

# **INFORMATION REPORT**

то:	Chair and Members Audit, Finance & Administration Committee
COMMITTEE DATE:	March 21, 2019
SUBJECT/REPORT NO:	Organizational Health Evaluation (HUR19002) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Gord Muise 905 546-2424 Ext. 2655 David Lindeman 905 546-2424 Ext. 5657 Heather McNicol 905 546-2424 Ext. 2635 Nenzi Cocca 905 546-2424 Ext. 3924
SUBMITTED BY:	Lora Fontana Executive Director Human Resources
SIGNATURE:	

#### **Council Direction:**

To provide Council with an overview of the organization's health through the City's workplace health indicators along with their alignment to programs and systems enhancing overall employee health and well being as well as identifying opportunities for measured improvement.

#### Information:

Measuring the City's organizational health provides insight into the psychological, physiological and social components that can ultimately contribute to the City's overall performance and capability. The following review of the City's organizational health is designed to understand, support and enhance the strengths in our system while effectively addressing the challenges.

This assessment was undertaken with a view to creating an inventory of the current programs in place, building awareness, identifying the opportunities to implement strategy and best practices as well as establishing a common framework for future development and implementation of relevant systems. In addition, establish a benchmark to measure future development and implementation of systems.

This Report provides a breakdown of the City's organizational health and related programming as follows:

- 1. Workplace Health Indicators
- 2. Current Systems and Programs
- 3. Opportunities for Improvement

# 1. Workplace Health Indicators

This section examines the following employee health indicators:

- Prescription Drug Usage
- Long Term Disability Claim Types
- Employee and Family Assistance Program Usage
- Usage of Wellness Resources

# **Prescription Drug Plan Usage**

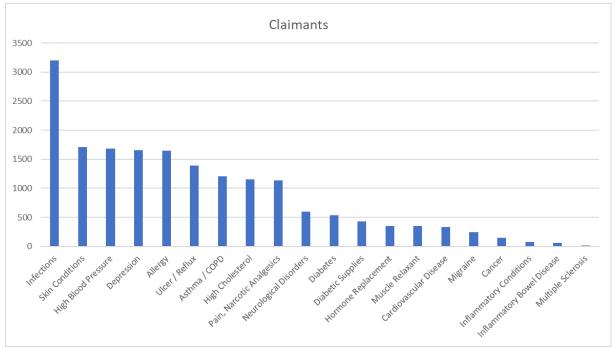
The City provides drug plans to its full-time employees, their spouses and dependents. Our benefits provider (Manulife) collects and reports on information in a manner that maintains employee confidentiality. This information provides insight into the type of illnesses and conditions that are affecting our employees and their families. The following tables and graphs provide an overview of prescription drug claims made under the City's benefit plans.

Table A: Top 20 Most Common Indications by Number of Claimants and Occurrences based on Prescription Drug claims

Most Common Indications	Claimants	Occurrences
High Blood Pressure	1,686	12,391
Depression	1,658	11,440
Pain, Narcotic Analgesics	1,132	8,030
High Cholesterol	1,151	6,392
Diabetes	535	6,359
Infections	3,205	6,019
Ulcer / Reflux	1,391	5,937
Neurological Disorders	596	4,640
Asthma / COPD	1,208	4,042
Allergy	1,651	3,905
Skin Conditions	1,710	2,892
Diabetic Supplies	429	2,114
Cardiovascular Disease	330	1,492
Hormone Replacement	352	1,426
Migraine	246	1,026
Muscle Relaxant	348	879
Cancer	148	662
Inflammatory Conditions	79	503
Inflammatory Bowel Disease	62	240
Multiple Sclerosis	13	138

