

INFORMATION REPORT

ТО:	Chair and Members Audit, Finance and Administration Committee
COMMITTEE DATE:	March 25, 2021
SUBJECT/REPORT NO:	Occupational Injury and Illness Claims Annual Report 2020 (HUR21005) (City Wide)
WARD(S) AFFECTED:	City Wide
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SUBMITTED BY:	Lora Fontana Executive Director Human Resources
SIGNATURE:	

COUNCIL DIRECTION

At its May 11, 2015 Audit, Finance & Administration Committee Meeting, Council requested an annual 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 a decrease in work-related lost time incidents in 2020. Specifically:

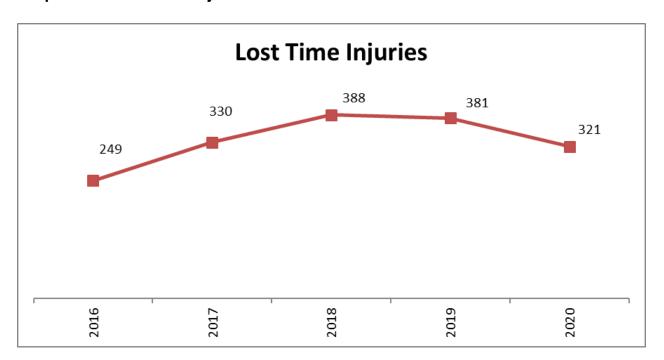
- New lost time incidents decreased from 381 in 2019 to 321 in 2020
- Total days lost decreased from 13,072 to 12,907
- Lost-time injury rate decreased from 6.15 to 5.34
- Total WSIB costs decreased from \$9,927,740 to \$9,354,472

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 2016 – 2020

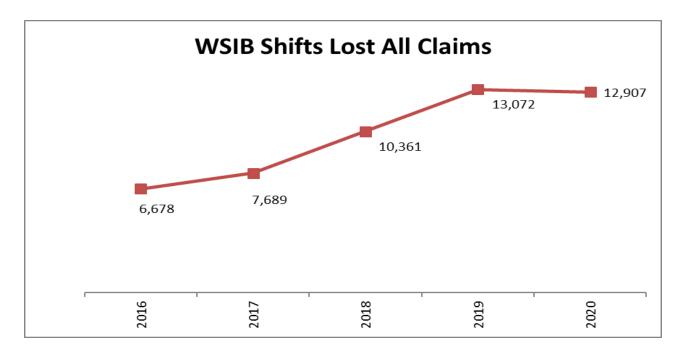
Year	Average Eligible Employee Headcount	WSIB Shifts Lost	New Lost Time Injuries	Total WSIB Costs
2016	8,133	6,678	249	\$6,476,831
2017	8,194	7,689	330	\$6,236,790
2018	8,302	10,361	388	\$8,731,432
2019	8,304	13,072	381	\$9,927,740
2020	8,183	12,907	321	\$9,354,472

Graphs 1: Lost Time Injuries 2016 to 2020



The number of Lost Time claims decreased to 321 in 2020 from 381 in 2019. This was the second year in a row with a decrease.

Graph 2: WSIB Shifts Lost 2016 to 2020



The number of days (shifts) lost to WSIB absences declined in 2020 compared to 2019.

Graph 3: WSIB Costs 2016 to 2020

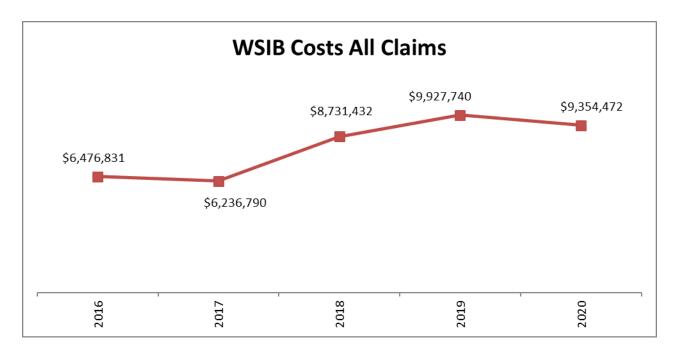


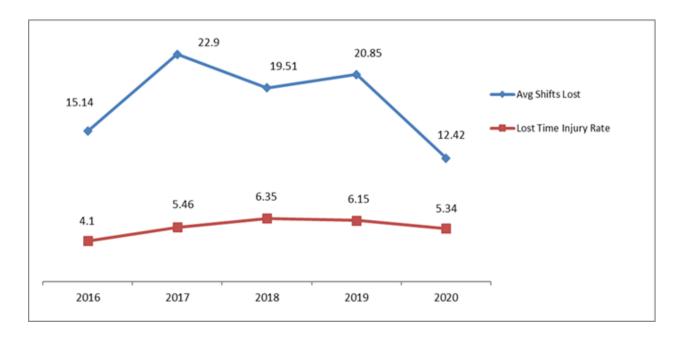
Table 2 below provides lost time injury data expressed as a Lost Time Injury Rate per 100 employees i.e. (# of lost time injuries/(total hours worked/2,000)X100) and considers all hours worked by our employees and divides the total by 2,000 hours to calculate a full-time equivalent employee count. This 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. (Lost Time Injury Rates and Severity calculations are also provided by department in Table 4).

