

PAKEJ ORIENTASI KESELAMATAN & KESIHATAN PEKERJA

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HOSPITAL BINTULU, SARAWAK

CONTOH JOB SAFETY ANALYSIS HB STAFF AND PATIENT SAFETY PROTOCOLS
(to be used together with standard operating procedures)

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<p><i>Management of Patient Transfer</i> from trolley to trolley/bed/Wheel chair/Couches/ Procedure table & vice versa</p> <p>Patient transfer from incubator to open care incubator/cot & vice versa</p>	<p>Physical -Fall</p> <p>Ergonomics -Lifting</p>	<p>-Injury -Fractures</p> <p>-Backache -Sprain & Strains</p>	<p>-Staff -Patient</p> <p>-Staff</p>	<p>-Ensure adequate manpower available for lifting patients. -Use of transfer trolley/roller aids/transfer sheet during transfer of patients. -Lock trolley/incubator wheels during transfer of patient. -Lock incubator doors/side port & make sure port sleeves are tight. -Secure side panels of open care incubator. -Trolley should have railings to avoid patient falling. -Training on lifting techniques/body mechanics. -Minimize patient transfer from bed to trolley by using appropriate transport beds. -Bassinette to be attached to patient trolley where applicable. -Step-stool for patients to climb on to couches. -Elderly patients & patients who are unable to walk and who are on wheelchair should be assisted on to couches, procedure tables & chairs.</p>	<p>-Incidence reporting -Monitor Scheduled Planned Preventive Maintenance of all transport equipment.</p>

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<p><i>Management of Patient Transfer</i> from trolley to trolley/bed/ Wheelchair/ Couches/procedure table & vice versa</p> <p>Patient transfer from incubator to open care incubator/cot & vice versa</p>	<p>Physical -Airway adjunct disconnected or dislodged from ventilated patient</p>	-Hypoxia	-Patient	<p>-Patient waiting to be attended and who are on trolleys and wheelchairs are not to be left alone and must be accompanied.</p> <p>-Check air entry in lungs after each movement of patient.</p> <p>-Trained staffs to manage airway during transport.</p>	<p>-Observation & reinforcement -Incidence reporting.</p>
	<p><i>Handling Heavy Equipment, Sets & Goods</i> -Portable equipments -Sets -Raws goods -Frozen goods -Dry goods -Boxes -Cartons</p>	<p>Ergonomics -Lifting</p>	-Backache -Sprain & Strains	-Staff	<p>-Use trolley to transport. -Designation of more staff to handle each equipment or good depending on weight and quantity. -Use step-up stools when removing or storing from above chest level.</p>	

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<i>Working Hours</i>	Psychosocial -Long working hours. -Normal sleeping time disruption for shift & on-call staff. -Heavy responsibility & work load. -High expectations. -No proper guidelines or protocol.	-Anxiety -Stress -Depression	-Staff	-Enough posts made available and be filled. -Frequency & duration of night duties reduced. -Workload & responsibility shared equally. -Motivation and incentives. -Work process, protocols & guidelines to be made available and be reviewed.	-Six monthly professional support & counseling to all staffs.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<i>Waiting Time</i> For registration consultation, treatment & management	Psychosocial -Long waiting hours -Disruptions of daily routine -Next of kin have other responsibility to deal with.	-Anxiety -Stress -Complains -Aggression -Abuse	-Staff -Patient -Relative	-Enough posts made available and be filled to give faster services. -Workload & responsibility shared equally. -Implement a good 'Q' system. -Flow chart must be simple and patient friendly. -Motivation and incentives. -Shorten waiting time. -All waiting area to be air conditioned. -Soft music to be played during period patients are waiting. -Visual entertainment and documentaries to be telecast for viewing while waiting. -Reading material to be made available. -Implement Piagam Pelanggan and accept complaints positively. -Implement a recovery system.	-Incidence reporting