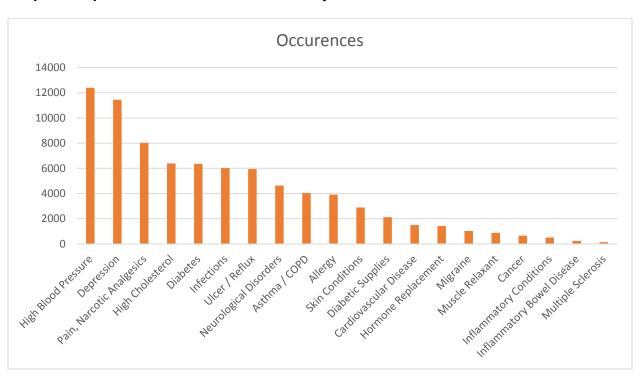
The information in the above table indicates that many of our employees and their dependents are being treated for ongoing health conditions. Many of these conditions are chronic and will require ongoing medication.

**Graph A: Top 20 Most Common Indications by Number of Claimants** 



Note re. Infections: many medical and dental procedures and treatments include prescribing anti-biotics

**Graph B: Top 20 Most Common Indications by Number of Occurrences** 



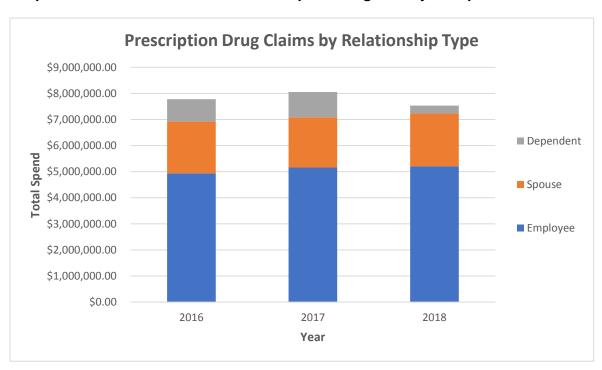
Empowered Employees.

The levels and distribution of indications are consistent with other employers covered by plans administered by our benefits provider (Manulife). Having said that, a number of the medical conditions may be preventable or controlled through life-style changes that involve increasing healthy, active living.

Table B: Distribution of Prescription Drug Plan Costs by Group

	Employee	Spouse	Dependent	Total
2016	\$4,936,323	\$1,982,918	\$861,791	\$7,781,031
2017	\$5,159,407	\$1,927,600	\$968,557	\$8,055,564
2018	\$5,206,446	\$2,025,889	\$305,419	\$7,537,754

**Graph C: Distribution of Costs of Prescription Drug Plan by Group** 



The above chart indicates that City employees are the primary users of our drug plans.

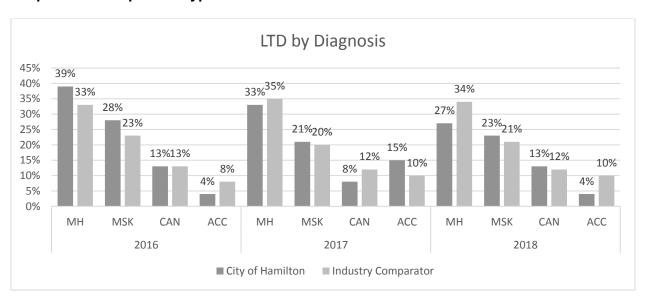
#### **Long Term Disability Claim Types**

Long-term disability (LTD) benefits are available to full-time employees who continue to be totally disabled from attending work beyond six months. The most frequent diagnosis by category for new LTD claims are listed below.

Table C: LTD Top Claim types 2016-2018

Year	2016		2017			2018						
Type	MH	MSK	CAN	ACC	MH	MSK	CAN	ACC	MH	MSK	CAN	ACC
City of Hamilton	39%	28%	13%	4%	33%	21%	8%	15%	27%	23%	13%	4%
Industry Compara tor	33%	23%	13%	8%	35%	20%	12%	10%	34%	21%	12%	10%
MH = Mental Health MSK = Musculoskeletal CAN = Cancer ACC = Non-occupational Accidents												

Graph D: LTD Top Claim types 2016-2018



In 2016, mental health diagnoses accounted for 39% of LTD claims received, and as noted above, this percentage reduced to 27% of all claims in 2018. This reduction is a positive indicator that the numerous mental health and well being initiatives providing increased mental health resources have improved our employees' mental health and well being.

# **Employee and Family Assistance Program (EFAP) Usage**

# **Counselling Services**

Counselling is short-term and focused on problem-solving and finding solutions that are practical and improve physical and mental well-being. It's available face to face, over the telephone, or online. Counselling can help with any challenge such as: family or marital relationships, addictions, anxiety, depression, life transition or change, grief or bereavement, stress, and other personal issues.

#### **Life Smart Services**

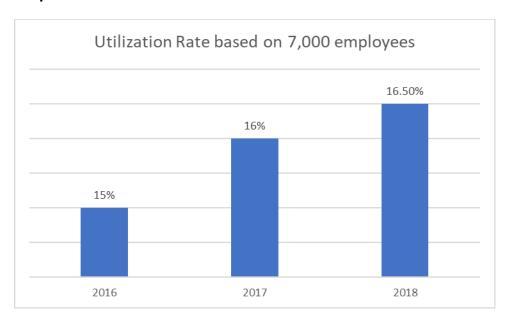
These work life services address small issues before they become big concerns. Each service helps individuals to take a proactive approach to managing everyday challenges and life transitions. This could include:

- Health nutrition, lifestyle changes, weight management, smoking cessation, programs for people with specific health and/or weight management goals.
- Life Balance childcare and parenting, elder and family care, relationships, financial issues, legal issues.
- Career planning, workplace issues, pre-retirement, shift work.

Table D: EFAP Utilization Rates 2016 - 2018

	2016	2017	2018
Utilization Rate based on 7,000 employees	15%	16%	16.5%

Graph E: EFAP Utilization Rates 2016 - 2018

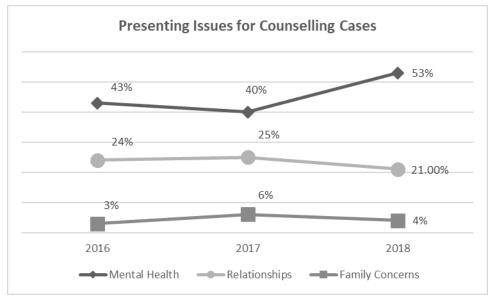


The City's utilization rates are at a "healthy" level. 81% of the EFAP cases in 2018 involved employees; 10.3% spouses; and, 8.7% dependents.

**Table E: EFAP Presenting Issues for Counselling Cases** 

	2016	2017	2018
Mental Health	43%	40%	53%
Relationships	24%	25%	21.%
Family Concerns	3%	6%	4%

Graph F: Presenting Issues for Counselling Cases 2016-2018



Mental health and well being related counselling has increased over the period 2016-2018. This increase in utilization would arguably suggest greater awareness and willingness to address mental health related issues. In addition, the correlation between the increased EFAP support services for mental health issues and the decrease in related LTD claims would suggest that such services are having a positive impact for employees over the longer term.

Table F: EFAP Presenting Issues for Life Smart Services

	2016	2017	2018
Legal	41%	48%	55%
Nutrition	16%	9%	16%
Child/Eldercare	10%	10%	8%
Financial	8%	9%	12%
Career Coaching	9%	8%	5%

