

INFORMATION REPORT

то:	Chair and Members Audit, Finance and Administration Committee
COMMITTEE DATE:	March 21, 2019
SUBJECT/REPORT NO:	Occupational Injury and Illness Claims Annual Report 2018 (HUR19004) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Gord Muise 905-546-2424 Ext. 2655 David Lindeman 905-546-2424 Ext.5657
SUBMITTED BY:	Lora Fontana Executive Director Human Resources
SIGNATURE:	

Council Direction:

At its May 11, 2015 Audit, Finance & Administration Committee Meeting Council requested an information update on our Workplace Safety and Insurance Board (WSIB) experience, including identifying our lost-time injury rate, areas experiencing higher numbers of incidents as well as providing strategies to reduce incidents in those areas. Council also asked that severity rates be included in the data.

Information:

The City experienced an increase in work-related lost time incidents in 2018. Specifically:

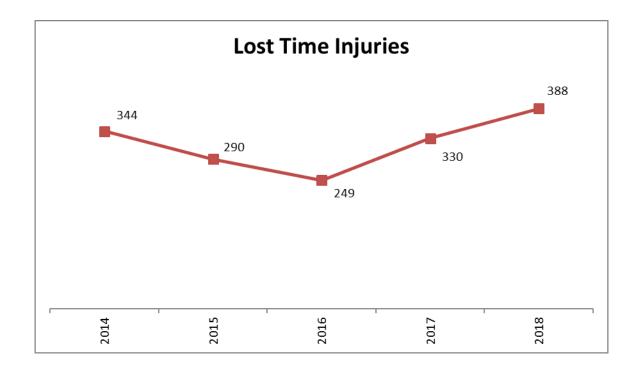
- Lost time incidents rose from 330 in 2017 to 388 in 2018
- Lost-time injury rate increased from 5.46 to 6.35
- Total days lost increased from 7,689 to 10,361
- Total WSIB costs increased from \$6,236,790 to \$8,731,432

The following tables and graphs provide an overview of the City's WSIB claims experience over the past 5 years.

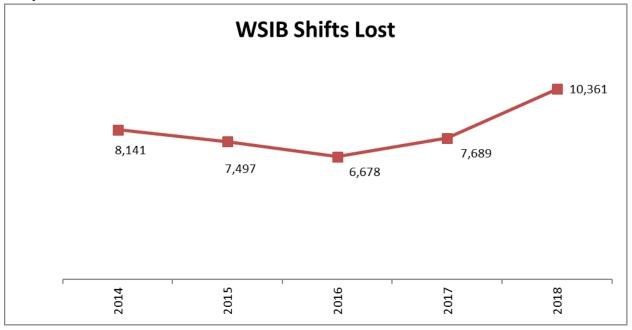
Table 1: Lost Time Injuries, Shifts Lost and Costs 2014 – 2018

Year	Average Eligible Employee Headcount	WSIB Shifts Lost	New Lost Time Injuries	Total WSIB Costs
2014	7,849	8,141	344	\$5,608,974
2015	7,960	7,497	290	\$5,731,270
2016	8,133	6,678	249	\$6,476,831
2017	8,194	7,689	330	\$6,236,790
2018	8,302	10,361	388	\$8,731,432

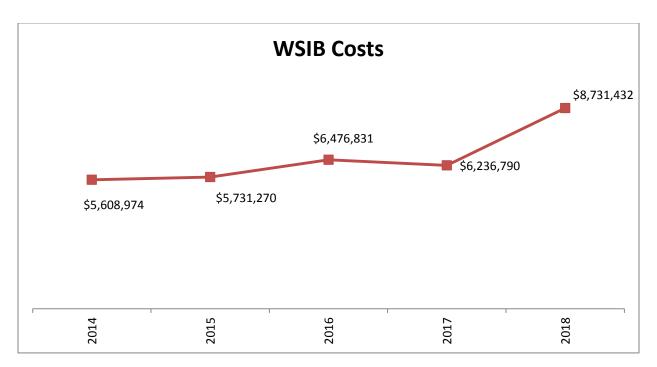
Graphs 1: Lost Time Injuries 2014 to 2018



