




# INFORMATION REPORT

<b>TO:</b>	Chair and Members Audit, Finance and Administration Committee
<b>COMMITTEE DATE:</b>	March 23, 2023
<b>SUBJECT/REPORT NO:</b>	Annual Occupational Injury & Illness Claims Report 2022 (HUR23003) (City Wide)
<b>WARD(S) AFFECTED:</b>	City Wide
<b>PREPARED BY:</b>	Yakov Sluchenkov (905) 546-2424 Ext. 2655 David Lindeman (905) 546-2424 Ext. 5657
<b>SUBMITTED BY:</b>	Lora Fontana Executive Director Human Resources
<b>SIGNATURE:</b>	

## COUNCIL DIRECTION

Human Resources staff reports on the City's Workplace Safety and Insurance Board (WSIB) experience to the Audit Finance and Administration Committee on an annual basis. At the direction of Council, this report is to include an annual information update on the experience of the City, including identifying the City's 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. This report provides an overview of that information for the period of January to December 2022, with relevant comparisons from 2018 through 2022.

## INFORMATION

The City experienced an increase in work-related lost time incidents in 2022 and decreases in Total Days Lost, the Lost-time Injury rate and total Workplace Safety & Insurance Board (WSIB) costs.

- New Lost-Time incidents increased from 378 in 2021 to 389 in 2022. 78 of the incidents in 2022 were related to COVID-19 compared to 62 in 2021
- Total days lost decreased from 14,055 in 2021 to 13,124 in 2022.
- Lost-time injury rate decreased from 6.03 to 6.01.
- Total WSIB costs decreased from \$10,409,980 to \$10,022,612.

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Human Resources continues to collaborate with the operating departments to ensure that optimal and advanced interventions and measures are incorporated with respect to the overall health, safety and wellness of employees. These have included advanced tools, equipment, education and preventive measures which, over time, have proven to be successful, as demonstrated through the overall decreases in lost time injury rates, total days lost and ultimately, total WSIB related costs. Save and except the COVID related incidents, the lost time incidents also experienced a decline in 2022.

The following tables and graphs provide an overview of the City's WSIB claims experience over the past 5 years. The count of Lost Time Injuries includes claims that appear in this report include claims that have been approved by the Workplace Safety & Insurance Board (WSIB) or approval is still pending. It does not include claims that were denied by the WSIB or were abandoned by the employee. It also does not include Hamilton Police Services or Hamilton Public Library claims.

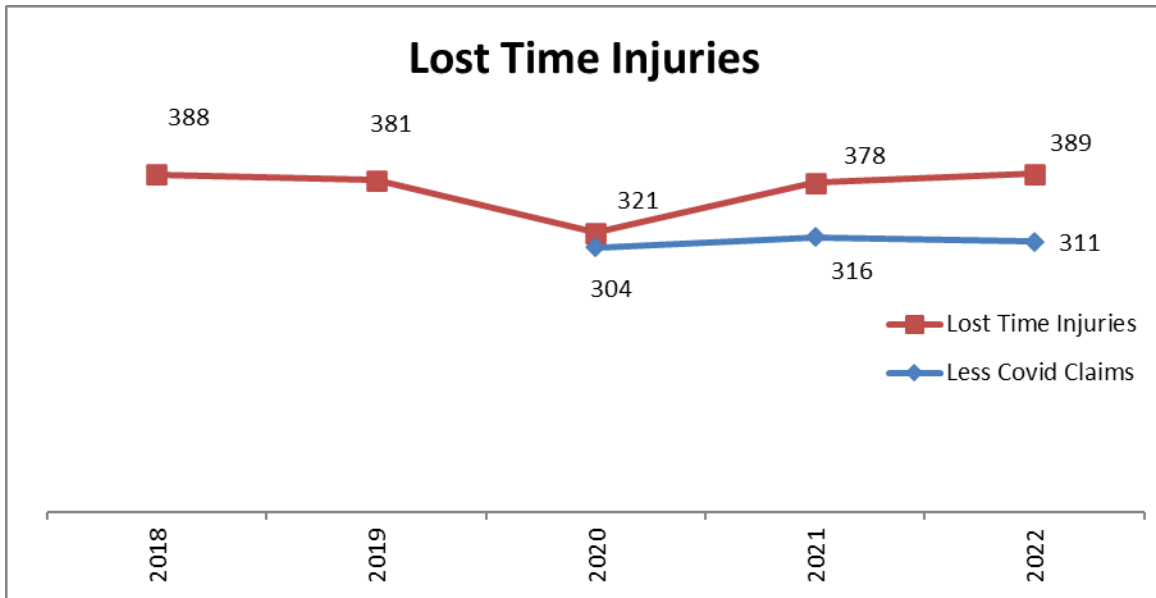
**Table 1: Lost Time Injuries, Shifts Lost and Costs 2018 – 2022**

<b>Year</b>	<b>Average Eligible Employee Headcount</b>	<b>WSIB Shifts Lost</b>	<b>New Lost Time Injuries</b>	<b>Total WSIB Costs</b>
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
2021	8,380	14,055	378	\$10,409,980
2022	8,433	13,124	389*	\$10,022,612

\* Note: 78 of the claims in 2022 were related to COVID-19 (compared to 62 in 2021)

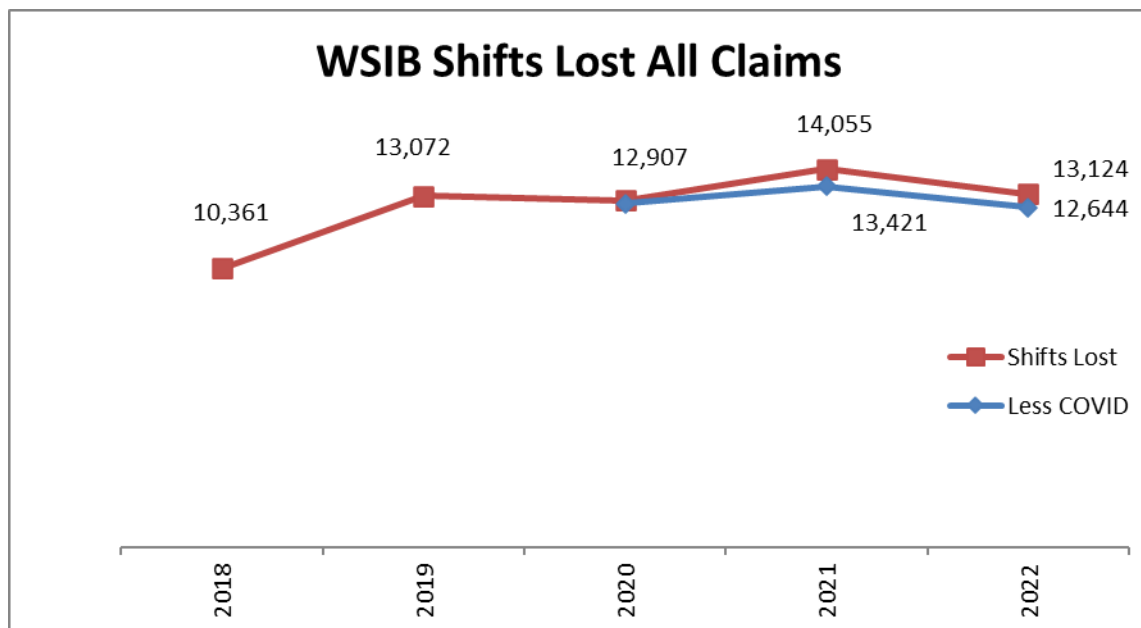
**Graph 1: Lost Time Injuries 2018 to 2022**