Graph G: Presenting Issues for Life Smart Services 2016-2018

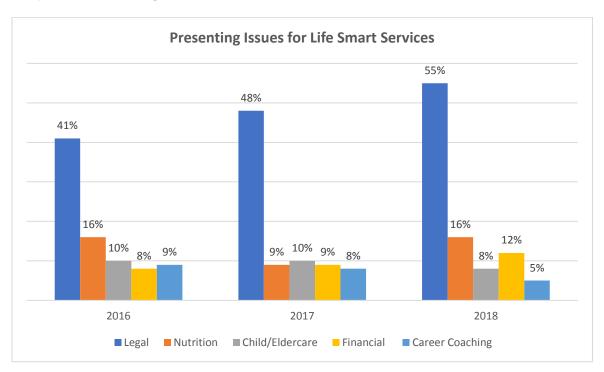
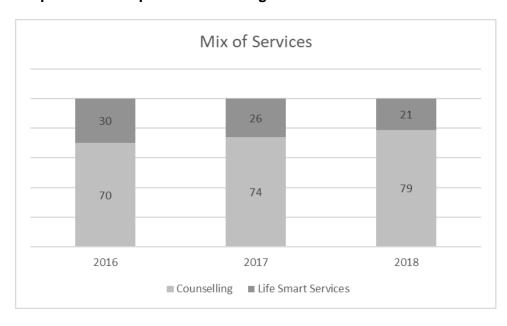


Table G: EFAP Split of Counselling vs Life Smart Services

Counselling/Life Smart Services Mix	2016	2017	2018
	70/30	74/26	79/21

Graph H: EFAP Split of Counselling vs Life Smart Services 2016-2018

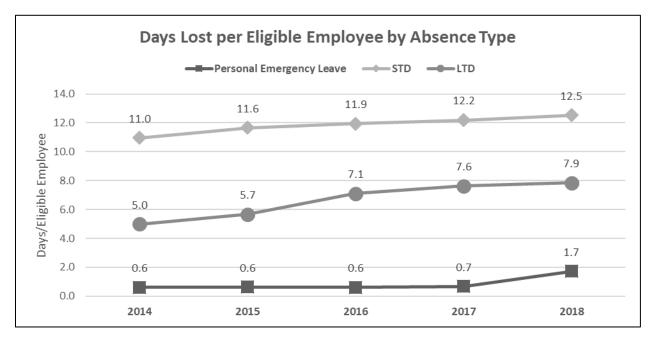


- There have been 1,149 new EFAP cases from January 1 December 30, 2018. This
  represents 16% (1,149 cases per 7,000 employees) annual utilization. This represents an
  overall upward trend in utilization and is considered a healthy utilization rate in accordance
  with industry standards.
- Seeking counselling services for mental health concerns continues to be the leading issue that results in employees and their dependents contacting Homewood.
- The mix of cases has changed over time from approximately a 70/30 split between counselling and Life Smart Services to an 80/20 split. Efforts will be made to encourage employees and their dependents to proactively access the services that may help with dayto-day challenges and possibly lessen the need for counselling.

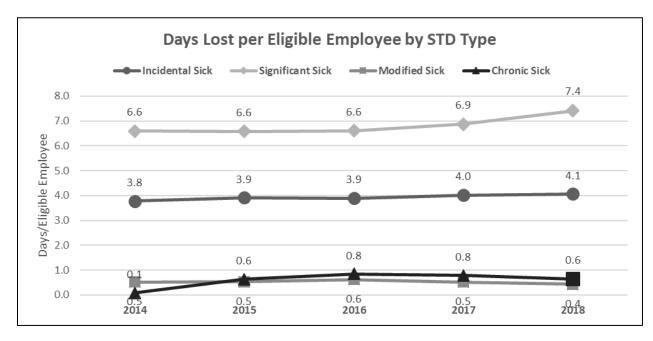
#### **Absence Data**

This section provides an overview of the lost time statistics related to Short-term Disability (STD), Long-term Disability (LTD) and Personal Emergency Leave. More detail and analysis are provided in Report HUR19002.

**Graph I: Days Lost by Absence Type – Full-Time Employees** 



The number of days lost due to absenteeism is highest for short-term disability (STD) absences, averaging 12.5 days per eligible employee in 2018. STD disability absences are sick absences that are one day up to 130 days in the Income Protection Plan and require a medical claim form.