Graph 2: WSIB Shifts Lost 2014 to 2018



Graphs 3: WSIB Costs 2014 to 2018



The lost time injury rate rose by 16% in 2018, as compared to 2017. There was also an increase in the total shifts lost to workplace injury and illness from 7,689 to 10,361. WSIB costs rose from \$6,236,790 to \$8,731,432.

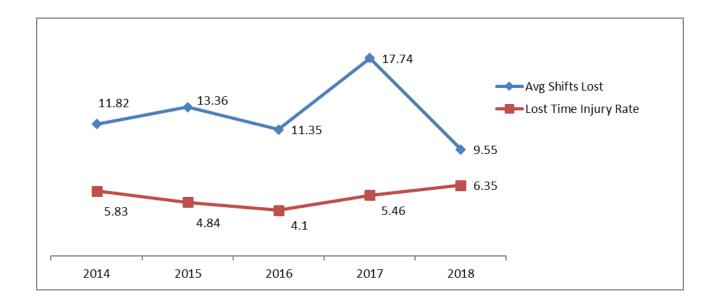
Table 2 provides lost time injury data expressed as a **Lost Time Injury Rate** per 100 employees i.e. (# of lost time injuries/(total hours worked/2,000)X100) and considers all hours worked by our employees and divides the total by 2,000 hours to calculate a full-time equivalent employee count. This calculation accounts for differences in hours worked amongst employees (including part-time vs full-time employees) to get a more accurate indicator of the total hours worked and exposure to risk instead using a straight headcount. The table also provides an indication of the **severity** of injuries by looking at the average days lost per claim.

Table 2: Lost Time Injury Rates and Average Days Lost 2014 - 2018

Year	Lost Time Injury Rate	Average of Days Lost per Injury*
2014	5.83	11.82
2015	4.84	13.36
2016	4.10	11.35
2017	5.46	17.74
2018	6.35	9.55

^{*}Calculated as of February 17, 2019. These amounts will go up as several claims are still open and the employees have not returned to work.

Graph 4: 5 year trend of LTI Rate and Average Days Lost (severity)



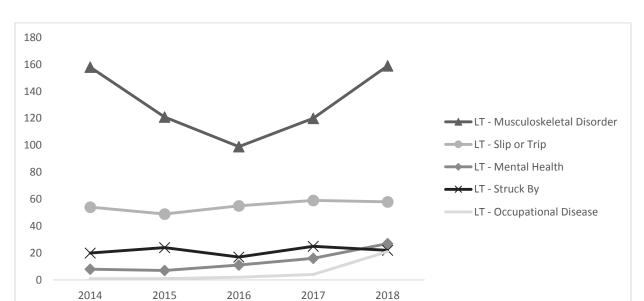
The lost time injury rate rose by 16% in 2018 from 5.46 to 6.35. The average shifts lost per claim (severity rate) was 9.55 days in 2018. Some claims are still open, and their shifts lost will add to average shift lost over time. Most of the open claims occurred in 2018.

Table 3: Lost Time Injury Types 2018

Injury Type	Lost Time Injuries	% of Total Injuries
Musculoskeletal Disorder	159	40.98%
Slip or Trip	58	14.95%
Mental Health	27	6.96%
Struck By	22	5.67%
Occupational Disease	21	5.41%
Other	20	5.15%
Violence	18	4.64%
Motor Vehicle Accident	15	3.87%
Fall or Jump	11	2.84%
Struck Against	10	2.58%
Fire/Explosion/Electrical	7	1.80%
Caught In/On/Between Objects	7	1.80%
Environmental	4	1.03%
Recurrence	3	0.77%
Animal/Insect	3	0.77%
Unclassified	2	0.52%
Hazard	1	0.26%
Total	388	100.00%

Musculoskeletal Disorders and Slips and Trips accounted for over 60% of the lost time claims and remain priority areas for our injury and illness prevention efforts.