The number of Lost Time claims increased to 389 in 2022 from 378 in 2021 (+2.9%).



**Graph 2: WSIB Shifts Lost 2018 to 2022**

The number of days (shifts) lost to WSIB absences decreased in 2022 compared to 2021.



**Graph 3: WSIB Costs 2018 to 2022**

The costs related to all WSIB claims decreased in 2022 compared to 2021. These costs include employee benefits, healthcare, and administration fees applied by the WSIB.

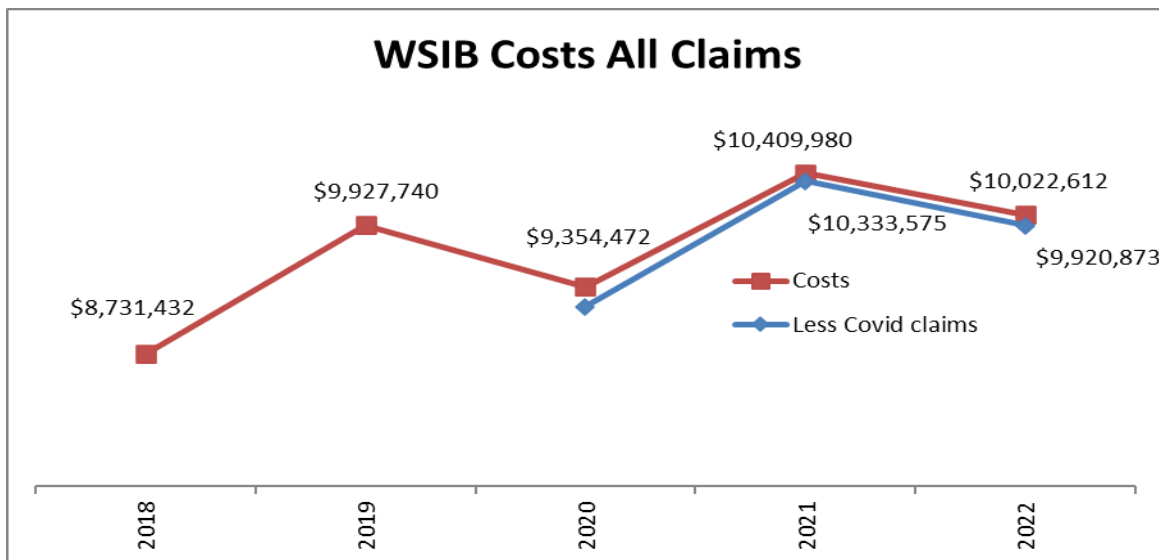


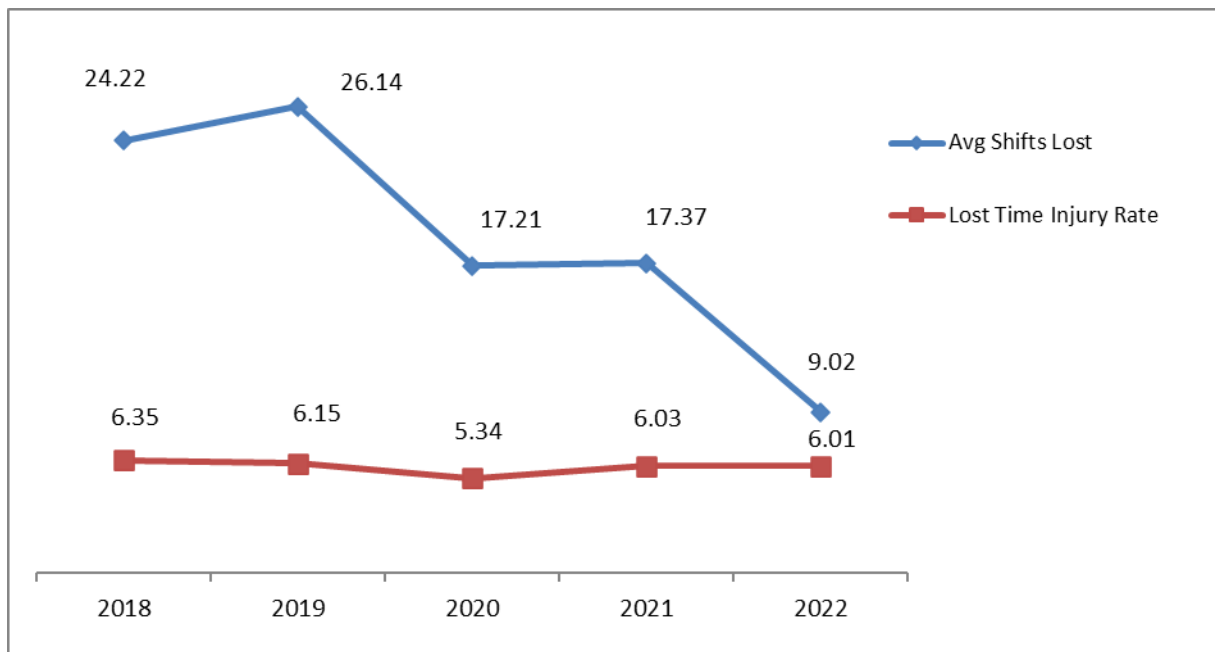
Table 2 below, provides lost time injury data expressed as a Lost Time Injury Rate per 100 employees i.e. (# of lost time injuries/(total hours worked/2,000)X100) and considers all hours worked by our employees and divides the total by 2,000 hours to approximate a full-time equivalent (or “FTE”) employee 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 5).

**Table 2: Lost Time Injury Rates and Average Days Lost 2018 - 2022**

Year	Lost Time Injury Rate	Average of Days Lost per Injury*
2018	6.35	24.22
2019	6.15	26.14
2020	5.34	17.21
2021	6.03	17.37
2022	6.01	9.02

*\*Calculated as of February 10, 2023. 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)**



Some claims included in Average Shifts Lost line in Graph 4 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 will impact results over the course of multiple years.

