors are fully aware of the health and safety procedures applicable at the work site. This should include the following: information on any known health hazard contract workers may be exposed to at the work site and ways to control those hazards; established emergency procedures to be adhered to in the event of an emergency; and observation of all instructions, warnings, and restricted areas.

- Contractors and self-employed persons are required, whilst on the Hospital premises, to carry out their duties in a safe manner that will not harm or affect the Health and Safety of any other persons.

- They shall be expected to comply with all Health and Safety requirements relevant to their work and those specified by the Hospital.

- Large organizations with long-term contract arrangements shall establish formal systems and negotiate compliance with health and safety requirements as part of the contracting process.
• The coordination among contractors, sub-contractors, KATH management, and employees should be negotiated when contracts are determined.

• Construction or maintenance projects being executed in the KATH shall be monitored by the OHSC, to prevent these construction activities from generating physical, chemical or biological hazards such as noise, radiation, solvent vapors etc; that could affect patients and health care personnel.

• The contractor shall present the OHSC with a health and a safety management plan, stating the following:

  - compliance with workers’ health and safety standards and other pertinent regulations and codes of conduct;

  - a system for identifying new and existing hazards for the duration of the contract and a plan to control serious hazards;

  - health and safety information and training for contract workers;

  - roles and responsibilities (a flow diagram would be useful);

  - an employee supervision system, wherever necessary; and pertinent procedures to report and investigate accidents and incidents that may occur during the course of the contract work and procedures to advise management of said accidents and incidents.

• All visiting researchers shall be expected to comply with this policy, and to carry out their research in a safe way that will not harm or affect the Health and Safety of any other person(s).
• Any member of staff who identifies an unsafe practice being carried out by a Contractor or self-employed person shall make a report to his/her supervisor/manager immediately.

3.1 Monitoring

• All staff shall monitor the day-to-day aspects of Health and Safety as part of their normal duties.

• The occupational Health and Safety committee shall ensure that Safety inspections/Audits are undertaken yearly, throughout the hospital. A recognized Safety Coordinator or Focal person or suitably trained person shall be involved in this activity. Heads of Directorates and Business Managers shall ensure that all such inspections are recorded and that appropriate follow up action is taken. The results of these inspections must be communicated to staff. A copy of all reports shall be forwarded to the Occupational Health and Safety committee.

• Members of the Health and Safety committee shall periodically carry out sample monitoring of these inspections.

• An ‘external’ Health and Safety Audit shall be carried out bi-annually. This is to be arranged through the Quality Assurance Coordinator.

3.2 Training

• Occupational Health staff shall conduct training activities to raise awareness and provide education on workplace hazards which may include blood borne microorganisms’ exposures, stress and other topical issues. To this end:

• All employees shall receive Hospital Health and Safety induction training on taking up employment with the Hospital.
• Any specific training required to ensure safe working shall be identified and arranged by the OHSU. This shall include any periodic/refresher training courses as may be required.

• All employees shall attend all relevant Health and Safety sessions, including Fire drills.

• All training relevant to Fire, Health and Safety shall be recorded/reviewed and maintained by OHSU.

• The responsibility for maintaining these records shall lie with the OHSU

• The Occupational Health Services Unit shall be contacted for advice on the provision of training on Health and Safety, as well as training on surveillance relevant to Health and Safety.

3.3 Specific Arrangements
This section identifies specific areas, procedures, safe systems of work and policies relevant to Health and Safety within the Hospital.

Fire

• All staff shall be aware of and comply with the general fire safety requirement, attend a refresher fire training course at least once a year

• The fire service department of Komfo Anokye Teaching Hospital shall ensure that the fire policies are adhered to.

• A local Fire Action Plan shall be produced for the hospital
CHAPTER FOUR

4.0 Assessments
The Occupational Health Services and the Health and Safety committee shall arrange for assessments relevant to Health and Safety to be performed, taking any appropriate action to implement any recommendation made as a result of the assessments. All assessments are to be recorded and the Safety coordinators shall liaise with the Occupational Health Services Unit, for advice and assistance in the provision of relevant training.

4.1 Accidents/Incidents
- Accidents/Incidents shall be dealt with promptly. Immediate and appropriate action shall be taken by staff to minimize any hazards/risks present. If specialist services are required it may be obtained through the Occupational Health Services Unit.

- Accidents/Incidents shall be promptly reported and the appropriate documentation completed and distributed as required.

- Where injury occurs appropriate treatment shall be given immediately, and the safety coordinator and Occupational Health Services should be informed.

- Management/Supervisory staff shall carry out an investigation to determine the cause of the accident/incident.

- Following the investigation remedial action shall be implemented to avoid recurrence.