Mental health claims increased to 27 in 2018 from 16 in 2017. The claims were primarily in the Hamilton Fire Department, Hamilton Paramedic Services and Hamilton Street Railway.



Graph 5 – 5 year Trends for the top Injury Types

Overall Lost Time Injuries 2014 to 2018

Overall, the City has experienced increases in the number of lost time injuries and shifts lost in 2018 compared to 2017, as outlined on Table 4. Most of the increase was seen in the Fire Department and the Lodges in Healthy and Safe Communities.

Table 4: Overall Lost Time 2014 to 2018

		Los	st Time Inju	uries	
	2014	2015	2016	2017	2018
City Housing Hamilton	6	4	7	8	4
City Manager's Office	1	0	1	0	0
Healthy and Safe Communities	167	153	122	160	221
Corporate Services	0	2	1	0	2
Planning & Economic Development	17	6	11	12	10
Public Works	153	125	105	150	151
Corporation	344	290	249	330	388
		Lost	Time Injur	y Rate	
	2014	2015	2016	2017	2018
City Housing Hamilton	4.75	3.03	5.41	6.36	3.22
City Manager's Office	0.59	0.00	7.00	0.00	0.00
Healthy and Safe Communities	7.41	6.87	5.34	7.09	8.64

Corporate Services	0.00	0.61	0.29	0.00	0.47
Planning & Economic Development	3.44	1.15	2.03	2.19	1.74
Public Works	7.03	5.64	4.72	6.70	6.65
Corporation	5.83	4.84	4.10	5.46	6.35
	SI	nifts Lost,	New Lost	Time Injuri	es
	2014	2015	2016	2017	2018
City Housing Hamilton	360	108	28	88	23
City Manager's Office	2	0	7	0	0
Healthy and Safe Communities	1,031	805	641	676	1,177
Corporate Services	0	237	3	0	6
Planning & Economic Development	229	36	77	213	119
Public Works	1,778	1,227	668	1,125	1,278
Corporation	3,400	2,413	1,424	2,102	2,604

Table 5: Average Days Lost per Injury Claim (Severity) 2014 to 2018

	Average Days lost per new injury*			ry*	
	2014	2015	2016	2017	2018
City Housing Hamilton	60.33	43.00	5.43	9.93	5.50
City Manager's Office	2.00	0.00	7.00	0	0
Healthy and Safe Communities	9.16	5.98	10.99	6.49	9.39
Corporate Services	0.00	466.00	1.00	0	3.00
Planning & Economic Development	13.94	6.40	8.19	46.33	13.90
Public Works	12.62	13.85	12.69	27.50	9.70
Corporation	11.82	13.36	11.35	17.74	9.55

^{*}Calculated as of February 17, 2019. These amounts will go up as some claims are still open and the employees have not returned to work.

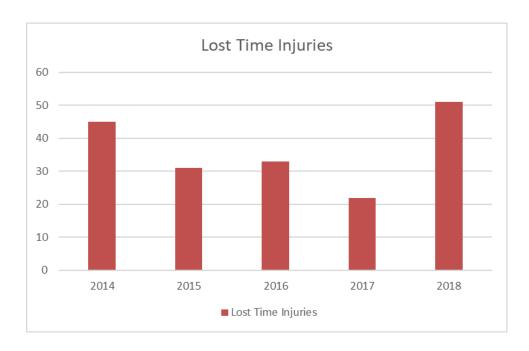
Areas of Focus

Hamilton Fire Department

Table 6: Fire Department Overall Lost Time 2014 to 2018

Year	Lost Time Injuries
2014	45
2015	31
2016	33
2017	22
2018	51

Graph 4: Fire Department Overall Lost Time 2014 to 2018



Fire Department leadership has identified a rise in lost-time claims due to musculoskeletal injures, mental health risks and slips and falls. In response, 2019 initiatives will include:

- delivering the Mental Health Commission of Canada's Road to Mental Readiness workplace mental health training program to firefighters used certified in-house trainers.
- Instituting a safe lifting training program that will be completed by every firefighter

 Creating an awareness program targeting prevention of slips and falls that will include messaging on being aware of surroundings and changing conditions with reminders including posters in all fire stations.