**Table 3: Lost Time Injury Types 2022**

Injury Type	Lost Time Injuries	% of Total Injuries
Musculoskeletal Disorder	116	29.82%
Occupational Exposure - Chemical/Biological	81	20.82%
Slip or Trip	62	15.94%
Mental Health	28	7.20%
Struck Against	19	4.88%
Violence	16	4.11%
Motor Vehicle Accident	15	3.86%
Struck By	12	3.08%
Fall or Jump	10	2.57%

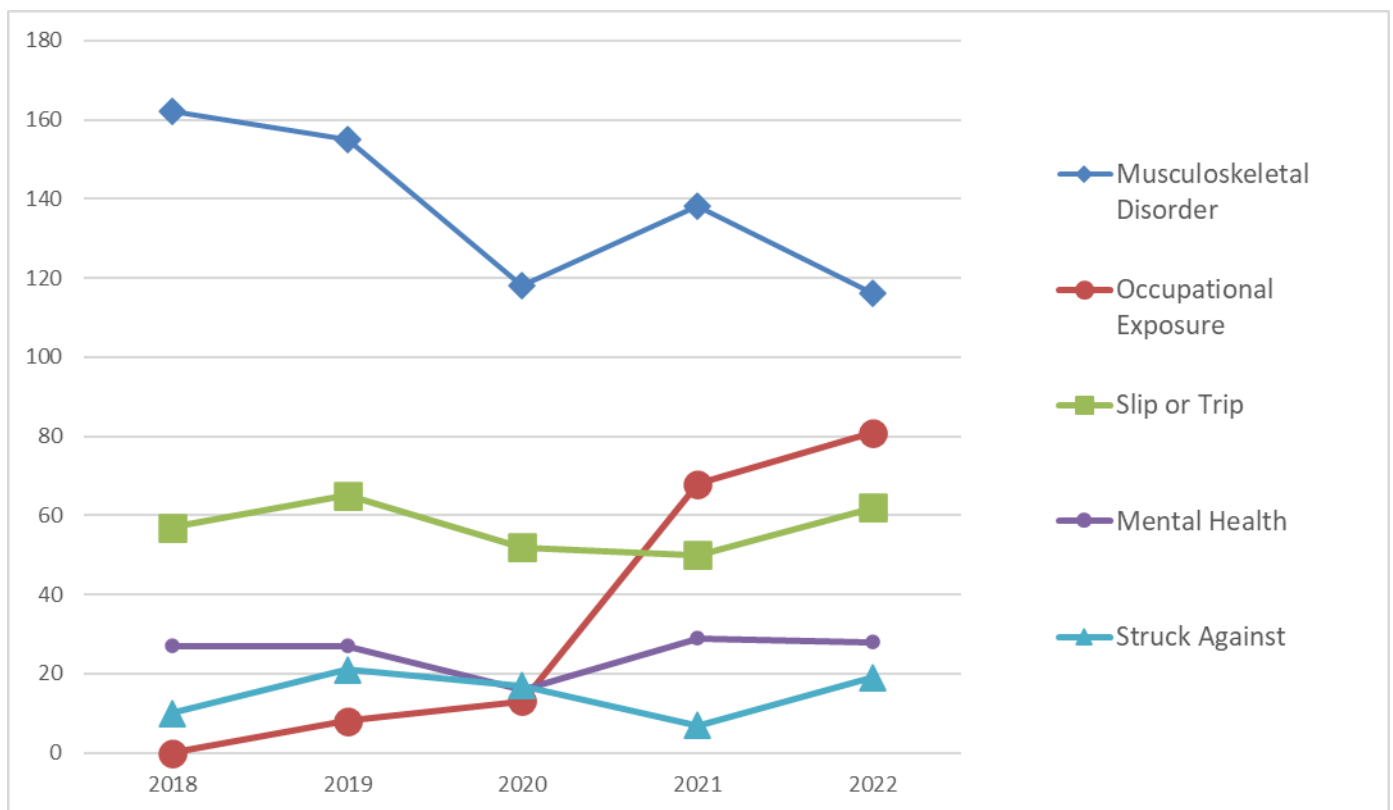
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Injury Type	Lost Time Injuries	% of Total Injuries
Caught In/On/Between Objects	9	2.31%
Other	9	2.31%
Animal/Insect	4	1.03%
Environmental	3	0.77%
Fire/Explosion/Electrical	2	0.51%
Occupational Disease	2	0.51%
Sharps – Medical	1	0.26%
	<b>389</b>	<b>100%</b>

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



**Table 4: Breakdown of Injury Type Totals for the 5-year Period 2018-2022**

<b>Top 10 Injury Types by Total Incident Count</b>	
Musculoskeletal Disorder	646
Slip or Trip	278
Occupational Exposure - Chemical/Biological	149
Mental Health	118
Other	110
Struck By	92
Violence	82
Motor Vehicle Accident	68
Struck Against	73
Fall or Jump	56

<b>Top 10 Injury Types by Total Days Lost</b>	
Mental Health	10,513
Musculoskeletal Disorder	6,891
Violence	4,508
Slip or Trip	3,726
Motor Vehicle Accident	2,015
Struck Against	1,286
Occupational Exposure - Chemical/Biological	1158
Struck By	898
Other	746
Fall or Jump	724

<b>Top 10 Injury Types by Average Days Lost per Incident</b>	
Mental Health	89
Violence	55
Motor Vehicle Accident	30
Struck Against	18
Occupational Disease	13
Fall or Jump	13
Slip or Trip	13
Musculoskeletal Disorder	11
Fire/Explosion/Electrical	9
Occupational Exposure - Chemical/Biological	8

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The above tables show that Musculoskeletal Disorders remain 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. As noted in Graph 5, Lost-time incidents of Musculoskeletal Disorders declined in 2022 and are down significantly from 2018 levels.

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

**Workplace COVID-19 Claims (WSIB)**

In 2022, 78 COVID-19 Lost Time claims were approved by the WSIB or approval is still pending. These claims occurred in the following departments:

- 72 Long-term Care
- 1 Public Works
- 1 Hamilton Fire Department
- 4 Hamilton Paramedic Services

**Overall Lost Time Injuries by Department 2018 to 2022**

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 2018 to 2022**

	Lost Time Injuries				
	2018	2019	2020	2021	2022
City Housing Hamilton	4	10	3	4	6
City Manager’s Office	0	0	1	1	0
Healthy and Safe Communities	221	228	184	236	241
Corporate Services	2	2	2	2	0
Planning & Economic Development	10	9	11	9	13
Public Works	151	132	120	126	129
<b>Corporation Total</b>	<b>388</b>	<b>381</b>	<b>321</b>	<b>378</b>	<b>389</b>



	Lost Time Injury Rate				
	2018	2019	2020	2021	2022
City Housing Hamilton	3.22	7.77	2.24	2.96	4.35
City Manager's Office	0.00	0.00	0.86	0.89	0
Healthy and Safe Communities	8.64	8.81	7.38	8.72	8.67
Corporate Services	0.47	0.47	0.46	0.46	0
Planning & Economic Development	1.74	1.50	2.05	1.68	2.29
Public Works	6.65	5.73	5.33	5.48	5.44
<b>Corporation Total</b>	<b>6.35</b>	<b>6.15</b>	<b>5.34</b>	<b>6.03</b>	<b>6.01</b>

	Shifts Lost, New Lost Time Injuries				
	2018	2019	2020	2021	2022
City Housing Hamilton	23	98	8	21	39
City Manager's Office	0	0	1	25	0
Healthy and Safe Communities	1,177	1,406	939	1,526	1,184
Corporate Services	6	147	10	3	0
Planning & Economic Development	119	57	124	64	123
Public Works	1,278	1,245	1,210	1,129	1,060
<b>Corporation Total</b>	<b>2,603</b>	<b>2,953</b>	<b>2,292</b>	<b>2,768</b>	<b>2,406</b>

	Average Days lost per new injury*				
	2018	2019	2020	2021	2022
City Housing Hamilton	5.50	11.20	4.00	5.25	6.50
City Manager's Office	0	0	0	25.00	0
Healthy and Safe Communities	27.07	27.56	11.07	14.77	6.75
Corporate Services	3.00	73.50	5.00	5.50	0
Planning & Economic Development	14.75	15.70	14.83	14.22	9.77
Public Works	21.13	24.92	27.33	22.86	13.30
<b>Corporation Total</b>	<b>24.22</b>	<b>26.14</b>	<b>17.21</b>	<b>17.37</b>	<b>9.02</b>

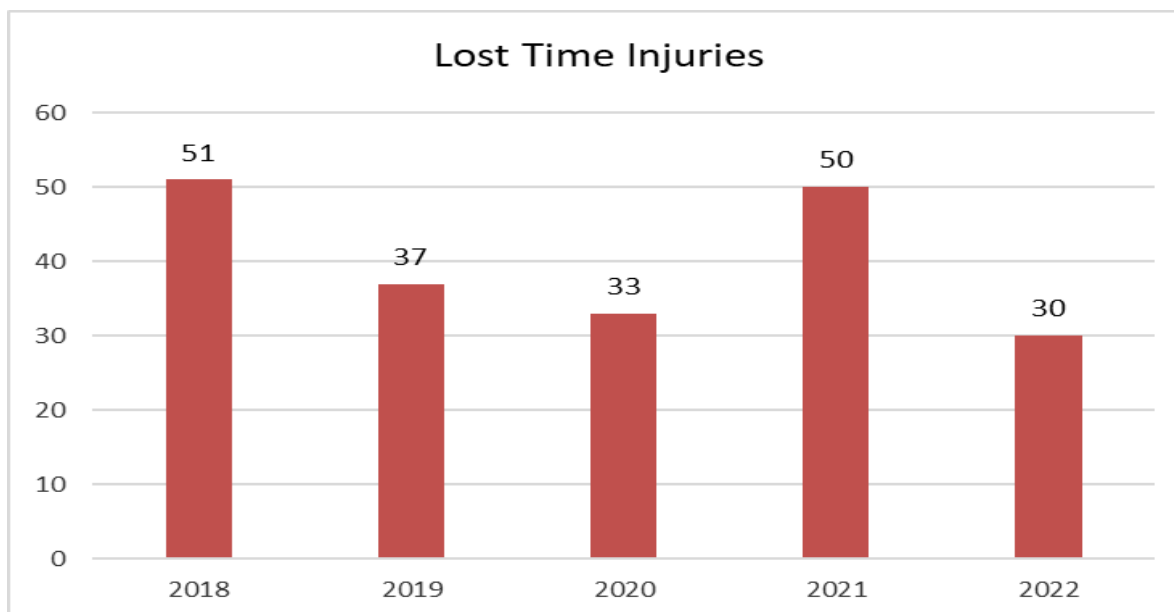
\*Calculated as of February 21, 2022. These amounts will go up as some claims are still open and the employees have not returned to work.

**Operational Areas of Focus**

As per previous Council direction, this report provides updates from specific operational areas that account for a larger proportion of lost time injuries and illnesses. The updates include strategies and initiatives established to address lost time occupational injuries and illnesses.

**Hamilton Fire Department**

**Graph 6: Hamilton Fire Department Overall Lost Time 2018 to 2022**

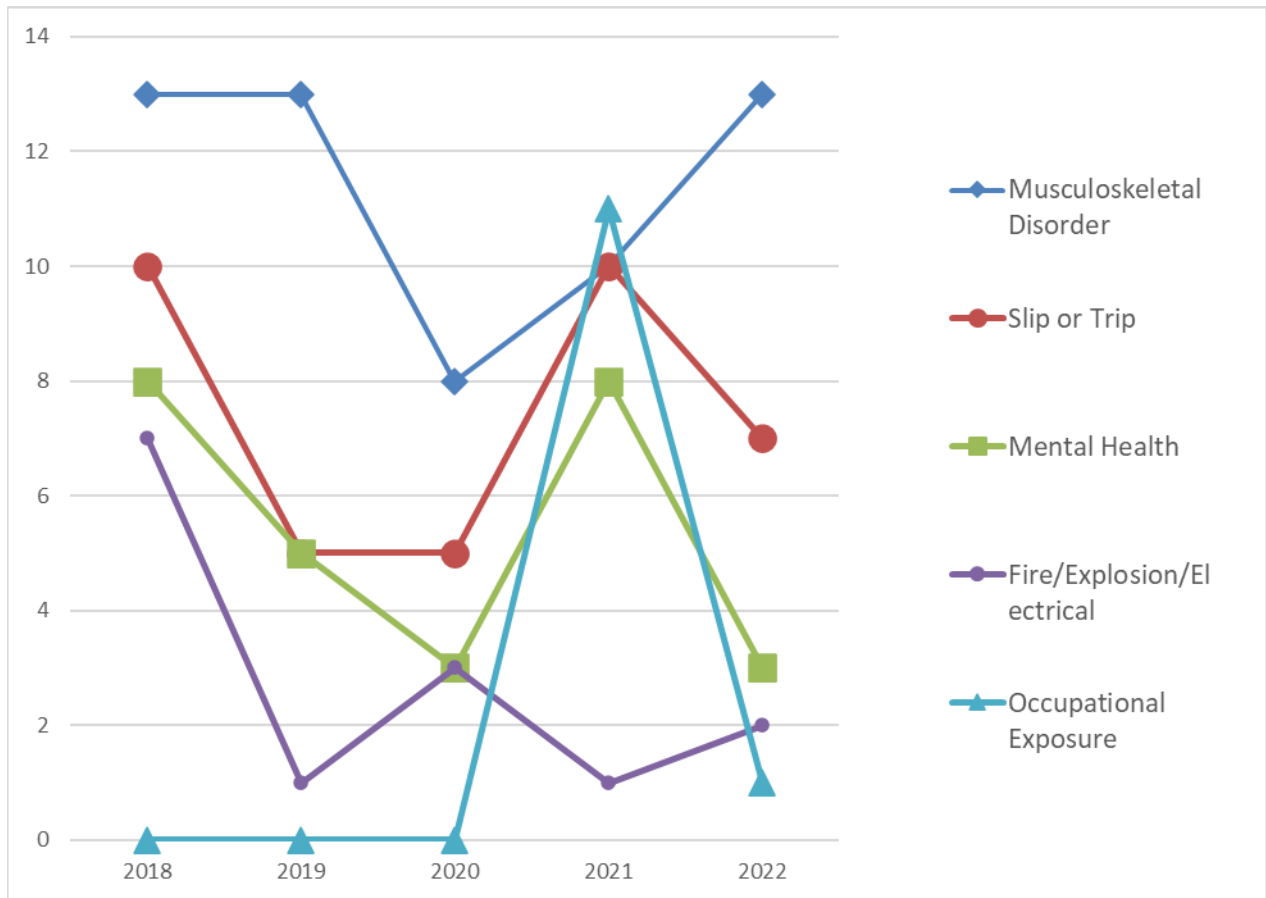


**Table 6: Lost Time Injury Types 2022 – Hamilton Fire**

Musculoskeletal Disorder	13
Slip or Trip	7
Mental Health	3
Fire/Explosion/Electrical	2
Other	1
Struck Against	1
Struck By	1
Animal/Insect	1
Occupational Exposure - Chemical/Biological	1*

\*Claim related to COVID-19

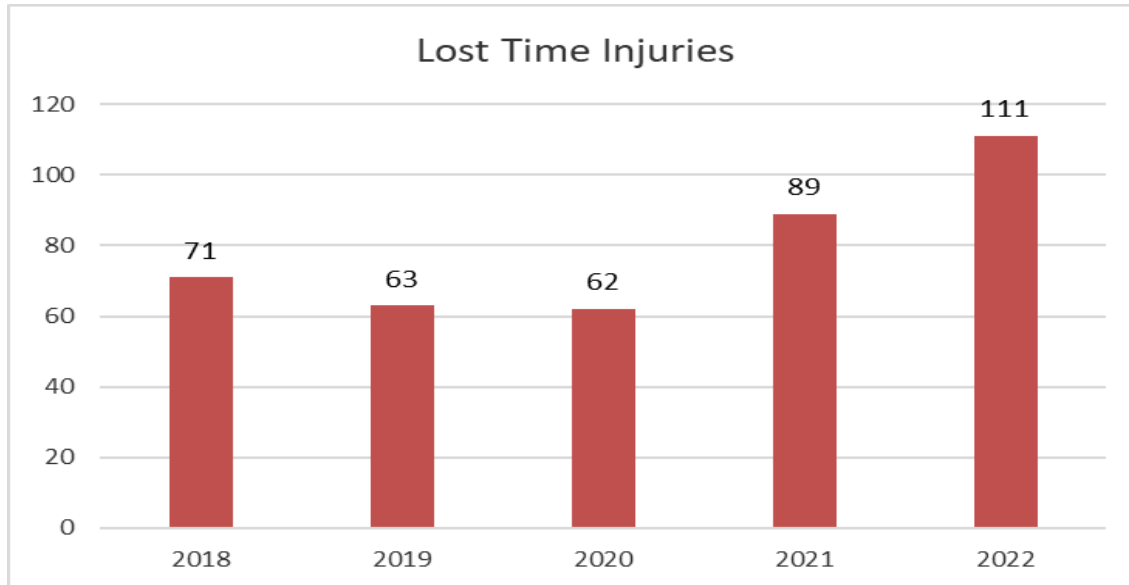
**Graph 7: 5 year Trends for the Top 5 Injury Types – Hamilton Fire**



The Fire Department saw a significant 40% reduction in total lost time accidents from 50 in 2021 to 30 in 2022. This is the lowest number of lost time accidents in the past 5 years. Although staff maintained a focus on training and accident prevention reviews, the continued increase in structure fire responses in 2022 has become the root cause for the main area of increase - Musculoskeletal Disorder injuries which increased from 10 to 13.