Table 2: Lost Time Injury Rates and Average Days Lost 2016 - 2020

Year	Lost Time Injury Rate	Average of Days Lost per Injury*
2016	4.10	15.14
2017	5.46	22.90
2018	6.35	19.51
2019	6.15	20.85
2020	5.34	12.42

^{*}Calculated as of February 23, 2021. 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 Lost Time Injury Rate and Average Days Lost (severity)



The lost time injury rate per 100 employees dropped by 13% in 2020, as compared to 2019 (6.15 to 5.34). The actual number of lost time injuries decreased 15.74% from 381 to 321. Average days lost per injury has fluctuated over the last five years.

Some claims are still open, and shifts lost associated with those claims will add to average shifts lost over time. Some serious injuries will result in lost time that spans a number of years.

Table 3: Lost Time Injury Types 2020

Injury Type	Lost Time Injuries	% of Total Injuries
Musculoskeletal Disorder	118	36.76%
Slip or Trip	52	16.20%
Violence	21	6.54%
Struck Against	17	5.30%
Motor Vehicle Accident	17	5.30%
Struck By	16	4.98%
Mental Health	16	4.98%
Occupational Exposure - Chemical/Biological	13	4.05%
Caught In/On/Between Objects	11	3.43%
Fall or Jump	10	3.12%
Other	9	2.80%
Occupational Disease	8	2.49%
Allergies	4	1.25%
Fire/Explosion/Electrical	3	0.93%
Hazard	2	0.62%
Cancer	1	0.31%
Animal/Insect	1	0.31%
Recurrence	1	0.31%
Environmental	1	0.31%
Total	321	100

Graph 5: 5 year Trends for the Top 5 Injury Types Incidents

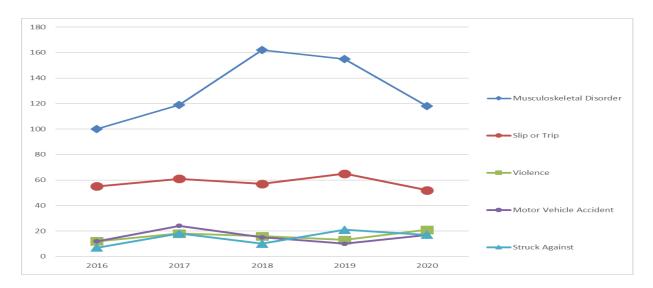


Table 4: Breakdown of Injury Type Totals for the 5-year Period 2016-2020

Top 5 Injury Types by Total Incident Count					
Musculoskeletal Disorder	654				
Slip or Trip	290				
Violence	80				
Motor Vehicle Accident	78				
Struck Against	73				
Top 5 Injury Types by Total Days Lost					
Mental Health	8,192				
Musculoskeletal Disorder	6,655				
Violence	4,468				
Slip or Trip	3,936				
Motor Vehicle Accident	1,763				
Top 5 Injury Types by Average Days Lost per Incident					
Mental Health	93				
Violence	56				
Motor Vehicle Accident	23				
Fall or Jump	15				
Slip or Trip	14				

Analysis of the above tables shows that Musculoskeletal Disorders are the leading type of injury experienced by our employees followed by Slips and Falls. Much of our injury prevention work has focused on reducing the risks associated with ergonomic hazards and poor body mechanics.

The tables also illustrate that other types of claims, although they occur less frequently compared to Musculoskeletal Disorders and Slips and Falls, appear to be more serious in nature and result in longer periods away from work and a slower return to work. These types of injuries include Mental Health claims, incidents of Violence, Motor Vehicle Accidents, Slips or Trips and Falls. The prevention of injuries in these areas also remains a priority.

Workplace COVID-19 Claims (WSIB)

- 17 Lost Time claims were filed with the WSIB with the following outcomes:
 - 6 claims required no further action as the employee tested negative for COVID-19
 - 1 claim was denied by the WSIB
 - 10 claims were approved by the WSIB for lost time due to COVID-19. (four in the Long Term Care; four in Hamilton Paramedic Services and two in Public Works)

Overall Lost Time Injuries by Department 2016 to 2020

The table below include departmental statistics related to lost time injury counts and rates and shifts lost for new claims.

