

I am taking a position for my health!



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Wthe healthcare professionals, give a lot, this is a known fact. We dedicate our heart and soul to taking care of the Québec population, shouldering the health network, when we are often at the end of our rope. We take on the problems, the flaws and the deficiencies of the network, and we show great imagination and great flexibility when the time comes to find solutions which will let us continue to give care.

Unfortunately, this is too often at a cost to our health and our safety.

Once again, it seems we need to say “That’s enough. Patient care comes first.” It is not always up to us, nurses, licensed practical nurses, respiratory therapists and perfusionists, to compensate for the problems and to adapt to the constraints imposed by a context of austerity. We have a meaningful voice, we have ideas! Our needs and our limits have to be considered more, both individually and collectively, in order to exercise our full potential.

We, the healthcare professionals, also have to take care of ourselves: we have to take a position for our health!

Our professional life is an important part of our everyday life. So, if the relationship we have with our work environment is not adequate or optimal, our well-being and our health can be threatened. We are therefore not able to get the most out of our abilities, and it is possible that the objectives which we have to pursue, by the nature of our work, are not completely attained. This is what ergonomics, a very useful science in our setting, teaches, the importance of identifying the risk factors which can compromise our health and our safety in the interaction with our professional environment, and ensure that they are controlled for the benefit of everyone.

Hoping that the 2015 Annual OHS Week will be an opportunity for us, the members of the FIQ, to learn about the importance of the relationship we have with our work, and that from there, we have to take a position for our health!

Sylvain Allard, Patrice Dulmaine, Isabelle Groulx, David Lambert, JeanLouis Pelland and Céline Tranquille, members of the OHS Committee

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The reorganization of work projects taking place in my institution are playing havoc with my way of working. I am experiencing a lot of insecurity and stress.”



When the time comes to analyze the relationship between an individual and her work, several disciplines prove to be interesting and useful. Among them is ERGONOMICS.

ERGONOMICS (or human factors) is the scientific discipline concerned with interactions among humans and other elements of a system (e.g. the tools, equipment, products, tasks, organization, technology, and environment). The profession applies theory, principles, data, methods and analysis to design in order to optimize human well-being and overall system performance. A science that deals with designing and arranging things so that people can use them easily and safely. The parts or qualities of something's design that makes it easy to use.*

Contrary to what we might think, ergonomics is not a question of postures, movements or the layout of a workspace. Ergonomics can be separated into three branches**, which prove to be particularly pertinent when dealing with the work activity of the healthcare professionals and with what can positively or negatively influence their health and their safety:

“Sometimes, I feel more tired than usual because of the fast work pace that I must endure. I am aware that this can affect my judgment and my vigilance. I want something to be done to help me, because I take the safety of my patients seriously.”



1) **PHYSICAL** ergonomics is surely the most common known branch of this science. The connections between the physiological and biomechanical characteristics of a person and her physical work activity are analyzed. Examples: moving patients, exposure to toxic substances, repetitive movements, etc.



2) **COGNITIVE** ergonomics is a branch which addresses the cognitive processes that a person uses when she works. Examples: decision-making, problem resolution, mental workload, performance, professional stress, human reliability, etc.

3) ORGANIZATIONAL ergonomics refers to the system in which a person exists. This then includes rules, work process, organizational structure, in short what influences and determines the way a person works. Examples: schedule, teamwork and collaboration, distribution of tasks and responsibilities, communication, organizational culture, management style, optimization projects, etc.



These three branches illustrate well all the complexity of the work activity, which is obviously not static and varies with changes to the context, the characteristics of the person, her health status and the objectives to achieve. However, **it is the understanding of this dynamic which makes it possible to identify the risk factors for the health and safety of the person.**

Choosing the angle of ergonomics for analyzing the individual/work/OHS relationship leads to realizing the importance of **adapting, as much as possible, the work to the person, and not always force the person to adapt to the work**, with the purpose of taking care of her health and her safety. She must be allowed to use her abilities to the utmost, while taking into account her limits, based on the professional and organizational objectives which she must achieve.

“I am overworked. Often, I do not take the time to move my patients safely. I am sure that things can be improved, but until then, can it aggravate my back and shoulder problems?”



Taking a position for my health...

It is looking to improve the relationship which she has with her work every day.

It is finding a balance between the goals to achieve and what we are realistically able to accomplish as an individual, both from the physical and psychological point of view.

It is being attentive to what influences her way of working, her health and her safety.

It is searching for and improving the positive effects and eliminating, or at least controlling, the negative effects.

It is first and foremost taking care of herself to be at her full potential.