**Long-term Care Homes**

**Graph 8: Long-term Care Homes Overall Lost Time 2018 to 2022**

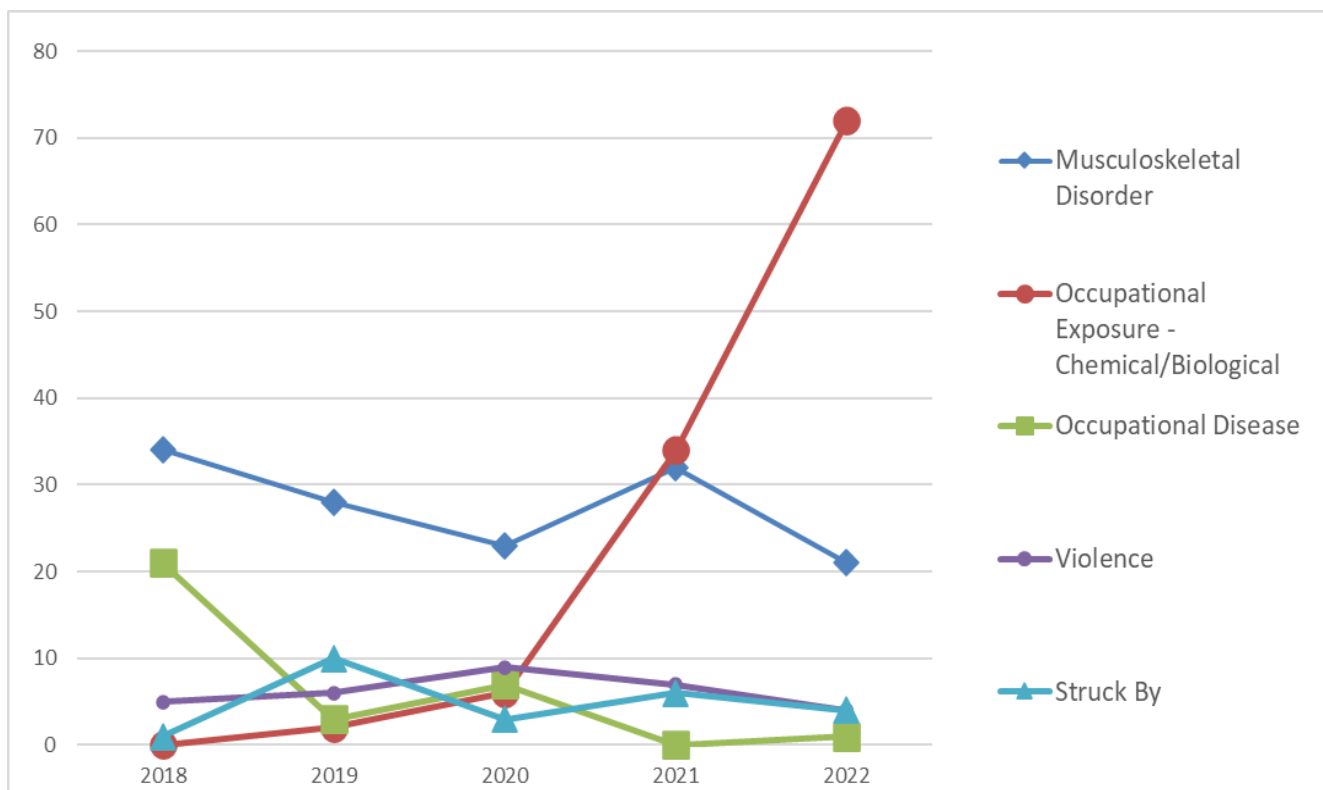


**Table 8: Lost Time Injury Types 2022 – Long-term Care**

Occupational Exposure - Chemical/Biological	72*
Musculoskeletal Disorder	21
Violence	4
Struck Against	4
Caught In/On/Between Objects	3
Struck By	2
Slip or Trip	2
Fall or Jump	1
Occupational Disease	1
Other	1

\* all 72 claims related to COVID-19

**Graph 9: 5 year Trends for the Top 5 Injury Types – LTC**



Due to the number of confirmed COVID-19 declared outbreaks at our long-term care facilities, the lodges experienced a sharp increase of work-related occupational exposure illnesses.

To increase protection against the spread of COVID-19 and other infectious diseases, a new air purifying system was installed. High efficiency particulate air (HEPA) purifiers were introduced and strategically placed in areas with a high number of staff and in places where removal of mandatory masks is allowed (e.g. staff break/lunch room, Rapid Antigen Testing clinic, Adult Day Program, staffing office, training room). Hand hygiene and personal protective equipment audits were conducted regularly to ensure procedures were followed. Daily rapid antigen testing of all employees continued.

To address musculoskeletal injuries, Proper Lifting Techniques training was provided to staff who perform lifting tasks (e.g. nursing staff, personal support workers). Additional patient transfer equipment (lifts and slings) were added to reduce musculoskeletal disorder incidents. The Resident Lift and Transfer policy has been reviewed and changes made to better outline the required assistance to be provided by staff with less opportunity for discretion in decision making for personal support workers which is in keeping with their scope of practice. Preventative maintenance was improved on all the medication and treatment carts to ensure they move freely, and the forces needed to

move them throughout the facilities are reduced. New laundry carts have been ordered that are lighter and require less force to push.

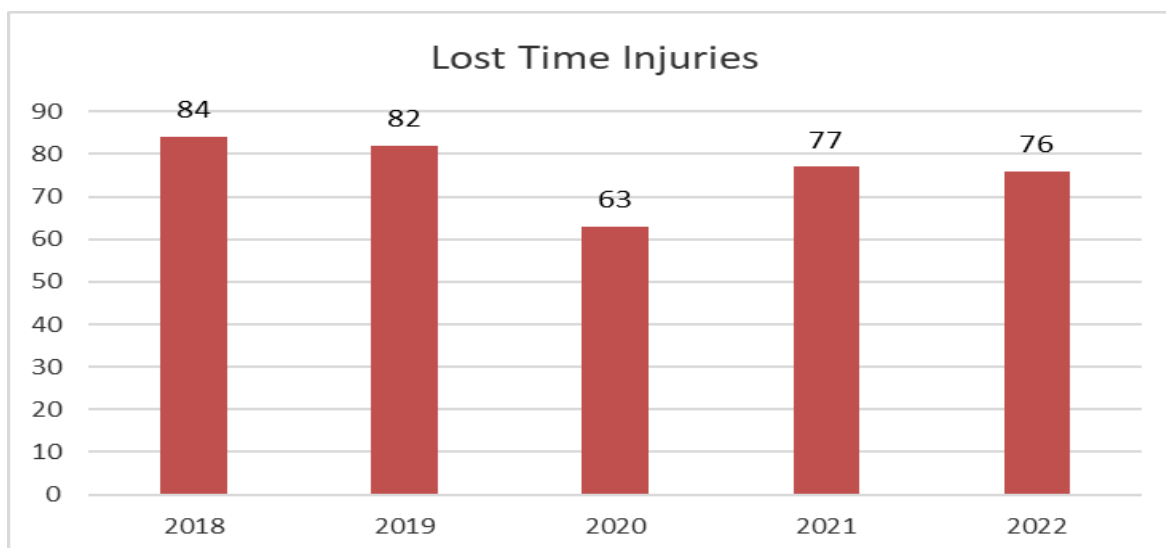
To assist in preventing violence related incidents, management improved the tracking of violence events and responding to incidents. Incidents are reviewed and followed up on by Nurse Leaders. Staff are provided with mandatory training on dementia and responsive behaviours to create safer interactions with residents. Behavioural Support Ontario resources were available on-site to assess individual residents to identify triggers and develop care plans used by employees to help them better manage their response to behaviours from residents. Before accepting residents with high risk responsive behaviours to our wait list or empty beds, there is a thorough review by the Director of Nursing, Administrator and Medical Director. If the Lodges do not have the resources or skills to safely manage the resident's behavioural health needs, a refusal letter is provided to the candidate and Home and Community Care Support Services.

Wellness initiatives have continued in our Homes, such as a 30-day wellness challenge, a 30-day 10,000 daily step challenge, monthly updates to the Wellness Board, as well as other activities to engage employees and support employee mental health and well-being.

New roles created in response to the pandemic (screening and rapid testing) have been maintained and continue to provide an opportunity for modified duties for returning injured and ill staff to work sooner as they transitioned back to their original positions.