Table 5: Overall Lost Time Injuries 2016 to 2020

	Lost Time Injuries				
	2016	2017	2018	2019	2020
City Housing Hamilton	7	8	4	10	3
City Manager's Office	1	0	0	0	1
Healthy and Safe Communities	122	160	221	228	184
Corporate Services	1	0	2	2	2
Planning & Economic Development	11	12	10	9	11
Public Works	105	150	151	132	120
Corporation Total	247	330	388	381	321

	Lost Time Injury Rate				
	2016	2017	2018	2019	2020
City Housing Hamilton	5.41	6.36	3.22	7.77	2.24
City Manager's Office	7.00	0.00	0.00	0.00	0.86
Healthy and Safe Communities	5.34	7.09	8.64	8.81	7.38
Corporate Services	0.29	0.00	0.47	0.47	0.46
Planning & Economic Development	2.03	2.19	1.74	1.50	2.05
Public Works	4.72	6.70	6.65	5.73	5.33
Corporation Total	4.10	5.46	6.35	6.15	5.34

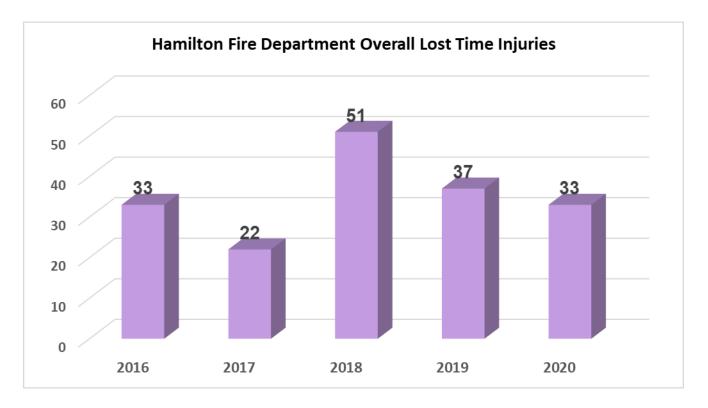
	Shifts Lost, New Lost Time Injuries				
	2016	2017	2018	2019	2020
City Housing Hamilton	28	88	23	98	8
City Manager's Office	7	0	0	0	1
Healthy and Safe Communities	641	676	1,177	1,406	939
Corporate Services	3	0	6	147	10
Planning & Economic Development	77	213	119	57	124
Public Works	668	1,125	1,278	1,245	1,210
Corporation Total	1,424	2,102	2,603	2,953	2,292

	Average Days lost per new injury*				
	2016	2017	2018	2019	2020
City Housing Hamilton	5.43	9.93	5.5	11.20	2.67
City Manager's Office	7.00	0	0	0	1.00
Healthy and Safe Communities	17.27	10.45	21.33	20.83	8.82
Corporate Services	1.00	0	3.00	73.50	5.00
Planning & Economic Development	8.19	46.33	14.75	15.70	15.64
Public Works	14.15	35.17	17.58	21.26	18.24
Corporation Total	15.14	22.91	19.52	20.86	12.42

^{*}Calculated as of February 23, 2021. These amounts will go up as some claims are still open and the employees have not returned to work.

Areas of Focus

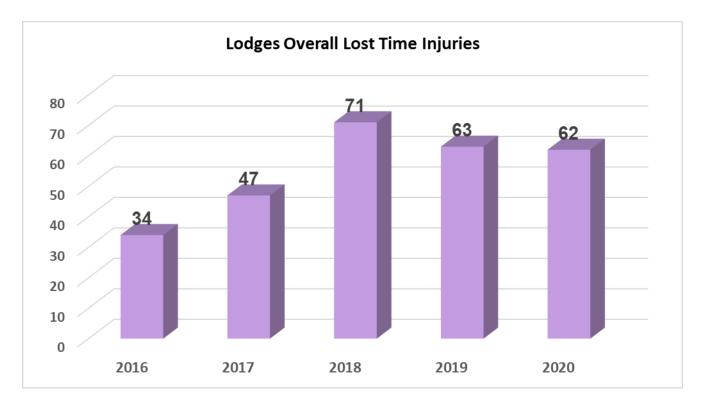
Graph 4: Hamilton Fire Department Overall Lost Time 2016 to 2020



Fire Department leadership targeted prevention of lost-time claims due to musculoskeletal injuries, mental health risks and slips and falls. In response, initiatives include:

- Continued delivering the Mental Health Commission of Canada's Road to Mental Readiness workplace mental health training program to firefighters used certified in-house trainers
- Instituted a safe lifting training program that will be completed by every firefighter
- Created an awareness program targeting prevention of slips and falls that included messaging on being aware of surroundings and changing conditions with reminders including posters in all fire stations

Graph 5: Long Term Care Overall Lost Time 2016 to 2020



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

The leadership team in 2020 focused efforts on mitigating risk, enhanced and increased education with front line staff regarding exposure to Occupational Disease during this pandemic.