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<i>Patients Care –</i> Including the whole process of invasive & non-invasive procedures	Physical -Sharps -Backache -Sprain & Strains Biological -Blood -All body fluids, secretions and excretions except sweat -Non-intact skin -Mucous membrane	-Injuries -Cross infection	-Staff -Patient	-Standard Operating Procedures to be strictly adhered. -Patients to screened & notified to all staffs concerned. -Strictly enforce Standard Precautions Practices & Additional Precaution Practice. -Aseptic techniques to be strictly enforced for non-invasive procedures. -Sterile technique to be strictly enforced for all invasive procedures. -For surgical gowning use non-strike through disposable gowns. -Use goggles, mask, double, surgical gloves and boots if necessary. -height adjustable operating tables and surgeons stool to be used for procedures. -Practice good body mechanics during procedures. -Provide free formula milk for 6 months for babies of VDRL/HIV mothers as no breast feeding allowed. -Proper homeostasis before patients leaves surgery.	-Incidence reporting. -Six monthly health status assessment & documentation -Risk assessment -Infection rate surveillance -Monitor Scheduled Planned Preventive Maintenance of all equipment.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<i>Patients Care</i> - Including the whole process of invasive & non-invasive procedures	<p>Chemical -Antiseptics</p> <p>Psycho-Social -Stress -Medico legal Implications</p>	<p>-Allergy -Eczema</p> <p>-Wrong procedure -Wrong body part intervened or investigated -Wrong patient -Document mix up -Quality of service will be compromised -Neglecting patient care</p>	-Patient	<p>-All invasive procedures to be done on patient in laying down position. -Linen cover for benches & couches used by high risk patients to be changed before used by next patient. -Benches used for examination & treatment must be covered with linen. -Choice of alternative antiseptic to be made available.</p> <p>-Careful history of allergy from patient. -Check list of patient identification -Check list for procedure to be performed -Marking affected body part with markers by surgeon concerned -System of counter checking by second person -Motivation & support to staffs by superiors.</p>	<p>-Incidence reporting.</p> <p>-Incidence reporting.</p>

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Cont/	<i>Psychiatry Patients Care—</i> Including the whole process of invasive & non-invasive procedures.	Physical -Assault -Hidden sharp object in cloths	-Injury -Desired level of patient cooperation not optimal -Environment	-Patient -Staff -Relatives -Relatives -Staff	-Adequate manpower for physical restrain -Patient sedated in the emergency department -Secured examination room for violent & aggressive patients -Alarm system & CCTV -Security personnel available -Interviews conducted in clinic & in Privacy	-Incidence reporting.
		Psycho-social	-Stress	-Patient -Relative	-Adequate staff training & Counseling -Continuous Medical Education -Hazard leave	-Incidence reporting.
	<i>Nursing Psychiatric patients</i>	Psychosocial -Suicidal tendency	-Injuries -Fractures -Head Injury -Fatality	-Patients	-Encourage close family members to accompany -Close observation nearer to nurses station -Windows to be fitted with grills	-Observation & reinforcement -Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Childbirth</i>	Physical -Wrong Tagging Psycho-social -Stress -Medico legal	-Baby Mix-up	-Mother -Staff -Baby	-Mother to be tagged -Identity verification before delivery -Tag for baby prepared and verified with mother before delivery -Tagging to be done immediately after delivery -Witnessed & Documented in PEROBST – 304 form.	-Observation & reinforcement -Incidence reporting.
	<i>Breast Feeding</i>	Physical -Suffocation	-Fatality	-Neonate	-Health Education & close supervision of breast feeding mothers especially prim, post caesarian & post analgesia.	-Incidence reporting.
	<i>Nursing Neonates in Cot</i>	Physical -Suffocation	-Fatality	-Neonate	-Health Education to mothers & close supervision of neonates -Ensure neonates are not nursed prone but nursed in later position and interchanged hourly	-Observation & reinforcement -Incidence reporting.
	<i>Nursing Children, Elderly & Restless Patients</i>	Physical -Fall	-Injuries -Fractures -Head Injury	-Patients	-Nurse in COT beds -Close observation nearer to nurses station	-Observation & reinforcement -Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Blood Transfusion</i>	Biological -Blood & Blood products -Reaction -Blood Bag Mix-up	-Cross Infection -Anaphylaxis -Fatality -Medico-legal	-Staff -Patient	-Aseptic & sterile technique to be strictly enforced. -Verification of blood transfusion checklist before transfusion -Emergency trolley to be available	-Incidence reporting.
	<i>Hand Washing</i>	Chemical -Antiseptic solution	-Allergy -Eczema	-Staff -Patient	-Choice of alternative antiseptic to be made available	-Incidence reporting.
	<i>Chest Tube Drainage</i>	Physical -Tubing slipped out -Chest tube bottle Accidentally broken.	-Injury -Pneumothorax	-Staff -Patient	-Use disposable unbreakable bottles -Constant observation	-Incidence reporting.
	<i>Intubation</i>	Physical -Tooth	-Broken during procedure -Airway obstruction -Medico-legal	-Patients	-Inspection of teeth after intubation -Intubation to be done by trained staff	-Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Oxygen Therapy</i>	Physical -Cylinder fall	-Injury	-Staff -Patient	-Secure cylinder during storage & transport -Use wall mounted pipe line gases -No smoking signage -Training on Oxygen therapy & handling of Oxygen tanks -Fire-disaster plan with trained fire fighting team in each unit.	-Observation & reinforcement -Incidence reporting.
	<i>Filling Hot Water Thermos Flask</i>	Physical -Thermal	-Scalds -Burns	-Staff -Patient	Awareness -Orientation to patients on hot water delivery time -'No Entry of Patient into pantry signage	-Incidence reporting.
	<i>Hot Water Taps for bathing & washing</i>	Physical -Thermal	-Scalds -Burns	-Staff -Patient -Mothers	-Awareness amongst staff -Orientation to patients/mothers on hot water & cold water taps -Taps to be clearly marked	-Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Preservation of Specimen</i>	Chemical -Formaldehyde	-Carcinogenic -Pulmonary Oedema	-Staff	-Use of mask, goggles, impermeable apron and gloves -Well ventilated room with exhaust fan -Avoid spillage -Containers to be recapped air-tight immediately -Decontaminate shower washer available	-Incidence reporting.
	<i>Disinfection of instruments, tubings, airway adjuncts, etc</i>	Chemical -Disinfectant	-Eye, respiratory & skin irritation	-Staff	-Use mask, goggles, impermeable apron and gloves -Well ventilated room with exhaust fan -Avoid spillage -Containers to be recapped air-tight immediately -Use low temperature plasma hydrogen peroxide autoclaves for heat sensitive apparatus (Sterrad Sterilization) as an alternative -Disposable only for single use & not to be reused to avoid disinfecting	-Observation & reinforcement -Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Administration of Cytotoxic Drugs</i> <i>Reconstitution of cytotoxic drug</i>	Chemical -Cytotoxic Drugs	-Eye, respiratory & skin infection	-Staff	-Strictly follow Standard Guidelines on Handling and Administration of Cytotoxic Drugs -Use jumpsuits, disposable gowns, Hood, bouffant caps, shoe cover & double gloves -Done in cytotoxic safety cabinet	-Observation & reinforcement -Incidence reporting. -Incidence reporting -Six monthly health status assessment & documentation -Risk assessment -Monitor Scheduled Planned Preventive Maintenance of safety cabinet.
	<i>Diathermy</i>	Physical -Thermal Chemical -Fumes	-Fires -Burns -Explosions -Carcinogenic	-Staff -Patient -Staff	-Technique of holding dissecting forceps to allow diathermy flex to be touched nearest to the area to be coagulated using mono-polar. -Use sucker to suck away fumes -Use mask properly as to be air tight around edges of mask	-Observation & reinforcement -Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Bone Cement application</i>	Chemical -Fumes	-Respiratory & eye irritation -Addiction to glue sniffing	-Staff	-Use sucker to suck away fumes -Use mask properly as to be air tight around edges of mask -Use goggles	-Observation & reinforcement -Incidence reporting.
	<i>Amalgam Mixing & handling</i>	Chemical -Mercury vapor	-Mercury toxicity	-Patient -Staff	-Use face mask, goggles and gloves during processing. -Use amalgam capsules to avoid spillage	-Incidence reporting.
	<i>Drilling & Sawing Bone</i>	Physical -Projectile -Noise	-Eye Injury -Hearing problem	-Staff	-Use goggles -Use ear-plugs if prolong exposure. -Reduce exposure to noise to less than 8 hours / day -Noise level should not be more than 80Db	-Incidence reporting -Monitor scheduled Planned Preventive Maintenance of drills, burs and saws

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Operating Lights</i>	Physical -Thermal -Glare	-Sweating -Cross infection -Eye strain -Headache	-Staff	-Maximize distance of lights surgeons -Lights should be anti-glare emit cold light -Light intensity should be adjustable to reduce glare	-Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of all equipment
	<i>Laser Procedures</i>	Physical -Thermal	-Fire -Burns -Eye injury	-Staff -Patient	-Use laser goggles -Trained staff to handle equipment	-Observation & reinforcement -Incidence reporting.
	<i>Phototherapy</i>	Physical -Thermal -Glare	-Burns -Eye strain -Headache	-Patient -Staff	-light distance not less than 45cm from patient except when using billi-blanket. -Use eye pad for patient -Stop phototherapy when doing other procedures on patient -Shield photo therapy unit with cloth -Avoid staring into light	-Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
Hospital Environment	<i>General Safety</i>	Physical -Darkness -Lonely pathway -Secluded area -Drain & holes	-Theft -Robbery -Rape -Injury	-Staff -Patient	-Pathways and roads should be well lit -Female staffs should come and go in groups of more than two -Do not wear heavy jewellery -Security to be more frequent along probable areas -Drains & Holes to covered	-Incidence reporting.
	<i>Patient's Valuables</i>	Physical -Robbed -Stolen -Lost -Missing	-Depressed -Complaints	-Staff -Patient	-Patients with valuables to be given advice to take instructions only from staffs in uniform. Patients should be advised to reconfirm with staffs if suspicious. -Patients should be advised to handover valuables to next of kin for safe keeping immediately. -Care of patient's valuables protocol formulated. -Do not accept property for safe keeping if next of kin available.	-Incidence reporting.
	<i>Safety During Maintenance Work</i>	Physical -Stolen -Damage	-Complains -Breach of Akta Rahsia	-Staff	-Monitor & supervise cleaners & maintenance workers. -Cleaners & maintenance workers not to be left alone in offices.	

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Borrowing Hospital Property for Patient Care</i>	Physical -Wheelchair -Identity Card Psyco-social -Stress -Complaints	-Lost -Stolen	-Staff -Patients	-Only I.C. of applicant accepted & not any other document. -I.C. to be kept locked. -I.C. & wheelchair should be signed in & out.	-Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of ambulances and transport vehicles
	<i>Transportation Ambulances & Patient Transport Vehicles</i>	Physical -Bald Tyres -Defective breaking system -Un-cushioned interior -Noise Bumpy	-Accident -Injuries -Anxiety -Nausea & Vomiting	-Staff & relatives -Patients	-Daily checks on tyres and breaking system -Interior of all vehicles not requiring the use of safety belts to be padded and cushioned -Air tight windows with proper Air-conditioning & ventilation -Air suspensions for vehicles	-Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of ambulances and transport vehicles

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<p><i>Use of Electrical Appliances, Equipment and Pipelines Gases</i></p> <ul style="list-style-type: none"> -Incubators -Radiant Warmer -Monitoring Appliances - UVL Light -IRR Lights -IPT Traction -ICT Traction -Sewing -Fluid therapy -Tincture -POP Cutter -Span & Heat Gun -Bo bath Table -Lido 	<p>Physical</p> <ul style="list-style-type: none"> -Fire -Thermal -Electricity -Falls -Dust <p>Psycho-social</p> <ul style="list-style-type: none"> -Noise 	<ul style="list-style-type: none"> - Hyperthermia -Burns -Injury -Electrocution -Irritation of eye/nose & respiratory problem <ul style="list-style-type: none"> -Stress -Insomnia -Depression 	<ul style="list-style-type: none"> -Staff -Patient <ul style="list-style-type: none"> -Patient 	<ul style="list-style-type: none"> -Appliance instruction manual should be available at all times with the appliance and read before usage by new staffs or those who have not handled it before -Set alarm range for minimum & maximum where applicable -Use anti-static footwear -Use ceiling mounted appliances -Use electrical and pipeline outlets from ceiling mounted pendants -Wires & hoses running on floor to be covered with cloth to prevent tripping -Use scavenging system for all anesthetic gases -Use POP Cutter fitted with vacuum -Use face mask when using POP cutter -Electrical appliances to be switched off & unplugged when not in use. -Fire extinguisher should be available at all times. -Reduce volume of vital sign monitors -Night sedation for patients if necessary. 	<p>Observation & reinforcement</p> <ul style="list-style-type: none"> -Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of appliances

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<p><i>Use of Other Appliances & Equipment by Patient/on Patients & by Staffs</i></p> <ul style="list-style-type: none"> -Hand Exercise -Monark -Sanding Board -Cutting Splints -Balancing Board -Trampoline -Therapy Ball -Rubber Floors Mats -Rollator -Standing Frame -Mattress & Ball Pool -Small Toys 	<p>Physical</p> <ul style="list-style-type: none"> -Falls -Spring Broken -Rubber Band -Dust -Cutting tool -Swallow Toys <p>Biological</p> <ul style="list-style-type: none"> -Body fluids 	<ul style="list-style-type: none"> -Injury -Irritation of eye/nose & skin -Respiratory problem -Wrist strain & sprain -Chocking <p>-Cross infection</p>	<ul style="list-style-type: none"> -Staff -Patient <p>-Patient</p> <p>-Staff</p>	<ul style="list-style-type: none"> -Appliance instruction manual should be available at all times with the appliance and read before usage by new staffs or those who have not handled it before -Proper demonstration to patient on proper usage -Patient to be accompanied by therapist and assistance given for the needy -Equipment should be secured properly so that it does not fall off -Periodic sharpening of cutting tools -Scissors for left handed person -Hard surfaces, frames & rails to be padded -Therapist should be trained in CPR -Extra supervision for paediatric Patients <p>-Benches/couches to be covered by clean linen and changed if soiled or used by high risk patients.</p>	<p>Observation & reinforcement</p> <ul style="list-style-type: none"> -Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of appliances First Aid Box should be available <p>-Incidence reporting.</p>

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Environmental Factors during Invasive procedures and storage of sterile equipment & Aseptic Dispensing Procedures</i>	Physical -High Temperature -Low Temperature -High Humidity -Ventilation	-Cross infection -Hypothermia -Burns -Cross Infection	-Staff -Patient -Geriatric, Neonates & Infants -Staff -Patient -Staff -Patient	-Maintain temperature between 18-22°C -Check temperature three times a day -Use warm blankets and warm Mattress -Extra precaution when using volatile gases and diathermy machines Maintain air exchange @ 25 cycles/hour	Observation & reinforcement -Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of air conditioners & ventilation system.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>X-Ray Imaging & Fluoroscopy</i>	<p>Physical</p> <ul style="list-style-type: none"> -Radiation -Weight of lead apron when worn <p>Chemical</p> <ul style="list-style-type: none"> -Fumes from solution & spillage -Hydroquinone -Pot. Hydroxide -Pot. Carbonate -Pot. Sulfite -Ammonium Thiosulphate -Sod. Sulphate -Aluminium Sulphate -Sulfuric Acid -Dust from Walles 	<ul style="list-style-type: none"> -Mutagenicity -Terratogenic -Somatic & Genetic effect -Erythemia -Cataract -Leukemia -Backache -Injury -Eye & skin irritation -Breathing disorders -Headache due to odour 	<ul style="list-style-type: none"> -Staff -Staff -Staff 	<ul style="list-style-type: none"> -Hazard Signage & Light -Use Personal Protective Equipment as per appendix. -Notification to all present before each imaging -Staffs & patients to be a minimum distance of 2 meters from radiation source in areas imaging done outside Imaging department -Use lead screens -Imaging to be done only in designated area -Use lighter lead aprons -Use 2 piece dress/skirt type lead aprons. -Proper hand washing after handling wallets. -Use face mask, gloves & goggles. -Dark room to have exhaust fan & flooring should be dry. 	<ul style="list-style-type: none"> -Incidence reporting. -Analysing & calibrating radiation film monitoring badge every month by MINT -Hazard leave