**Graph J: Absence Occurrences by Type – Full-Time Employees** 

- The average occurrence of an eligible employee taking Personal Emergency Leave (PEL) was 1.5 occurrences which is more than twice compared to the last 4 years. The increase in use coincided by legislative changes that provide 2 paid PEL days per eligible employee. That entitlement was rescinded by the current provincial government and is no longer available to employees in 2019.
- The average occurrence of an eligible employee taking a short-term disability leave was 2.8 occurrences slightly lower than last year but close to the last 5 year average.
- Long-term disability occurrences are consistently low year to year because of the small number of employees receiving LTD benefits.

### **Absence Summary By Gender**

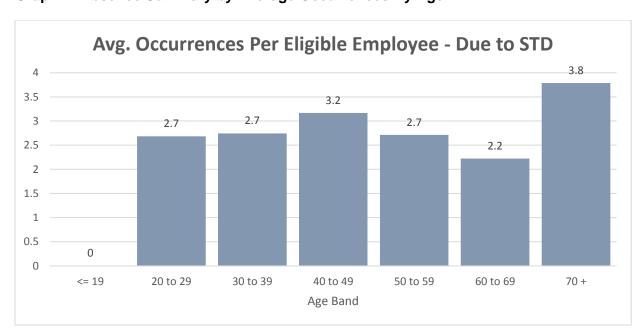
- Eligible women have taken more time (hours) off due to short term disabilities (STD) and long term disabilities (LTD) as compared to men for the last five years (approximately 11% more in 2018).
- Eligible men tend to take more time off as Personal Emergency Leave (PEL) when compared to women for the last five years (approximately 35% more in 2018).
- Average occurrence for short term disabilities (STD) is 3.2 for eligible women vs. 2.4 for eligible men.

Lost Days Per Eligible Employee - Due to STD 25 21.8 20 17.2 14.0 15 12.6 9.6 10 7.4 0 <= 19 20 to 29 30 to 39 40 to 49 50 to 59 60 to 69 70 +

**Graph K: Absence Summary of Days Lost By Age** 

The number of lost days due to short term disability (STD) per eligible employee increases by age.

**Age Band** 



Graph L: Absence Summary by Average Occurrences By Age

Average occurrence for short term disabilities (STD) is highest for eligible employees over the age of 70 (3.8 times in 2018). Having said this, there are only 17 eligible employees that are 70 years of age and older.

# **Usage of Wellness Resources**

LifeSpeak On Demand is an expert-led online streaming video training web site. Employees and their families can access the support they need to overcome hurdles and accomplish goals. The topics accessed are tracked and provide indications of the types of challenges employees and their families are encountering.

Topic Category Name	Online Trainings Accessed
Professional Development	374
Stress Management &Resilience	247
Mental Health	242
Preventative Health	211
Relationships	164
Leadership & Management Skills	138
Financial Health	133
Parenting & Caregiving	67
Children's Health	18
Physical Conditions & Diseases	9
Disability & Absence Management	2
Total	1,605

# 2. Current Systems and Programs

Human Resources manages a number of programs, policies and initiatives that support employee well-being and assist individuals in improving their individual health. This includes wellness programming, health benefits, mental health training, access to resources and the efforts of Return to Work Services to accommodate workers with disabilities and to bring workers back to work in a safe and timely manner.

# **Mental Health Training**

# Mental Health@Work Certificate Training for Leaders

This certificate program was arranged through Queen's University and Mourneau Shepell and aligns with the National Standard for Psychological Health and Safety in the Workplace. The program helps People Leaders better understand mental illness and poor mental health, the stigma surrounding it and its effect on individuals and the workplace. Its primary objective is to increase employees' comfort level in discussing mental illness and give them skills to improve their mental health and support each other. In 2018, 107 Leaders were trained and to date, 241 People Leaders across the organization have been certified through the program.

# The Working Mind

This program was developed by the Mental Health Commission of Canada and helps all employees in the workplace better understand mental illness and poor mental health, the stigma surrounding it and its effect on individuals and the workplace.