There is an ongoing review of required equipment to assist staff to reduce strains associated with helping residents with their day-to-day activities. There has been significant work with Return to Work Specialist and Long Term Care managers to support staff through the return to work process to have a successful return to the workplace from a workplace injury. Education, modified hours of work, modified duties are planned collaboratively between all parties for staff to feel supported returning to the workplace. Supervisors are coaching employees to ensure available equipment is being used properly and consistently.

Regular review of infection control policies, procedures and equipment, continue to support and have reduced staff exposures and limited the transmission of pathogens in the workplace. With the novel virus of COVID-19 the Homes are working collaboratively with Hamilton Public Health and other key stakeholders to ensure that we are implementing everything possible to keep our staff, residents and Homes safe.

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) Overall Lost Time Injuries

Graph 6: Hamilton Street Railway (HSR) Overall Lost Time 2016 to 2020

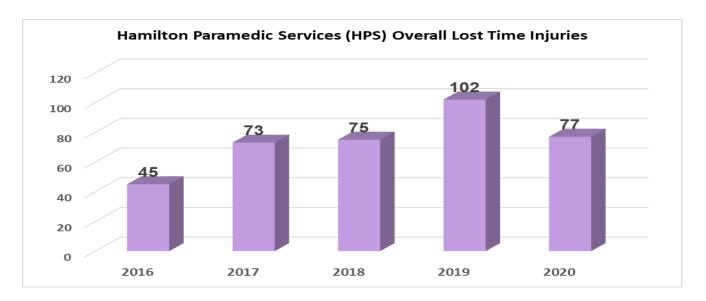
HSR management, Human Resources and front-line staff are collaborating on efforts to address workplace ergonomic hazards, mental health and violence.

Operators are being trained on how to properly set up seats and make other adjustments to their driving positions to prevent musculoskeletal injuries. A vibration study is being considered to identify any potential risk to operators and respond to the study's findings and recommendations, if any. Bus manufacturers were contacted to ensure specifications are up to date and best practices are identified for operation and maintenance of the fleet of specific buses.

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

In 2020, HSR utilized a University of Waterloo Kinesiology students in collaboration with Human Resources to assist in identifying ergonomic hazards and resources to prevent injuries and improve staff well-being.

Graph 7: Hamilton Paramedic Services (HPS) Overall Lost Time 2016 to 2020



HPS encounters high levels of mental health claims and musculoskeletal injuries which are not unusual given the nature of their activities. They responded to the high number of mental health claims by providing mental health supports through our EFAP provider and other community resources. To assist in reducing musculoskeletal injuries an education campaign was completed 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, with 14 active peer volunteers, continues to evolve to support employees in need of assistance. Annual team member training under Mental Health Professional guidance was provided

Health and Safety Initiatives

- Much of the work of the Health, Safety and Wellness team was directed towards developing the health and safety framework for our COVID-19 pandemic emergency response.
- A new computer workstation ergonomics program was rolled out in the fall. Rapid Office Strain Assessment (ROSA) provides guidance on proper computer workstation set up using videos, photographs and tips. The online self-assessment tool lets employees evaluate their current set up and make immediate improvements to the positioning of their desks, chairs, computers, monitors and other equipment. The tool provides a report that can be shared with their manager. The assessment tool was particularly helpful for staff working remotely and will also help our Health Safety Wellness Team understand the risk factors of individual employees and across our entire workforce and allow us to make better decisions about implementing additional measures to reduce injury risks and improve comfort.

Workplace Mental Health

- The Working Mind mental health training program from Mental Health
 Commission of Canada (MHCC) was delivered to 32 frontline staff in 2020. Due
 to the pandemic, in class sessions ceased. Instructors received training on
 delivering the program though an online platform. One virtual session was
 completed in 2020.
- 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 2020, 72 leaders were trained and to date, 398 people leaders across the organization have been certified through the program.
- Human Resources and Mental Health Advisory Committee developed a tool kit for frontline supervisors to assist them in promoting good mental health in their workplaces and amongst their teams.

Other 2020 Initiatives

 422 employees were trained in the Workplace Hazardous Materials Information System (WHMIS) training program in 2020. The program reflects changes made to the hazard classification system for workplace chemical safety symbols, labelling and information sheets in our workplaces.

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- 91 people leaders completed online mandatory manager health and safety awareness training for supervisors; 334 front-line staff completed the online training for workers.
- Two training sessions on non-violent crisis intervention techniques were held for staff across the organization.
- Individual ergonomic assessments were completed by the Health, Safety and Wellness team for approximately 104 staff and improvements made to the design of their workstations and the equipment they use to complete their tasks.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable