



INFORMATION REPORT

TO:	Chair and Members Audit and Finance Committee
COMMITTEE DATE:	October 23, 2017
SUBJECT/REPORT NO:	Occupational Health and Safety (HUR17020)(City Wide)
WARD(S) AFFECTED:	City Wide
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SIGNATURE:	

Council Direction:

At the May 11, 2015 meeting of Audit, Finance & Administration Committee, Council asked for regular information updates on our Workplace Safety and Insurance Board (WSIB) experience, including identifying our lost-time injury rate, as well as areas that are having a higher number of incidents and provide strategies to reduce incidents addressing those areas. Council also requested that severity rates be included in the data. As such, Human Resources will continue to provide annual and semi-annual WSIB reports. The lost-time injury and severity rates are provided in the annual reports. This semi-annual report compares January – September (Q1 - Q2) results for 2015, 2016 and 2017.

Information:

- Lost time injuries increased by 35% in the first two quarters of 2017 compared to the same period in 2016 (128 to 173) and were 2% above 2015 levels (168 to 173)
- Shifts lost to new injuries increased by 31% in the first two quarters in 2017 compared to the same period in 2016 (742 to 977) but was down from the same period in 2015 (1,006 to 977)
- Musculoskeletal Disorders and Slips, Trip or Fall injuries are still the leading cause of injury. However, these injury types made up less of a percentage of the total injuries in 2017 compared to 2016.
- Motor vehicle accidents resulting in injury increased by 240% in 2017 compared to 2016 (from 5 to 17).
- Workplace mental health claims increased by 400% in 2017 compared to 2016 (from 2 to 10).
- Struck By and Struck Against claims were up by 44% in 2017 compared to 2016 (from 14 to 25).

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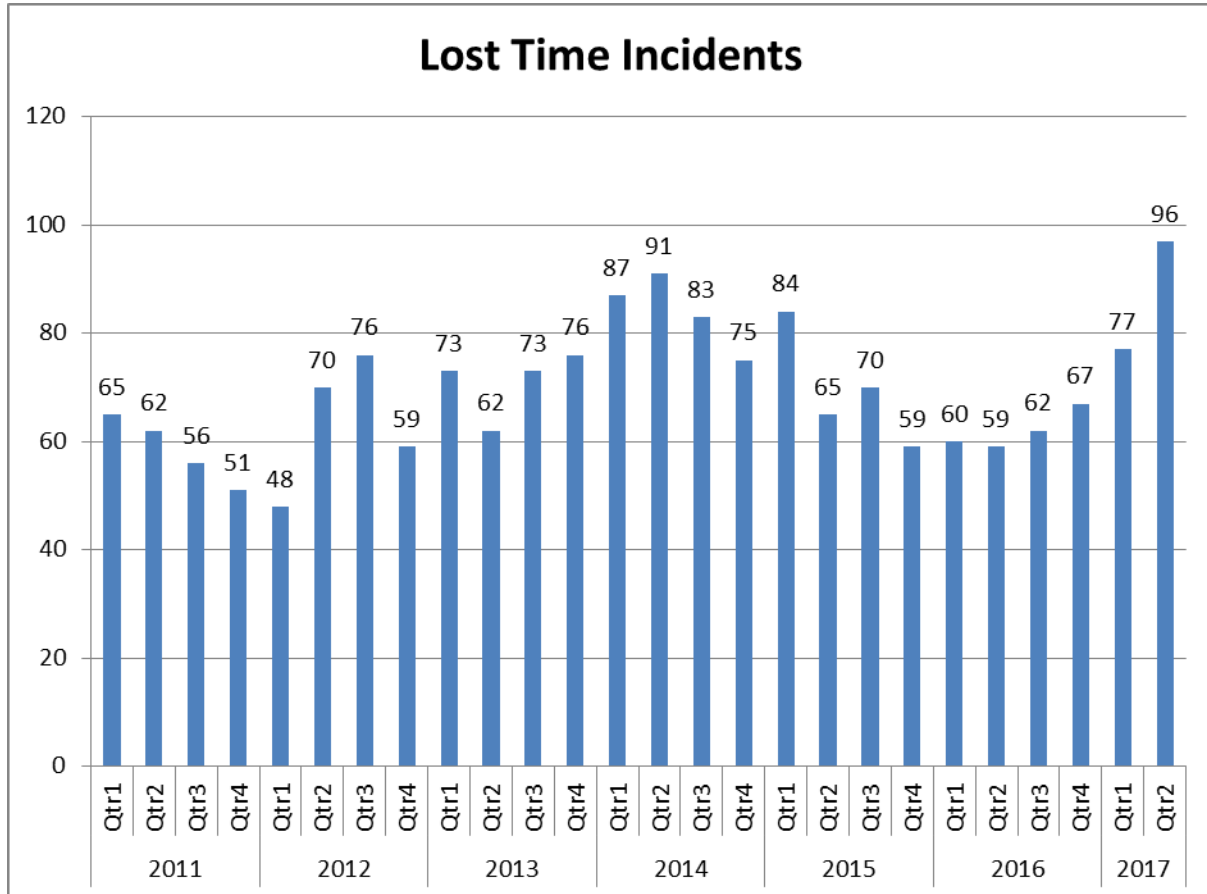
Table 1: Overall Lost Time Q1 - Q2 2015 to 2017

	New Lost-time Injuries			Shifts Lost, New Lost-time Injuries		
	2015	2016	2017	2015	2016	2017
Community & Emergency Services	86	53	82	349	283	362
Public Works	74	56	80	582	371	452
Planning & Economic Development	4	11	8	34	66	125
City Housing Hamilton	1	5	3	0	14	24
Corporate Services	1	1	0	38	1	0
Public Health Services	2	2	0	3	3	0
City Manager's Office	0	0	0	0	0	0
Corporation	168	128	173	1006	742	977

Overall, the City has experienced a rise in the number of lost time injuries and shifts lost in the first half of 2017 compared to the same period in 2016. This is a disappointing result especially given the substantial gains that were made by individual departments and collectively across the organization in reducing lost time injuries over the past few years.

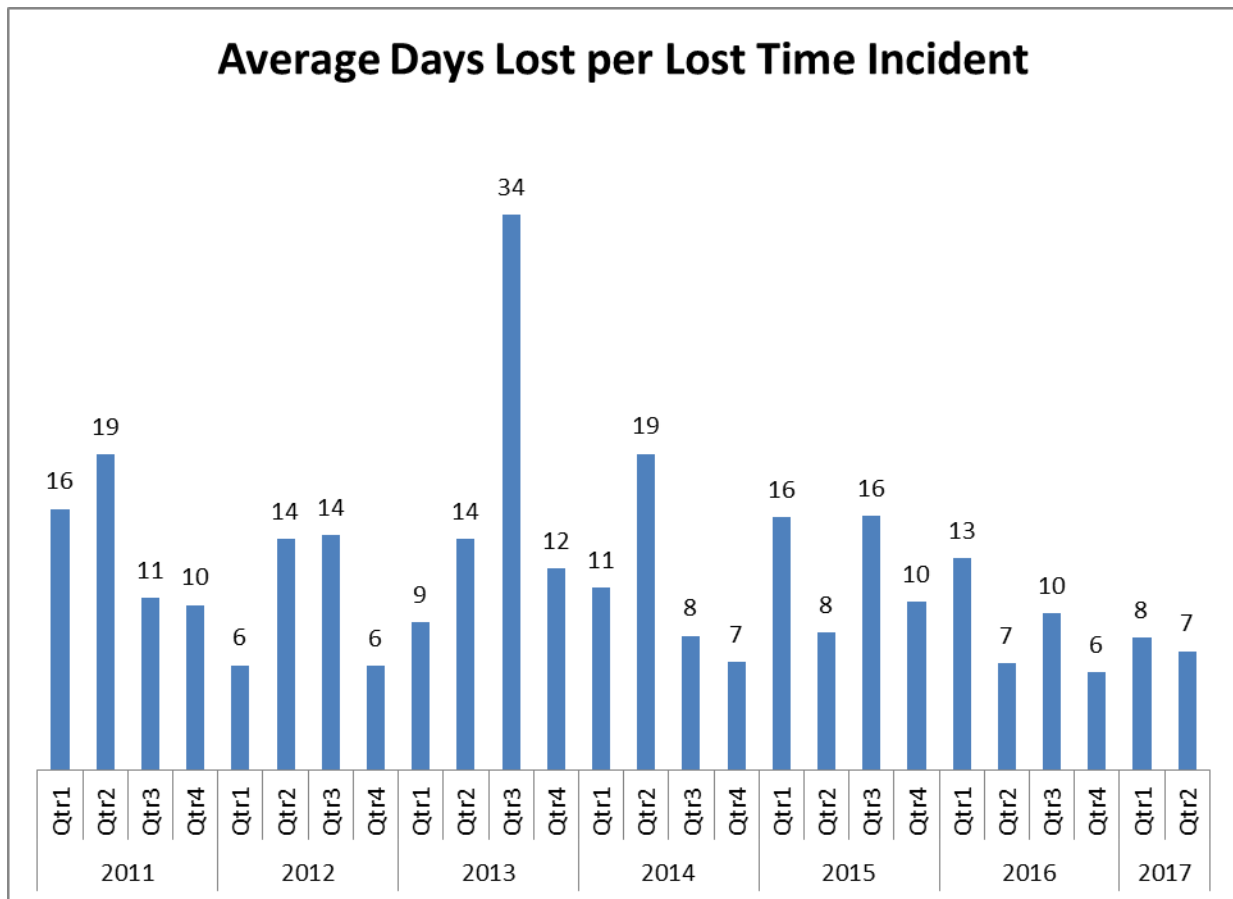
As noted in Table 1, increases in lost time for Community and Emergency Services and Public Works accounted for the overall rise in the number of claims. Within these departments, the increase in lost time was most notable in Hamilton Street Railway, up to 42 from 20 claims and Hamilton Paramedic Services, up to 43 from 23. Claims at the Lodges were also up to 25 from 19.

Graph 1: Lost time Incidents by Quarter Q1 2011 to Q2 2017



The above graph provides a longer term picture of occurrences of Lost Time Incidents since January 2011.

Graph 2: Average Days Lost per Lost Time Incident by Quarter Q1 2011 to Q2 2017



Average Days Lost provides an indication of the severity of the workplace injuries experienced by our employees. The average has been lower in the last two years.

Type of Injuries

The nature of workplace injuries is identified and tracked for each incident using workers compensation classification standards.

Table 2: Lost Time Injuries by Major Type Percentage Q1 - Q2 2015 to 2017

Injury Type by Percentage of Claims	2015	2016	2017
Musculoskeletal Disorder	43.62%	42.50%	35.39%
Slip, Trip or Fall	22.82%	24.17%	20.78%
Struck By	8.72%	9.17%	10.11%
Motor Vehicle Accident	6.71%	4.17%	9.55%
Mental Health	1.34%	1.67%	5.62%
Violence	1.34%	5.00%	5.62%
Struck Against	6.04%	2.50%	3.93%
Occupational Exposure - Chemical/Biological	3.36%	0.83%	2.25%
Caught In/On/Between Objects	2.68%	N/A	2.25%

Table 3: Lost Time Injuries by Major Type Count Q1 - Q2 2015 to 2017

Injury Type by Claim Counts	2015	2016	2017
Musculoskeletal Disorder	65	51	63
Slip, Trip or Fall	29	29	30
Struck By	13	11	18
Motor Vehicle Accident	10	5	17
Mental Health	2	2	10
Violence	2	6	10
Struck Against	9	3	7
Occupational Exposure - Chemical/Biological	5	1	7
Caught In/On/Between Objects	4	N/A	4

Table 2 shows the mix of injury classification for the most frequent injury type presented as a percentage of all claims for the period of Q1 - Q2 each year.

Table 3 shows the mix of injury classification for the most frequent injury type presented as injury claim counts for the period of Q1 - Q2 each year.

Musculoskeletal Disorders and Slips, Trips or Falls injuries are still the leading cause of injury. However, these injury types made up a less percentage of the total injuries in 2017 compared to 2016. For the past two years, efforts have been made to reduce the occurrence of injuries related to musculoskeletal disorders and slips, trips or falls. The results are encouraging in that these injury types are accounting for less of the total of all injuries.

On the other hand, motor vehicle accidents that resulted in worker injury were up 2017. These incidents primarily involved accidents where the employee was not at fault. These included city buses, waste collection vehicles, fire trucks pick-up trucks and light utility vehicles.

Work-related mental health claims are also up in Q1 and Q2 2017 from the same period in 2016. Extensive mental health training took place in Hamilton Paramedic Services and similar training is also being implemented in Hamilton Street Railway. The training encourages employees to recognize symptoms of poor mental health and to seek support and treatment. By reducing stigma and encouraging dialogue, it was expected that we would experience a rise in WSIB claims related to workplace mental health issues. As the City continues to roll out the mental health training into more departments, we are prepared for the possible increase in employees becoming more aware of their own mental health and relating poor mental health to work factors.

Struck By and Struck Against claims were up in 2017 compared to 2016. These claims occurred in Public Works, Community and Emergency Services, Planning and Economic Development and City Housing. The types of the objects striking the workers varied and no two were alike.

As noted above, increases in lost time for Community and Emergency Services and Public Works accounted for the overall rise in the total number of claims. Within these departments, the increase in lost time was most notable in Hamilton Street Railway, Hamilton Paramedic Services and Lodges.

These groups share similar characteristics that may account for the nature of the injuries but not necessarily the cause of the rise in 2017. These characteristics include:

- Shift work, including weekends
- Unpredictable client behaviour including violence
- Variable and changing work conditions
- Physical job demands including lifting, awkward positions, prolonged sitting or standing
- Psychological job demands

Macassa and Wentworth Lodges

Due to joint efforts and the attention placed on workplace ergonomics, management and employees at Macassa and Wentworth Lodges have realized a decrease in musculoskeletal injuries (sprains and strains) in 2017 compared to past years. The Lodges have invested in equipment that ensures staff has lifts, bathing chairs, tubs, adjustable beds and other assistive devices to utilize to prevent musculoskeletal disorders (MSDs). In collaboration with the Institute for Work & Health and the Public Services Health and Safety Association, the Lodges are participating in the EPIC (Everyone Participating In Change) program that improves staff engagement and key deliverables on a frontline-driven project focused on MSDs. Initiatives that focus on eliminating ergonomic hazards, such as providing new ergonomically-designed mobile charting stations for nursing staff and redesigning the main kitchen and serveries used by dietary staff, are also being implemented this year.

While the number of MSDs are decreasing, management also identified an increase in other types of incidents. These included:

- Struck by an object
- Struck against an object
- Violence

Resident acuity (medically complex, bariatric, cognitive impairment and responsive behaviours), a greater focus on reporting of incidents, and accuracy of coding of incidents resulted in an increase in reported injuries. Since many of the injuries are the result of staff interactions with residents, there is a renewed focus on reducing violence and other physical incidents from occurring and to mitigate the risk to staff and residents. Management and workers continue to work with community partners to develop best practices on providing services safely to residents with responsive behaviours. Community partners include local hospital systems, geriatric psychiatry, and the provincially funded Behavioural Supports Ontario team.

Hamilton Street Railway (HSR)

HSR management is aware of the increase in work-related lost time injuries amongst its workforce. The injuries primarily affect bus operators and a number of initiatives and strategies are being applied to HSR operations. They include:

- People Leaders have been trained in the Mental Health of Canada's The Working Mind (TWM) program. Front-line staff will begin training in the same program in the near future. Together, management and workers will be able promote mental health, reduce the stigma of mental illness and increase individual resilience.
- As technologies change and new equipment is brought online, HSR management has been working with the joint health and safety committee to get the Bus Operator input in order to help control operator exposure to potential hazards. In particular, much attention is being paid to the ergonomics of the operator's compartment to ensure that controls are properly located and neutral body positions are maintained.
- New seating is being installed for all Bus Operators that will provide better comfort and assist with eliminating driving hazards associated with prolonged sitting.
- Video cameras are being installed on all buses to serve both as a tool to investigate incidents and to act as a deterrent to bad behaviour and physical action by passengers
- HSR management is looking at opportunities to more effectively use temporary modified duties to keep workers at work after an injury. This will include opportunities for meaningful work that will assist employees in returning to regular duties as soon as possible.

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- New recruitment tools are being considered that will help assure potential Bus Operators have the right nature and skill-sets to succeed on the job and are able to react appropriately to challenging situations.
- HSR management is planning on increasing operator awareness of good body mechanics through tip-sheets, posters, reminders, bulletins, additional training and individual coaching.

Hamilton Paramedic Services (HPS)

- There was an increase in new mental health and stress related claims and reconsideration by WSIB of old claims under new presumptive legislation for PTSD. Management continues to focus its efforts on mitigating the impact of work on the mental health of paramedics. This includes the training of all staff in the Road to Mental Readiness Program (completed) and the implementation of a peer support team (selection and training have been completed, activation is pending).
- Although the number of musculoskeletal disorders has increased from last year, the number is only slightly above the prior year. As a percent of all reported claims, MSDs now account for only 46% of claims, down from the previous 65%. The installation power stretchers continues to have a positive impact. None of the reported MSD claims in 2017 were related to the stretcher. Further, while the number of claims is up as result of other ergonomic issues (awkward lifting and positions) the average days lost per new claim is lower. HPS management is working on other activities to reduce lifting hazards including retraining of staff in safe lifting techniques.
- Slips and trips have increased primarily the result of slippery winter weather and other on call trip hazards. To address the increase in slips and trips, management is reviewing the safety footwear policies and procedures to ensure paramedics have access to slip-resistant footwear and are aware of hazards caused by slippery and uneven surfaces.

Human Resources continues to work closely with these work groups to identify and implement new strategies to identify and control hazards, train worker to protect their health and safety and raise awareness of the importance of preventing injury and illness in the workplace. We are making ergonomic improvements to the equipment and materials used in the workplace. Training on workplaces mental health and psychological safety is reaching more and more employees.

Appendices and Schedules Attached

None