Primary goals of the program are to:

- Support the mental health and wellbeing of employees
- Enable the full productivity of employees
- Ensure the workplace is respectful and inclusive of all employees, including those with mental health problems and mental illnesses
- Encourage employees to seek help for mental health problems and mental illnesses

There are two sessions in the program: one for employees without direct reports and one for People Leaders.

Throughout 2019, the Health, Safety and Wellness Team will be reaching out to City departments to garner commitment to deliver the program to front-line staff and People Leaders through a coordinated, inclusive approach to ensure that more employees receive this important training that can be used to promote good mental health every day in the workplace.

#### Anti-Stigma campaign – Shifting Minds

The City of Hamilton's Workplace Mental Health Action Committee (MHAC) was formed as part of the City's Mental Health and Well Being Strategy and aims to help reduce the stigma surrounding mental health by encouraging conversation and self-reflection in the workplace. There is a focus on how employees think about themselves and others and how employees seek required support. The campaign includes videos that cover:

- Respect
- Rethink
- Reconnect
- Renew
- Resources

## **Chronic Pain Self-Management Workshops for Employees**

This 6 session workshop series was developed by Stanford University and is delivered jointly by the Human Resources Occupational Health Nurse (OHN) and the Healthy Workplace Specialist to employees who live with chronic or ongoing pain. The workshop provides skills to improve quality of life on and off the job, including how to deal with:

- difficulty sleeping and fatigue
- feeling closed off from others
- stopping pain from controlling one's life

Other topic discussions include: The Pain & Symptom Cycle, Pacing, Exercising, Relaxation, Action Plans, Problem Solving, Healthy Eating, Depression, Positive Thinking, Working with Health Care Professionals

#### **Sprout Physical Activity and Mental Health Tracker**

Sprout is a Wellness portal for physical, mental and social well-being. Through this Human Resources led initiative, employees can:

- complete a health survey
- set goals for improving overall health
- track activities
- join groups
- connect with others with like interests
- participate in challenges

#### LifeSpeak On Demand

LifeSpeak On Demand is an expert-led online streaming video resource dealing with a wide variety of health, family, eldercare, personal growth and development, and work-life balance topics. Employees and their families are able to access the support they need to overcome hurdles and accomplish goals. In 2018, 1,605 training programs were accessed through the web site.

#### **Employee and Family Assistance Program**

Homewood Health provides the Employee and Family Assistance Program (EFAP) to our employees and their families. The service is confidential and available 24 hours a day, 7 days a week. The program provides short-term counselling along with health and wellness services for everyday challenges and demands.

Each year, Human Resources works with our EFAP provider to design specific programs and resources that address trends and emerging issues. This included securing speakers for our annual joint health and safety committee event and the delivery of 23 workshops across the organization.

#### **Return to Work Services Activities**

Human Resources has a dedicated team of Return to Work Specialists who provide support to employees returning to work following a non-occupational or occupational injury/illness.

In 2018, a total of 589 employees were provided with the opportunity to return to work on a temporary accommodated basis, thus reducing the length of their absence and maintaining their participation in the workplace.

In addition to providing temporary accommodation, Human Resources has a well-developed permanent accommodation process, whereby employees who have been identified with permanent medical restrictions preventing their return to their pre-disability position, work with Return to Work Services and the Talent and Diversity staff to identify other suitable positions. Once an alternative position is identified, the employee enters into a 90-day work trial to determine if the new position is a good fit based on the employee's skills and return to work capabilities.

### **Critical Incident Peer Support Team (CIPS)**

The Critical Incident Peer Support Team (CIPS) provides employees with on-site assistance in the form of critical incident stress defusing. Qualified CIPS Team members meet with small groups of employees (up to 15) usually for an hour in a convenient location. Team members give those in attendance time to be together to express their thoughts and feelings, generally in response to a critical incident affecting the workplace.

In addition, the CIPS Team provides further information and resource support to employees.

