

INFORMATION UPDATE

Hamilton

то:	Chair and Members Audit, Finance and Administration Committee
DATE:	October 3, 2019
SUBJECT/REPORT NO:	Semi-Annual Occupational Injury and Illness Claims 2019 (HUR19021) (City Wide)
WARD(S) AFFECTED:	City Wide
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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 provides a snapshot of occupational health and safety trends by comparing new lost-time injury and illness for claims filed in January - June (Q1 - Q2) for 2015 to 2019. The annual report contains information on all claims in addition to new claims.

Information:

- Lost time injuries decreased by 8% in the first two guarters of 2019 compared to 2018 (210 from 219).
- Days lost to new injuries increased by 22% in the first two guarters of 2019 compared to 2018 (1,411 to 1,725).
- Musculoskeletal Disorders and Slips, Trip or Fall injuries are still the leading cause of injury.
- Mental Health claims in 2019 remained near the level of 2018 which is higher than previous years.

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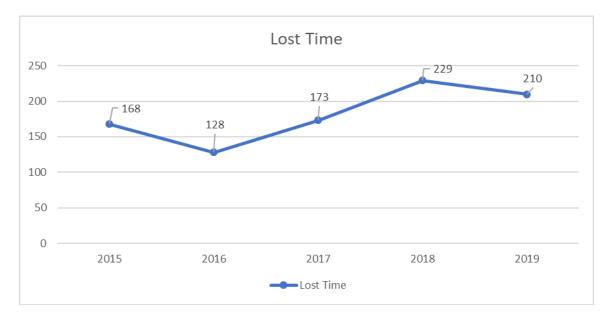
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	2015	2016	2017	2018	2019
Healthy & Safe Communities	88	55	82	130	115
Public Works	74	56	80	87	78
City Housing Hamilton	1	5	3	2	8
Planning & Economic Development	4	11	8	9	6
Corporate Services	1	1	0	1	3
City Manager's Office	0	0	0	0	0
Corporation	168	128	173	229	210

Table 1: New Lost Time Injuries Q1 - Q2 2015 to 2019

Overall, the City has experienced a decrease in the number of lost time injuries and shifts lost in the first half of 2019 compared to the same period in 2018.

Graph 1: Lost time Incidents (Quarter Q1-Q2 2015 to Q1 - Q2 2019)

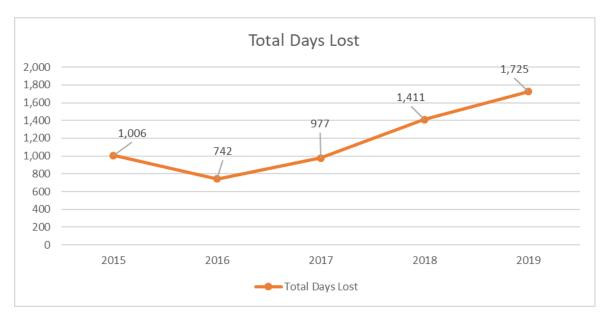


The number of lost time injuries declined in the first half of 2019 after two years of increases for the same period of time (Q1 and Q2).

	2015	2016	2017	2018	2019
Healthy & Safe Communities	352	286	362	620	760
Public Works	582	371	452	685	737
Corporate Services	38	1	0	2	135
City Housing Hamilton	0	14	24	6	68
Planning & Economic					
Development	34	66	125	98	25
City Manager's Office	0	0	0	0	0
Corporation	1,006	742	977	1,411	1,725

Table 2 - Days Lost to New Lost Time Injuries

Graph 2: Total Days Lost per New Lost Time Incident (Quarter Q1 – Q2 2015 to Q1 – Q2 2019)



Graph 2 shows a rise in days lost in the first six months of 2019 compared to the same period in previous years. The increase is partially attributed to the severity and nature of the injuries and illnesses that are occurring and the limited opportunities to quickly return workers to work. For example, mental health claims often require longer periods away from work for treatment and recovery and involve a gradual return to work to ensure successful re-entry into the workforce.

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Type and Nature of Injuries and Illnesses

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

Table 2 shows the mix of injury and illness classification for the most frequent injury type presented as injury claim counts for the period of Q1 - Q2 each year.

Table 3 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 2: Top Lost Time Injuries by Major Type Count Q1 - Q2 2015 to 2019

Injury Type by Claim Counts	2015	2016	2017	2018	2019
Musculoskeletal Disorder	65	51	63	89	79
Slip, Trip or Fall	29	29	30	38	47
Mental Health	2	2	10	19	20
Struck By	13	11	18	15	17
Struck Against	9	3	7	5	10
Motor Vehicle Accident	10	5	17	10	8
Violence	2	6	10	13	8

Table 3: Top Lost Time Injuries by Major Type Percentage Q1 - Q2 2015 to 2019

Injury Type by Percentage of Claims	2015	2016	2017	2018	2019
Musculoskeletal Disorder	43.62%	42.50%	35.39%	38.70%	37.62%
Slip, Trip or Fall	22.82%	24.17%	20.78%	16.52%	22.38%
Mental Health	1.34%	1.67%	5.62%	8.26%	9.52%
Struck By	8.72%	9.17%	10.11%	6.52%	8.10%
Struck Against	6.04%	2.50%	3.93%	2.17%	4.76%
Motor Vehicle Accident	6.71%	4.17%	9.55%	4.35%	3.81%
Violence	1.34%	5.00%	5.62%	5.65%	3.81%

Musculoskeletal Disorders and Slips, Trips or Falls injuries are still the leading cause of injury.

Work-related mental health claims remained higher Q1 and Q2 2019 compared to pre-2018 levels. These types of illnesses now account for nearly 10% of our lost time claims.

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OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees. 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 associating their poor mental health with workplace issues.

Areas of Focus

This report includes updates on health and safety activities within divisions that have historically experienced higher levels of occupational injury and illness due to the type of work performed and the hazards encountered by workers while performing their duties. Human Resources, divisional leadership and workers work together to identify hazards and develop solutions to control or eliminate those hazards.

Note: previous reports have included information on Waste Operations. That group has been able to reduce the number of lost time injuries within their team and have sustained the lower level for a number of years now and are not included in this report.

Hamilton Fire Department

Fire Department leadership with assistance from Human Resources targeted prevention of lost-time claims due to musculoskeletal injuries, mental health risks and slips and falls. In response, initiatives this year include:

- Delivery of the Mental Health Commission of Canada's Road to Mental Readiness (R2MR) workplace mental health training program to firefighters used certified inhouse Career and Volunteer Division trainers. Approximately 195 staff have completed R2MR training so far.
- Health, Safety and Wellness Specialist instituted safe lifting and prevention of slips and falls awareness campaigns. The campaigns included posters and messaging in all fire stations on being aware of surroundings, proper body mechanics and adapting to changing conditions.

Lodges

The Lodges Leadership team, Human Resources and front-line staff, continue to develop strategies to prevent musculoskeletal disorders (MSDs), exposure to Occupational Disease and violence.

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New equipment is assisting staff by reducing strains associated with helping residents with their day-to-day activities. New procedures are now in place for material handling in housekeeping and laundry services and employees have better skills and knowledge on safe lifting techniques. Employees have improved the timeliness of reporting hazards to supervisors and have become more effective in their communication of concerns. Supervisors are coaching employees to ensure available equipment is being used properly and consistently.

Improvements in infection control policies, availability of equipment, maintaining best practices and adherence to handwashing and other procedures are now in place that will reduce staff exposures and limit the transmission of pathogens in the workplace. There has also been a reduction in the number of illness outbreaks this year.

Management is ensuring staff have the training and supports they need to safely provide services to residents who are admitted with responsive behaviours that can make interactions with residents difficult.

Hamilton Street Railway (HSR) Operations

HSR management, Human Resources and front-line staff are collaborating on efforts to address workplace ergonomic hazards, mental health and violence. This includes working closely with the joint health and safety to develop initiatives that will help control workplace hazards by focusing on tools and training for operators and supervisors that will help them respond incidents and concerns.

Operators are being trained on properly setting up seats and making other adjustments to their driving positions to prevent musculoskeletal injuries. A vibration study will be undertaken by an outside consultant to identify any potential risk to operators and responding to the study's findings and recommendations, as appropriate. Bus manufacturers have been contacted to ensure specifications are up to date and best practices are identified for operation and maintenance of the fleet of specific buses.

Many HSR people leaders have been certified in Workplace Mental Health through completion of training delivered by Queen's University. Others are scheduled to attend the training or are currently enrolled. Additionally, mental health training for all staff is being considered.

To assist with the return to work of injured employees and facilitate stay-at-work strategies, HSR management and Human Resources Return to Work team are collaborating on identifying suitable accommodations that can be offered to injured workers to assist them at returning or remaining at work.

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Hamilton Paramedic Services (HPS)

HPS has seen a rise in mental health claims as well as musculoskeletal injuries. In response to the increase, management has provided mental health supports through our EFAP provider and other community resources. An education campaign was launched to increase awareness of proper lifting procedures and body mechanics.

The peer-to-peer critical incident support team and program continue to function in support of paramedics experiencing mental health issue. The team is relatively new and continues to evolve to support employees in need of assistance.