The rise in the number of claims in 2018 can also be attributed in part to an increase of mental health claims. Recent changes to Workplace Safety and Insurance Board policies on mental health have resulted in more firefighters recognizing the symptoms of poor mental health and are seeking the supports available through the workers' compensation system.

Lodges

Table 7: Lodges Overall Lost Time 2014 to 2018

Year	Lost Time Injuries
2014	30
2015	35
2016	34
2017	47
2018	71

Graph 5: Lodges Overall Lost Time 2014 to 2018



Note: 20 of the lost time incidents in 2018 were due to illness outbreaks at the Lodges that affected staff health.

The Lodges Leadership team, in consultation with front line staff, have invested in training and purchasing of equipment to ensure that staff have the knowledge and/or tools to prevent musculoskeletal disorders (MSDs), exposure to Occupational Disease and violence.

Investments include new equipment that assists staff and reduces strain when helping residents with their day-to-day activities, including bariatric residents. The EPIC (Everyone Participating in Change) program, developed in collaboration with the Institute for Work & Health and the Public Services Health and Safety Association and focused on MSDs, was completed in 2018 and resulted in a number of recommendations that are being implemented. These include changes to improve material handling in housekeeping and laundry services, increase knowledge of employees on reporting hazards and improving communication of existing hazards and safe lifting techniques. Supervisors monitor employee actions to ensure equipment is available at all times and is being used properly and consistently.

The Lodges partnered with Public Health improve infection control polices and procedures by training staff, making flu-vaccine clinics more accessible and making personal protective equipment readily available for staff.

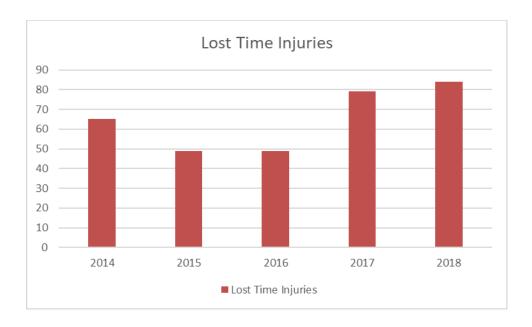
More residents are admitted with responsive behaviours and the Lodges provide annual staff training regarding dementia care and ongoing raining from the Alzheimer's Society, and the Behavioural Supports of Ontario.

Hamilton Street Railway (HSR) Operations

Table 8: HSR Overall Lost Time 2014 to 2018

Year	Lost Time Injuries
2014	65
2015	49
2016	49
2017	79
2018	84





HSR management has recognized the upward trend in its lost time injuries and has responded by:

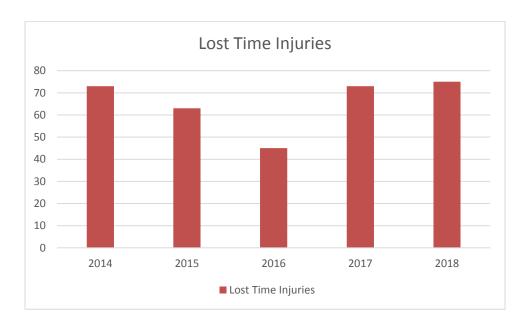
- Updating its injury reporting and accident investigation procedures to ensure incidents are identified and promptly reported to Human Resources and thorough response in undertaken by management.
- Ensuring operators are properly adjusting seats to prevent musculoskeletal injuries.
- Undertaking a vibration study to identify any risk to operators arising from operating buses.
- Liaising with bus manufacturers to confirm specification and best practices for operation and maintenance of the fleet of buses.
- Certifying supervisors and managers in Workplace Mental Health through completion of training through Queen's University.
- Identifying additional duties that could provide accommodated work for injured workers