In 2018, the CIPS team responded to 11 team activations for Group support and 17 activations for peer-to-peer support.

## **Non-violence Crisis Intervention Training**

Non-violence Crisis Intervention® (NVCI) classroom training focuses on prevention of violence in the workplace and offers proven strategies for safely defusing anxious, hostile, or violent behaviour at the earliest possible stage. It provides employees with a safe way to resolve situations when confronted by anxious, hostile or violent behaviour, while still protecting the important relationships with those in their care.

# 3. Opportunities for Improvement

1. Employee Health Benefits – Human Resources' Benefits section is preparing recommendations to potentially amend the current non-union benefit plan. The intent is to maintain financial sustainability, while determining opportunities to enhance entitlements that better support employee health and wellness. This would include potential divestment of, or reduction in, underutilized benefits. The review and subsequent recommendations are being developed with a view of providing more flexibility for employees in choosing benefits that are better aligned to sustaining and supporting employee wellness.

- 2. Continued work is underway with respect to Human Resource related Policies and Procedures that support employee work/life balance (e.g. Vacation Entitlement Policy (and collective agreement entitlements); Flexible Work Arrangements Policy; Inclement Weather Policy; Telecommuting Policy; Work Accommodation Procedure; Guide to Leaves (recently updated and to be re-released to provide information to all employees related to legislated leaves and entitlements); and Workplace Breastfeeding Policy. These policies continue to be reviewed and amended in order to better address employee related needs on a regular basis.
- 3. Our People Survey (OPS) Action Plans have launched a number of initiatives within the various sections and divisions, resulting in more support and enhancement of employee health and wellness, which was a key consideration in driving OPS Action Plans.

### Examples include:

- a. Corporate Working Group to develop "R Zone" anti-harassment and violence initiative across organization that supports a respectful and supportive workplace for employees dealing with the public
- Encouraging mental health breaks by organizing team lunches, pot lucks, team breakfasts
- c. Reviewing work amenities and work spaces to support health and safety, including how to add more natural lighting and workstations assigned for mobile staff
- d. More opportunities for flex work arrangements in accordance with Policy
- e. Review of work load distribution to ensure fairness and proper work/life balance
- f. Providing education and learning opportunities for employees related to self-care, wellness and work/life balance through the Employee and Family Assistance Program provider and The Working Mind and Mental Health@Work Certificate programs
- 4. Workplace Mental Health and Well Being Strategy The Mental Health Action Committee (MHAC) has completed its evaluation of our workplace programs and practices using the Canadian standards for workplace mental health. The Committee will be bringing forward recommendations to Senior Leadership Team in the coming months with a view to improving our efforts at creating psychologically safe workplaces and increasing employee resiliency. The Committee will continue to raise awareness on mental health stigma using its Shifting Minds campaign materials. It will also disseminate its tool kit for people leaders designed to help managers and supervisors access resources to help with workplace challenges affecting their teams. Challenges include stress, relationships, communication, workload, poor performance, bullying and conflict.

An update on the Mental Health and Well Being Strategy will be provided to Council in the Spring, 2019.

5. Return to Work Services - In keeping with the broader Human Resources and City-wide initiatives focusing on greater transparency, measurement and accountability, staff will be trained to more effectively use the department's disability management system to improve the quality of data collected and provide better insight in disability management trends. Return to Work Services will then work in close partnership with the Human Resource Business Partners to analyze and interpret the data to identify trends and opportunities for targeted attendance and disability management strategies. The attendance statistics will

# SUBJECT: Organizational Health Evaluation (HUR19002) (City Wide)

Page 17 of 17

be shared with City departments in a more consistent and regular basis to help with the management of attendance more effectively.

In 2019, Return to Work (RTW) Services will reallocate resources to better manage attendance, occupational and non-occupational workplace absences. Furthermore, RTW Services will undergo an independent functional review to identify opportunities to promote best-practices approaches to disability and attendance management with a view to improving employee wellbeing and reducing absenteeism levels.