### **Hamilton Street Railway (HSR)**

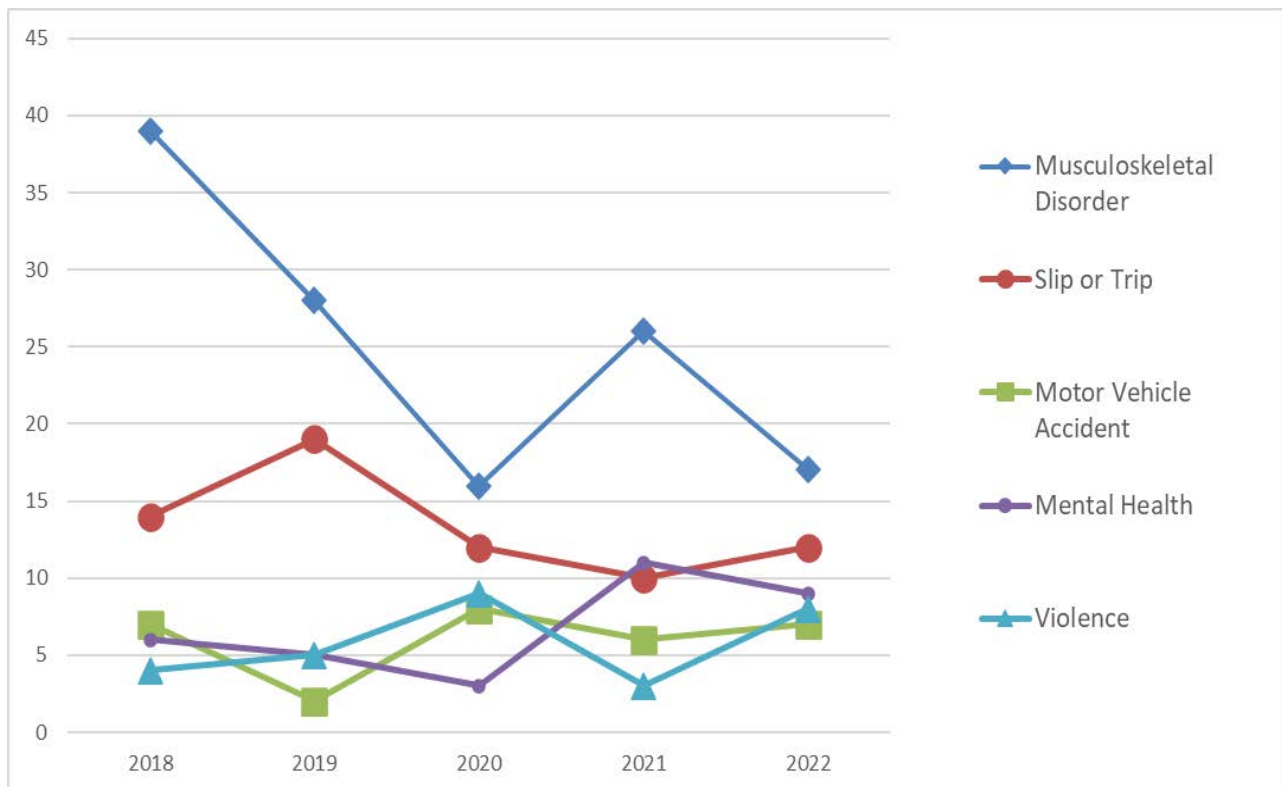
**Graph 10: Hamilton Street Railway (HSR) Overall Lost Time 2018 to 2022**



**Table 9: Lost Time Injury Types 2022 - HSR**

Musculoskeletal Disorder	17
Slip or Trip	12
Mental Health	9
Violence	8
Struck Against	7
Motor Vehicle Accident	7
Other	5
Struck By	3
Fall or Jump	2
Occupational Exposure - Chemical/Biological	2
Animal/Insect	2
Caught In/On/Between Objects	1
Environmental	1

**Graph 11: 5 year Trends for the Top 5 Injury Types Incidents - HSR**



Overall, there has been a significant decline in musculoskeletal injuries over the past 5 years which has been a focus of health and safety activities.

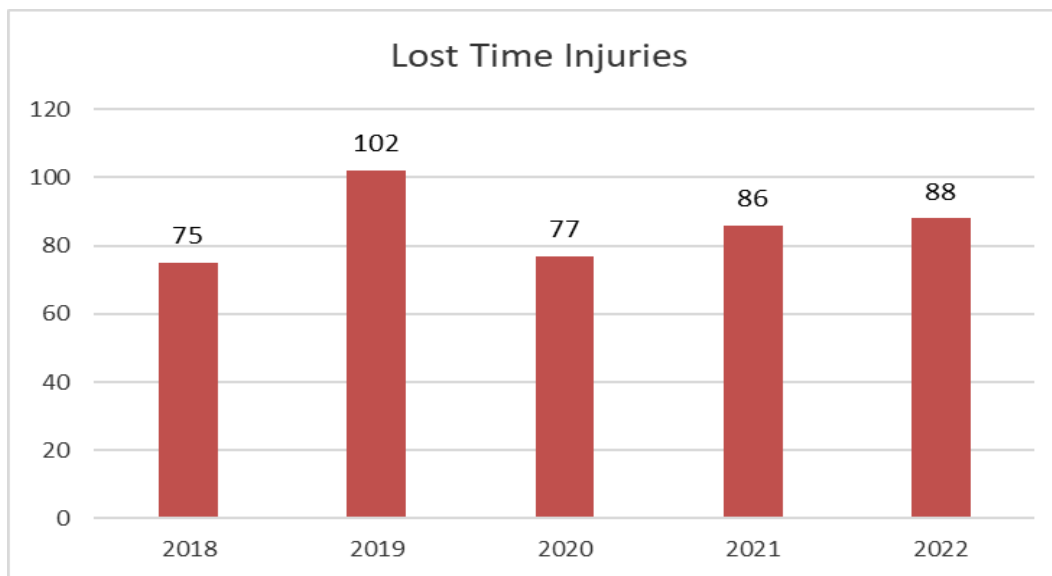
HSR management, Human Resources, front-line staff and their representatives are collaborating to address workplace ergonomic hazards, mental health issues and incidents of violence through the joint health and safety committee and other forums.

Mitigation strategies identified from a recent vibration study conducted on the HSR Bus Fleet include a continued focus on ergonomics (i.e. proper seating postures and seat adjustments), important role of stretch and rest breaks throughout the shift and lifestyle and wellness choices that will encourage staff to focus on their overall physical and mental health.

HSR Management has revamped their Assaults Procedure for responding to on-duty Operator assaults by improving the immediate response to incidents and follow up through debriefs and implementation of go-forward strategies to prevent similar incidents.

### **Hamilton Paramedic Services (HPS)**

**Graph 12: Hamilton Paramedic Services (HPS) Overall Lost Time 2018 to 2022**



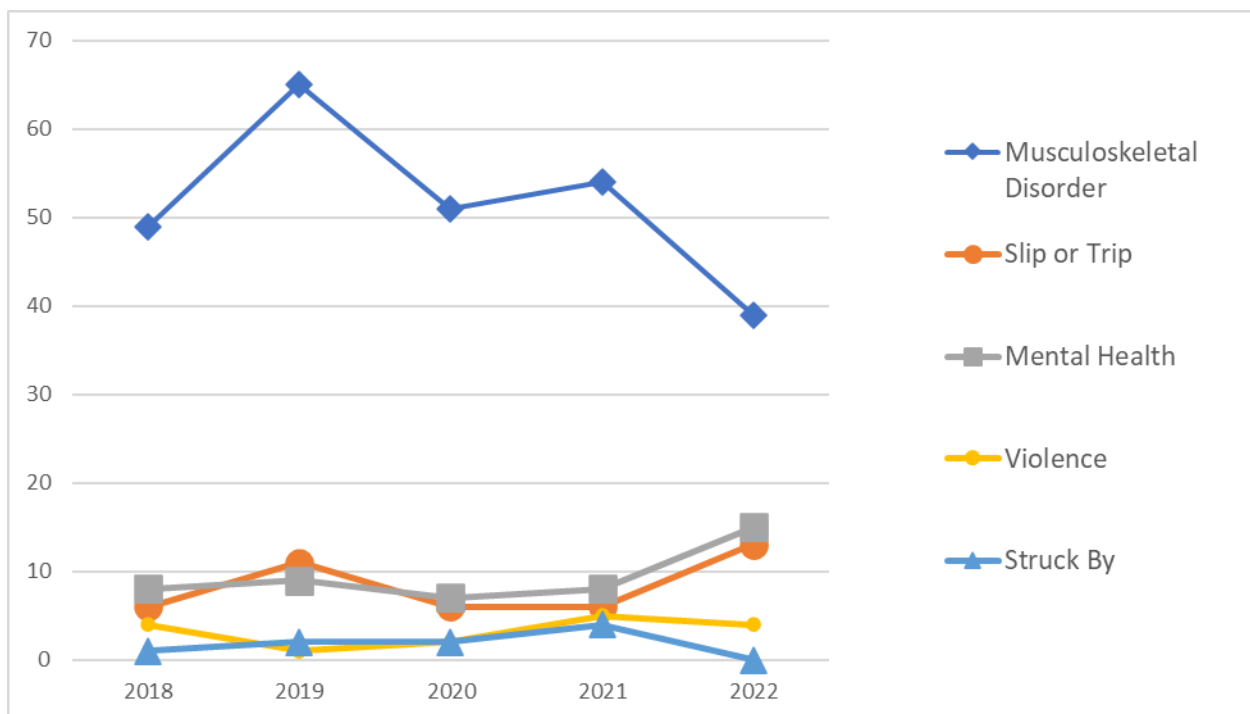


**Table 10: Lost Time Injury Types 2022 - HPS**

Musculoskeletal Disorder	39
Mental Health	15
Slip or Trip	13
Occupational Exposure - Chemical/Biological	6*
Violence	4
Motor Vehicle Accident	4
Fall or Jump	2
Caught In/On/Between Objects	2
Struck Against	1
Sharps - Medical	1
Occupational Disease	1

\* 4 claims related to COVID-19

**Graph 13: 5 year Trends for the Top 5 Injury Types Incidents - HPS**



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- In 2022 HPS implemented the Auto Pulse which is an automated chest compression device that has reduced musculoskeletal injuries and strain related to prolonged resuscitation events
- In 2022 HPS has secured and trained staff on new lifting equipment to further reduce musculoskeletal injuries. New equipment includes:
  - The Doty belt – assists staff with difficult and awkward lifts
  - The Elk lifting device – automated lifting device to reduce strains and sprains from manual lifts further reducing any harm to the patient
  - New and improved Stryker Stretcher –8% lighter in weight, proven to reduce workplace injuries, accessible battery location under the cot, versatility of head and foot end of cot to retract or extend, ergonomically designed transport handle
- Continue efforts with the Joint Occupational Health and Safety Committee to improve communication to all staff on education and preventative measures for the following:
  - Trips, slips and falls in slippery conditions
  - Proper mask wearing and importance of Personal Protective Equipment
  - Bed Bug precautions and considerations
  - Hazard flag reporting, Occupational health and safety concern form reporting (including near misses)
- In the fall of 2022, the Professional Development team brought in a specialist for a refresher workshop on workplace violence and personal safety skills. The program taught practical skills to successfully handle confrontations with violent people. Participants were also re-introduced to a court defensible method to articulate and explain their actions in these situations.
- The HPS Peer Support team, made up of front-line staff and Supervisors, has developed a robust program that includes a full day of education for new recruits. They have improved access to key resources, tools to assist all staff as they navigate through the mental health continuum, and a peer support Connect app that will connect staff confidentially with peer support team members.

The work that the Peer Support Team offers is key to the health and wellbeing of all employees with HPS and will continue to assist and navigate staff and reduce mental health injuries in the workplace.

### **Corporate Health and Safety Activities**

- The Health, Safety and Wellness team provided support in developing and revising the workplace health and safety precautions for our COVID-19 pandemic emergency response. Precautions included rapid antigen testing of employees who did not disclose full-vaccination status (distributing test kits, collecting test results and responding to issues of non-compliance) and daily health screening (maintaining screening tool, tracking close contacts and clearing employees to return to work)
- The team worked with the Security Office on improving safety and security of staff related to thefts, workplace break-ins and aggressive behaviours by individuals in or about the workplace.
- 431 employees were trained in the Workplace Hazardous Materials Information System (WHMIS) training program in 2022. The program includes hazard classification system for workplace chemical safety symbols, labelling and information sheets in our workplaces.
- 41 people leaders completed online mandatory manager health and safety awareness training for supervisors; 258 front-line staff completed the mandatory online training for workers. The training ensures staff are aware of their rights and duties under the *Occupational Health & Safety Act*
- Fifteen training sessions on non-violent crisis intervention techniques were held for staff across the organization with 236 employees trained.
- Created a new *Disconnecting from Work Policy* to set out expectations for employees and people leaders for work communications generated outside of normal working hours and provide employees with opportunities to disconnect from after-hours work communications.
- Created a new *Electronic Monitoring of Employees Policy* to set out details on how the City uses electronic technology to monitor employee activities and their use of City resources, what information is collected and how that information is used.
- Mental Health@Work Certificate Training for Leaders is delivered to staff 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 2022, 142 leaders were trained and to date, 580 people leaders were certified through the program

### **APPENDICES AND SCHEDULES ATTACHED**

Not Applicable