I am taking a position for my health!

I deal with the situations in a healthy and safe way. I do not adapt at whatever cost, I do not attempt to compensate for all the problems that come up.

I set realistic goals and I establish my priorities. I am aware that there are limits to what I can do, and, when I feel that I have reached them and that it could become dangerous for myself, my colleagues and for my patients, I say so.

I take care of myself. I take my meal periods, I give myself breaks. I give myself the authority to do the little things which allow me to decompress and clear my head, if only for a few moments.

I know how to recognize the physical, cognitive and organizational risks in my work. I denounce them, I report the dangerous situations that I see.

I count on support and teamwork.

I have a positive and constructive attitude. I am innovative, I propose solutions for the problems. I trust myself.

I count on my skills and my expertise. I ask for the necessary training and professional improvement activities.

I count on what pleases me and what gives meaning to my work.

I get involved in my environment, I make my opinions, my ideas heard. I make my voice heard.

And even many other things! Up to me to identify them and apply them!



Over time the healthcare professionals have found the means to deal with a network in constant change. Each one of them has deployed different strategies which have, collectively, let them shoulder a network that the decision-makers are struggling to streamline and under-fund, under the pretext of precarious public finances. The healthcare professionals have often taken on the performance expectations which are reflected in the cutbacks and a panoply of optimization projects and re-organization of work. Are they successful? Yes, but too often at a cost to their health and their safety, at least for several of them. The ailments that they increasingly suffer attest to this: professional burnout, stress, musculoskeletal disorders, etc.

As if the pressure to always have to do more with less isn't already part of their daily lives enough, now the nurses, licensed practical nurses, respiratory therapists and perfusionists are subjected to an additional source of stress. In fact, the major transformations which are currently underway in the health network have made it that they are, once again, caught up in a spiral of mergers and revision of the ways of doing things, where it is expected that, as "usual", she show a great capacity for adaptation and dedication.

“Positions have been eliminated on my unit and I am often obliged to work overtime. I feel like I am going to break down.”

This major turmoil will affect many. And with reason! Any reform, small or big, comes with its share of opportunities, but also with insecurity, anxiety, adjustments, even demotivation. The benchmarks change, the ways of doing things are transformed for those who, reform or not, must continue to give care every day.

In such a context, it becomes more crucial than ever that the healthcare professionals are vigilant, that they set their limits and that they take a position for their health, in a constructive manner. Are the expectations for them too high? Are they exposed, during this transformation, to physical, cognitive or organizational risks likely to compromise their health and their safety? Are they obliged to adapt at all cost, without their limits, their needs being taken into account enough? Are we ensuring that their capacities and their potential are used to the utmost?

Obviously, there will always be a need for some flexibility and resilience: it is in the nature of any work, particularly in the public health network. However, this should not be at any cost. Ergonomics teach that what we are able to do has to be taken into account, that the work has to be adapted as much as possible as a result, and not necessarily the opposite as we have a tendency to think. It is a question of the well-being of the healthcare professionals, while letting the latter carry out their role in an optimal fashion.

To help achieve an ergonomic balance, the healthcare professionals can – and even must – turn to the resources likely to provide information and support when the need is felt. If the expectations of them are unrealistic, if they do not have the necessary tools, if their limits and capacities are not respected, in short if their health and safety are compromised, it is critical that they ask for help. Local union team, OHS joint committee, employee assistance programme, information sources, such as the *Association paritaire pour la santé et la sécurité du travail du secteur des affaires sociales* (ASSTSAS), many resources exist and can prove valuable. Do not hesitate to ask for support, at any time, even more so when major changes are made to the work dynamic and the ways of doing things.



Every healthcare professional has the power to influence and to ensure that her health and safety are protected, while practising her profession to the best of her abilities. And why not take advantage of the opportunity to innovate and try to improve things! That is also taking a position for her health!



“I love my profession, even if it is not always easy. I am constantly being asked to take on more responsibilities, but without necessarily giving me the tools to do it. I would really like to be able to carry out my role optimally!”

“A few years ago, I had a work accident. There are some things that I can no longer do. Despite that, I would like to continue to practice my profession and, fortunately, a way was found for me to do that, while taking into account my limits!”



Notes

* www.cndp.fr/agence-usages-tice/telechargement/ergonomie_texte.pdf (Consulted on February 10, 2015).

www.beswic.be/fr/topics/ergonomie/ergonomie-sur-le-lieu-de-travail-en-general/qu-est-ce-que-l-ergonomie (Consulted on February 10, 2015).

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** www.iea.cc/whats/index.html (Consulted on February 19, 2015).

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