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Steam Autoclaving/ Decontamination & Drying</i>	Physical -Steam -Thermal	-Scalds -Burns	-Staff	-Only Trained staffs to operate -Use insulated gloves, face mask and face shield. -Personal protective equipment to be worn as follows:- Heavy Duty Rubber Gloves Face Shield	-Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of autoclaves -Yearly certification from JKKP should be sought for autoclaves.
	<i>Handling & Washing Contaminated Surgical Instruments</i>	Biological -Blood -All body fluids, secretions and excretions except sweat -Tissues	-Cross infection	-Staff	Water proof Aprons Boots -Instruments to be soaked & decontaminated with disinfectant prior to handling -Instruments used in biohazard cases received in double biohazard bags -Thermal washer disinfectant @ 90°C used to minimize handling	-Incidence reporting.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Handling & Washing Contaminated Surgical Instruments</i>	Chemical -Detergent -Disinfectant	-Skin allergy -Eye Irritation	-Staff	-Use gloves, plastic aprons and goggles when handling. -Hand washing after handling -Chemicals to stored in designated area with enclosed shelves and properly labeled	- Incidence reporting.
	<i>Loading & Unloading of Sets into dryer & autoclave & storage of sets</i>	Ergonomics -Lifting -Arranging Physical -Falling heavy Objects	-Backache -Sprain & Strains -Injury	-Staff -Staff	-Use carrier system -Sets not more than 7kg each -Use step up stools -Heavier sets to be stored at the bottom shelf -Training on lifting techniques/body mechanics -Use safety boots -Wear Ear Plugs -Use face Mask -Install Exhaust fan -Minimal handling of linen -Linen to be pre-folded by launder on delivery.	Observation & reinforcement -Incidence reporting.
	<i>Packing of Linen, Soft Goods & Sets</i>	-Noise -Lint & fabric fibres	-Conductive Deafness -Allergy -Rhinitis -Eye irritation	-Staff		-Yearly assessment on hearing.

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Hydrotherapy</i>	Physical -Fall -Thermal Chemical -Chloride	-Drowning -Scalds -Skin irritation	-Staff -Patient -Relatives -Patients	-Floor of pool to be made of non-slip material. -Pool surrounding to be fitted with hand rails -Use floats & proper aids while in pool. -Temperature of water to be maintained between 34-37°C -Free Chloride level of 0.5 – 2.5 p.p.m -pH level between 7.2 – 7.8 -Room temperature is controlled at 25°C -Therapist is not in the water for more than 1½ to 2 hours without a break -Drinks given to patients & therapist after session -Shower before & after pool sessions.	-Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of pool to avoid slippery floor -Daily check & record temperature of pool

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Process of Washing & Cutting Raw Products for Cooking</i>	Physical -Slippery floor -Knives	-Injury -Wrist strain & Sprain	-Staff	-Appliance instruction manual should be available at all times with the appliance and read before usage by new staffs or those who have not handled it before -Equipment should be secured after use -Periodic sharpening of cutting tools -Flooring to be kept dry -Use anti-skid footwear	-Observation & reinforcement -Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of appliances First Aid Box should be available
	<i>Cooking Boiling, Frying & Washing Equipment</i>	Biological -Body fluids	-Contamination	-Food		-Incidence reporting -Conform to Food Act -NIA 49
		Chemical -Gas -Detergent	-Fire -Explosion -Contamination	-Staff -Food	-Staffs to trained on safe handling & usage of gas cylinders	-Observation & reinforcement -Incidence reporting. - Monitor scheduled Planned Preventive Maintenance of appliances First Aid Box should be available

WORK AREA	TASK	HAZARD	RISK	PERSON @RISK	CONTROL MEASURES	SURVEILLANCE
	<i>Floor Cleansing</i>	Physical -Slippery floor	-Fall & Injury	-Staff -Patient	-Slippery floor signage and cording of area during cleaning & drying. -Immediate drying equipment available. -Floor to be dry before signage is removed -Use anti-sid footwear	-Observation & reinforcement -Incidence reporting.
	<i>Limitation of Visitors to Critical Care Areas</i>	Physical - Overcrowding -Air pollution	-Cross infection	-Staff -Patient	-Limit visitors to two visitors per patient at any one time -Advise to visitors on status of patient	-Incidence reporting.
	<i>Security Sealing</i>	Physical -Sealing Envelopes	-Fire -Injury	-Staff	-Use sealing stickers instead of heat sealing wax	-Incidence reporting.