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# Advanced Healthcare Workplace Health and Safety Training Course

2 – 13 May 2027
Kuala Lumpur

# Advanced Healthcare Workplace Health and Safety Training Course

**Ref:** 312_10467 **Date:** 2 – 13 May 2027 **Location:** Kuala Lumpur **Fees:** 8000 GBP

Healthcare Workplace Health and Safety is the focus of this 2-week advanced training course for hospital safety officers, nurse managers, facilities leads and infection prevention leads, who leave with a staff safety improvement plan for their hospital or clinic. Staffing pressure, rising violence against clinicians and exposure to sharps, hazardous drugs and pathogens make staff protection a condition of safe patient care. Jupiter Prime Training delivers this course for healthcare safety leaders.

## Why Healthcare Workplace Health and Safety Matters Now

Three groups shape staff safety in hospitals and clinics today: clinicians working under heavier patient loads and longer shifts, patients and visitors whose frustration increasingly turns into aggression, and accreditation surveyors and insurers who link staff injuries to patient safety. Facilities that protect staff keep experienced nurses, reduce needlestick and back injuries and contain outbreaks; those that neglect it face absence, turnover and errors at the bedside. The course rests on ISO 45001 Occupational Health and Safety Management Systems, applied to clinical departments, laboratories, pharmacies and support services.

## Who Gains Most from Healthcare Workplace Health and Safety

- Officers who run hazard identification and staff injury reporting across clinical and support departments
- Nurse leaders responsible for ward routines, patient handling practice and staffing decisions
- Infection prevention leads who manage exposure to blood, body fluids and airborne pathogens
- Facilities and engineering leads who control plant, waste, medical gases and building hazards
- Occupational health leads who manage staff screening, vaccination and return-to-work cases

The greatest gain comes when a safety officer, a nurse leader and an infection prevention lead from the same facility attend together, because staff protection in healthcare crosses all three remits.

## Healthcare Workplace Health and Safety Capabilities

Participants move from department-by-department fixes to a facility-wide picture of the hazards that injure clinicians and support staff.

- Assess clinical and support area hazards with a healthcare risk matrix — department heads and safety committee
- Design a sharps injury prevention scheme with safer devices and disposal routes — procurement and nursing leaders
- Apply safe patient handling assessments and equipment selection — ward managers and physiotherapy
- Build a workplace violence prevention plan with alarms, de-escalation and post-incident support — security and senior management
- Specify controls for hazardous drugs, chemicals and biological agents — pharmacy, laboratory and infection prevention
- Communicate staff injury and wellbeing indicators to the hospital board — executive and clinical leadership

## Key Healthcare Workplace Health and Safety Terms

- Sharps injury — a cut or puncture from a needle, scalpel or other sharp item that may expose staff to bloodborne pathogens.
- Safe patient handling — the use of assessment, equipment and technique to move patients without manual lifting strain on staff.
- Hazardous drugs — medicines such as cytotoxic agents that can harm staff through skin contact, inhalation or ingestion during handling.
- Bloodborne pathogen — an infectious organism carried in blood or body fluids, transmitted to staff mainly through sharps and splashes.
- Workplace violence — verbal abuse, threats or physical assault against staff by patients, visitors or colleagues.
- Post-exposure prophylaxis — preventive treatment given promptly after a significant exposure to reduce the chance of infection.

## Healthcare Workplace Health and Safety Day by Day

## Day 1: Staff Safety in the Healthcare Landscape

- Healthcare Occupational Hazard Profile — Why Clinicians Face Higher Injury Rates
- Link Between Staff Safety and Patient Safety — Shared Root Causes
- ISO 45001 in Clinical Settings — Adapting the Management System
- Accreditation Expectations for Staff Safety — Survey Readiness
- Departmental Hazard Mapping — Wards, Theatres, Laboratories and Support Areas

## Day 2: Healthcare Risk Assessment

- Healthcare Risk Matrix Design — Severity Scales for Staff Harm
- Task-Based Risk Assessment on Wards — Nursing and Allied Health Tasks
- Hierarchy of Controls in Clinical Areas — Elimination to Protective Equipment
- Risk Registers for Hospital Departments — Ownership and Review
- Safety Walkrounds by Clinical Leaders — Finding Hidden Hazards

## Day 3: Sharps and Bloodborne Pathogens

- Sharps Injury Epidemiology — Devices and Procedures Involved
- Safety-Engineered Devices — Selection Trials With Frontline Staff
- Sharps Disposal and Container Placement — Reducing Handling Steps
- Exposure Response Protocol — First Aid, Reporting and Prophylaxis
- Vaccination and Immunity Records — Protecting Exposed Staff Groups

## Day 4: Safe Patient Handling and Ergonomics

- Patient Mobility Assessment Tools — Matching Equipment to Dependency
- Hoists, Slide Sheets and Transfer Aids — Equipment Planning
- Bariatric Patient Handling — Space, Equipment and Staffing
- Musculoskeletal Injury Reporting — Early Signs in Nursing Staff
- Ward Layout and Workstation Ergonomics — Reducing Awkward Postures

## Day 5: Workplace Violence Prevention

- Violence Risk Assessment by Department — Emergency, Mental Health and Wards
- Environmental Design and Alarm Systems — Panic Buttons and Safe Rooms
- De-Escalation Techniques — Calming Agitated Patients and Visitors
- Lone Worker and Home Visit Safety — Community Healthcare Staff
- Post-Incident Support and Reporting — Caring for Assaulted Staff

## Day 6: Hazardous Drugs and Chemicals

- Cytotoxic Drug Handling — Preparation, Administration and Spills
- Closed System Transfer Devices — Limiting Pharmacy Exposure
- Disinfectants and Sterilants — Respiratory and Skin Hazards
- Anaesthetic Gas Exposure — Theatre Scavenging and Monitoring
- Safety Data Sheets in Clinical Areas — Chemical Inventories and Training

## Day 7: Biological Agents and Infection Risks to Staff

- Airborne Pathogen Controls — Respirators, Fit Testing and Isolation Rooms
- Laboratory Biosafety Practice — Specimen Handling and Containment
- Outbreak Staffing Plans — Protecting Staff During Surges
- Clinical Waste Segregation — Handling and Storage Hazards
- Staff Health Screening — Fitness for Work in Clinical Roles

## Day 8: Facilities, Plant and Support Services

- Medical Gas Systems Safety — Oxygen Enrichment and Cylinder Handling
- Radiation Safety in Imaging — Staff Dose Monitoring
- Kitchen, Laundry and Portering Hazards — Support Staff Protection
- Slips, Trips and Falls in Hospitals — Floors, Spills and Lighting
- Contractor Work in Live Clinical Areas — Permits and Infection Control

## Day 9: Incident Reporting, Wellbeing and Assurance

- Staff Incident Reporting Systems — Encouraging Near-Miss Reports
- Incident Investigation in Healthcare — Human Factors Methods
- Fatigue and Shift Pattern Risk — Long Shifts and Night Work
- Staff Wellbeing Schemes — Burnout, Psychological Support and Resilience
- Staff Safety Indicators for the Board — Injury Rates and Leading Measures

## Day 10: Practising the Staff Safety Improvement Plan

- Department Hazard Map Applied — Priority Risks for One Facility
- Sharps and Patient Handling Controls Applied — Action Selection
- Violence Prevention Measures Applied — Department-Level Plan
- Wellbeing and Reporting Indicators Applied — Board Dashboard Draft
- Staff Safety Improvement Plan — Final Plan and Peer Challenge

## Applying Healthcare Workplace Health and Safety After the Course

- Run a sharps injury review for the last quarter using the exposure response protocol and present safer device options to procurement and nursing leaders.
- Complete a violence risk assessment for the emergency department with the security lead and agree alarm, layout and de-escalation actions.

## Healthcare Workplace Health and Safety Questions FAQ

### What is Healthcare Workplace Health and Safety and why does it matter now?

Healthcare Workplace Health and Safety protects clinicians and support staff from sharps, patient handling strain, violence, hazardous drugs and pathogens. It matters now because staffing pressure and rising aggression make staff injuries a direct threat to patient care.

### Which roles gain most from Healthcare Workplace Health and Safety training?

Hospital safety officers, nurse leaders, infection prevention leads, facilities leads and occupational health leads gain most. You benefit if you are responsible for protecting staff in wards, theatres, laboratories, pharmacies or community services.

### How does Healthcare Workplace Health and Safety differ from general facilities safety training?

General facilities safety training covers buildings, plant and contractors. This course focuses on clinical hazards that injure healthcare staff, such as sharps, patient handling, aggression, cytotoxic drugs and airborne pathogens, with cases from hospitals, clinics and laboratories.

## What do you bring back from Healthcare Workplace Health and Safety training?

You bring back a staff safety improvement plan for your facility, with a department hazard map, sharps and patient handling controls, a violence prevention plan and a board dashboard of injury and wellbeing indicators.

## Healthcare Workplace Health and Safety: The Way Forward

The staff safety improvement plan first informs which clinical departments receive priority controls for sharps, patient handling and violence. Safety officers, nurse leaders and infection prevention leads use it to coordinate actions across wards, theatres and support services. After its first use, the wellbeing indicators and the reporting culture deserve a fresh look, since under-reporting often hides the real picture.