Hamilton Paramedic Services (HPS)

Table 9: HPS Overall Lost Time 2014 to 2018

Year	Lost Time Injuries
2014	73
2015	63
2016	45
2017	73
2018	75

Graph 7: HPS Overall Lost Time 2014 to 2018



HPS management responded to a rise in musculoskeletal injuries by developing and providing all paramedics with training proper lifting techniques for focusing on the hazards related to transferring and transporting patients and changing conditions. There is ongoing communication on preventing slips and falls with an emphasis on being aware of changing environmental conditions.

HPS management and worker representatives jointly developed a peer-to-peer critical incident support team and program. The team will respond quickly to support paramedics who have been exposed to traumatic events or ongoing work-related stress. Paramedics were also provided presentation on the multiple mental health supports available through employer sponsored programs and community resources.

Waste Operations

Table 10: Waste Overall Lost Time 2014 to 2018

Year	Lost Time Injuries
2014	35
2015	19
2016	7
2017	16
2018	11

Graph 8: Waste Overall Lost Time 2014 to 2018



Waste operations management and the joint health and safety committee continued their joint focus on ergonomic hazards, slips and falls and identifying suitable modified duties for injured employees during their recovery started in 2015. Their efforts are supported by Human resources staff who spend time on-site to training employees and assist in providing work accommodation to injured employees.

A co-op student from University of Waterloo's Kinesiology program assisted Waste management, Return to Work Services and the employees during a four-month work term. Building on the work of past students, the student developed tools and guides and delivered training that assisted the workplace in preventing injuries.

The ongoing efforts have resulted in a sustained reduction in lost-time injuries.

Health and Safety Initiatives

Workplace Mental Health

- The Working Mind mental health training program from Mental Health Commission of Canada was delivered to 56 people leaders and 197 frontline staff in 2018. To date, 199 people leaders and 559 front line staff have been trained.
- The Mental Health Advisory Committee will forward its recommendations to Senior Leadership Team for improving the effectiveness and availability of programs, policies and resources that will help create psychologically safe workplaces and protect the mental health of our employees.
- Mental Health@Work Certificate Training for Leaders was arranged through Queen's University and Mourneau Shepell. Over the course of three modules, participants explore the business case for mental health in the workplace while improving their understanding of relevant legal, ethical and business concerns. In 2018, 107 leaders were trained and to date, 241 people leaders across the organization have been certified through the program.

Other Initiatives

- 1,398 employees were trained in the new Workplace Hazardous Materials Information System (WHMIS) training program in 2018. The program reflects changes made to the hazard classification system for workplace chemical safety symbols, labelling and information sheets in our workplaces.
- 368 people leaders completed online mandatory manager health and safety awareness training; 1,311 front-line staff completed online.
- Seven training sessions on non-violent crisis intervention techniques were held for staff across the organization.
- Individual ergonomic assessments were completed for approximately 100 staff and improvements made to the design of their workstations and the equipment they use to complete their tasks.
- Two Kinesiology students completed placements in 2018 and another two placements with the Health, Safety and Wellness team is planned for May to August in 2019.
- Emergency response plans and drills were developed to prepare staff for reacting to threats of violence in many of our offices.

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- Smoke-free workplace, substance use and safety sensitive positions policies and procedures were updated to address legalization of cannabis and communicated to staff.
- In 2018, the Critical Incident Peer Support team responded to 11 team activations for Group support and 17 activations for peer-to-peer support.
- Approximately 125 joint health and safety committee members attended the annual day-long recognition and learning event during North American Occupational Safety and Health Week.