- Where there has been any involvement with the risk of contamination by blood/body fluids, the person shall contact the Occupational Health Services Unit.
- The Occupational Health and Safety committee shall be responsible for monitoring accidents/incidents within the Hospital.

4.3 Control of Substances Hazardous to Health

Control of substances Hazardous to Health, in use in the hospital shall be kept by the Occupational Health Services Unit in collaboration with the pharmacy unit.

4.4 Equipment/Machinery

- Management’s responsibilities concerning the occupational health and safety of its staff members include dealing with those who design and manufacture products such as machinery, equipment, substances, protective clothing and other consumables.

- It is essential that purchasing regulations (like procurement proceedings) consider health and safety. The Supply Chain Management and the Entity Tender Committee of KATH shall collaborate with the Occupational Health and Safety Committee in these matters, so that all potential risks and the costs of implementing controls are considered before any equipment, products, or services are introduced into the workplace.

- A purchasing system shall require that suppliers and vendors comply with the KATH specific health and safety standards as well as with all pertinent industrial standards norms.

- The suppliers and vendors must provide written information (such as technical information on their operations/usage, and on the safety of materials) on the health and safety of all their products, chemicals or substances.
• Advice and training must be provided to staff responsible for the operation of such machinery or equipment where applicable.

• Only equipment that is properly installed and maintained shall be used. A label showing that it has been tested and giving the retest date shall determine this, for example by the Ghana Standards Boards. If a piece of equipment does not bear such a label, or where the date on label has expired, it shall be withdrawn from use and appropriate remedy taken.

• All new equipment shall undergo a thorough check and testing before they are put to use.

• All appliances shall be regularly inspected and where necessary, subjected to testing, with the help of KATH Technical services. All members of staff shall routinely check that their electrical appliances are not damaged and that there are no obvious signs such as damaged or discoloured plug tops and torn cables.

• Any item that becomes faulty shall be taken out of service and immediately discarded or sent to a competent person for repairs.

• Equipment and furniture shall be arranged in a manner as to avoid the need for leads/wires to trail across floors. Where these cannot be avoided, appropriate rubber strips shall be used to reduce the risk of tripping.
CHAPTER FIVE

5.0 Occupational health services unit
Management shall set up an occupational health services unit to deal with Health and Safety issues and to give expert advice on workers’ health and safety. The Health and Safety unit shall deal with issues on Health and Safety and shall report to the Chief executive of the hospital.

In consultation and collaboration with workers and management through the Occupational Health and Safety Committee, the Unit should coordinate activities to ensure compliance of the following four basic functions:

- Monitoring of the work environment;
- Surveillance of employees’ health;
- Advisory services and communication (providing information, education, training, and counseling on occupational health and safety to management and employees); and
- health care, collaboration with health authorities, and health programs (vaccination, etc.).

Although the Occupational Health and Safety Unit primarily has a preventive function, it may also be charged with dispensing medical treatment to workers and their families, as determined by this policy, national legislation and local needs.

5.1 Professionals who constitute an Occupational Health and Safety Unit:
An Occupational Health and Safety Unit is best staffed with specialized professionals. If none are available, existing professionals shall undergo special training. A multidisciplinary team is a priority (occupational medicine, occupational hygiene, ergonomics, occupational nursing, etc.).
5.2 Some Requirements for the Proper Functioning of the Occupational Health and Safety Unit

- The Occupational Health and Safety Unit must have adequate space to carry out its activities and so its staff can perform its administrative functions.
- The professional independence of the Unit’s members must be safeguarded in accordance with national laws and with standards agreed upon between management and workers.
- The Unit’s professionals must adhere to confidentiality standards concerning information they receive on employees while performing their functions. Professional confidentiality is subject to exceptions defined in the legislation and in national regulations.

5.3 The Occupational Health and Safety Committee

The Occupational Health and Safety Committee is an important tool in the management of occupational health and safety. It is a permanent group composed of representatives of employees and the employer who communicate and collaborate to identify and solve health and safety problems at the workplace, providing orientation and support to the occupational health and safety unit.

The Committee is charged with issuing recommendations to solve occupational health and safety problems, but is not responsible for implementing those recommendations.

The ultimate responsibility for guaranteeing worker safety rests with the employer; in other words, management. The Committee may collaborate in implementing the recommendations, provided that management has established favorable conditions for the collaboration to occur (clear delegation of responsibilities, training, support personnel, etc.).
5.4 Health and safety coordinator/Focal person

- Focal persons from various directorates and units shall be nominated by their management teams or heads.

- Heads of directorates/units shall communicate such nominations to the chairman of the OHSC in writing.

- Focal persons should be of senior grade, and in a position to supervise, so as to ensure compliance to safety regulations/SOPs.
CHAPTER SIX
6.0 RESPONSIBILITIES OF STAFF FOR OCCUPATIONAL HEALTH AND SAFETY (OHS) OPERATIONS IN KATH

6.1 Occupational Health and Safety Committee
Shall be responsible for:

- The planning, implementation, management and monitoring of agreed safety standards
- Reviewing the OHS policy periodically (within five years)
- Promoting awareness in occupational health risks and hazards, as well as safety in the KATH
- Promoting staff attendance at training and orientation sessions;
- Reviewing safe work practices and participate in worksite inspection to identify hazards
- Helping select tools, equipment, and personal protection equipment;
- Reviewing major accident and illness reports to identify their causes and prevent their recurrence;
- Collaborating with other relevant committees such as the Infection Prevention and control committee

6.2 Composition of the Occupational Health and Safety Committee (OHSC)
The OHSC shall be composed of the following categories of persons:

- An Executive Director of the KATH nominated by the KATH Board, who shall also chair the committee
- An Occupational Health Physician-in-charge of the OHSU
- An Occupational health Nurse-in-charge of the OHSU
- An Occupational hygienist or IPC representative
- A representative, nominated by the Health Services Workers Union
- A representative each of the following categories of staff: Medical Doctors, Nurses, Pharmacists to be nominated by their respective associations,
• The Head of Human Resource-KATH

• **NB:** Nominated members shall serve for a two year term, which shall be renewable for maximum of two terms (4years). The leadership of the respective bodies shall notify the chairman of the OHSC of any new nominations.

**6.3 Occupational Health and Safety Unit**
The unit shall have her own office with administrative staff, to be headed by the Occupational Health physician-in-charge, and shall be responsible for:

- The implementation of safety standards and protocols, to be determined by the OHS committee.
- Providing the range of health and safety services as stated in Section 4 of this policy
- Advice Occupational Health and Safety committee (OHSC) and KATH management on actions to be taken based on findings on specific staff on health related issues
- Monitoring trends in health status of staff
- Running the staff clinic
- Granting and approving excuse duties for staff
- Conducting investigation into occupational health related injuries or incidents and report findings to management
- Conduct surveillance on employees exposure to hazardous chemical, biological and physical agents,
- Advising KATH management on how to achieve compliance with health and safety and environment legislation
- Liaising with focal persons to monitor health and safety practices in the various directorates/units
- Education and training of staff on OHS issues
6.4 Occupational health Physician

- Adequate assessment of the staff health, based on the clinical and occupational history and clinical signs, understanding of the particular occupation involved, performance of further clinical examination, including further tests, as appropriate.
- Make a complete assessment of the interaction between staff and their jobs taking in to account Health and Safety issues.
- Diagnose and treat work-related illnesses and injuries of employees.
- Conduct investigations important to the assessment of occupational risks or fitness for work, rehabilitation, redeployment and ill-health retirement where appropriate.
- Oversee maintenance of case histories, health examination reports and other medical records
- Recommends appropriate occupational health interventions
- Providing staff with the requisite information they need to protect themselves against occupational risks.
- Advising on measures required to ensure a safe working environment, being mindful of statutory obligations.
- Supervise staff health surveillance.
- Educate staff on working with persons with disabilities or ill-health
- Conduct staff OPD clinic

6.5 Occupational health Nurse

- Document and Maintain employees’ health records
- Liaise with OH physician to appraise work environment
- Conduct incident/accident follow up
- Develop return to work strategies following serious injury or prolonged illness
- Advise on disability issues in the workplace
- Update legal and professional changes associated with public health and occupational health and safety
• Design develop and deliver new health promotion initiatives and training programmes

6.6 Health and safety coordinator/Focal person

• They should be able to advice and attend to basic issues bordering on safety in their respective units/directorates.

• Shall report any potential hazards or risks, at their respective work areas that require technical expertise, to the OHSC

• Liaise with OHSU on issues bordering on safety

• Continuously sensitize staff on health and safety issues

6.7 Employees

Shall:

• Take personal responsibilities of their health and safety at work, and that of other staff they work with.

• Co-operate with managers/supervisors so far as is necessary to achieve a healthy and safe workplace.

• Not intentionally or recklessly interfere or misuse any instrument or equipment for the health and safety of staff and patients

• Report immediately, any hazards, unsafe practices, accidents or incidents to their immediate supervisor.

• Attend Occupational health programmes, for purposes that would be specified by the Occupational health and services unit, through their managers/supervisors via the reporting structure
6.8 Management Team Members, Head of units and Supervisors

It shall be the responsibility of the manager/supervisor to:

- Allow staff time to attend appointments in relation to health and safety.
- Ensure that safety precautions are adhered to by staff, in carrying out their duties at all times.
- Report immediately to the Occupational health and safety unit, any accidents, hazards, events or practices, that have the potential of causing harm at the work environment.