



## City of Hamilton Report for Information

**To:** Chair and Members  
Audit, Finance and Administration Committee

**Date:** April 10, 2025

**Report No:** **HUR25003**

**Subject/Title:** Annual Employee Absence Report 2024

**Ward(s) Affected:** City Wide

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### Recommendations

- 1) That Report HUR25003 respecting Annual Employee Absences 2024 **BE RECEIVED** for information.

### Key Facts

- This Report includes information about the City's occupational claims experience, including lost time injury rate, severity, areas experiencing higher numbers of incidents and strategies to reduce incidents.
- The report also provides an overview of non-occupational illness and injury data, including an analysis of Short-Term Disability (STD) absences, Long-Term Disability (LTD) absences and work accommodation activity.
- The reporting period includes January to December 2024, with relevant comparisons from 2020 through to 2024.

### Financial Considerations

Not applicable.

### Background

Human Resources reports on the City's experience as it relates to employee absences for both occupational and non-occupational claims. In addition, Council further requested an analysis of divisions with a larger proportion of occupational and non-

occupational claims. This report includes data from 2024 and provides comparison data for the previous four years.

## Analysis

### 1.0 Occupational Injury Measures

The tables and graphs below provide an overview of the City's occupational claims experience over the past five years. Occupational claims are managed by the Workplace Safety and Insurance Board (WSIB). Lost Time Injury measures include claims approved by the WSIB or where approval is pending, and excludes claims denied by WSIB or abandoned by the employee. In addition, claims from Hamilton Police Services and Hamilton Public Library are outside the scope of this Report,

In this report, the frequency of occupational injuries is expressed through Lost Time Injury Rate. Severity in the reporting year is demonstrated through Lost Time Injury Severity Rate – All Claims and includes days lost that were incurred from new and prior year claims. Previously, average days lost per lost time injury was stated as a measure of the severity of lost time injuries, however, this report now includes Lost Time Injury Severity Rate – All Claims which aligns with industry best practice for reporting data. Refer to Appendix A for definitions.

**Table 1: Lost Time Injuries, Days Lost, Lost Time Injury Rates, Lost Time Injury Severity Rates – All Claims, and Claims Costs from 2020 to 2024**

Year	Average Eligible Employee Headcount	New Lost Time Injuries	Lost Time Injury Rate	Days Lost – New Claims	Days Lost – All Claims	Lost Time Injury Severity Rate – All Claims	Total WSIB Costs
2020	8,183	322	6.35	2,292	12,907	216.12	\$9,354,472
2021	8,380	380	6.08	2,768	14,055	225.58	\$10,409,980
2022	8,433	385	5.89	2,406	13,124	204.12	\$10,022,612
2023	8,774	417	5.78	3,192	15,013	228.92	\$12,504,215
2024	9,034	379	5.62	3,066	16,746	248.35	\$14,672,562

In 2024, the City experienced the following:

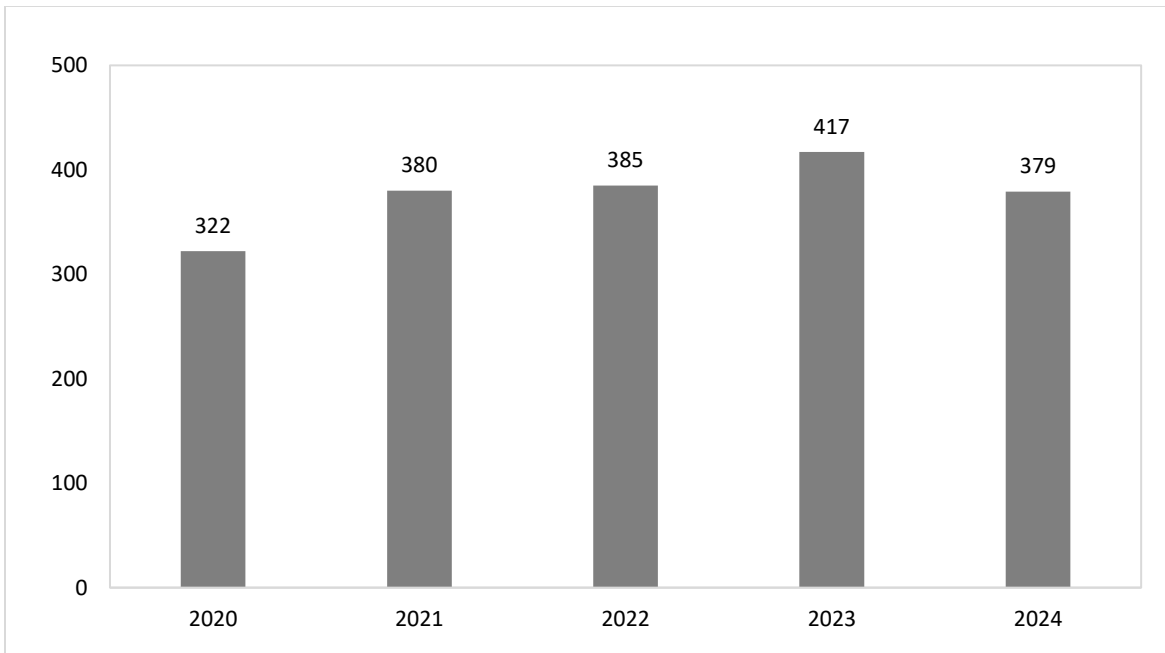
- New Lost Time Injuries decreased by 9.1%, from 417 to 379
- Lost Time Injury Rate decreased by 2.7% from 5.78 in 2023 to 5.62

- Days Lost from New Lost Time Claims decreased by 3.9% from 2023
- Days Lost from All Claims, including new claims and prior year claims continuing to accumulate lost time in 2024, increased by 11.5% when compared to 2023
- The Lost Time Injury Severity Rate for all claims, which include new and prior year claims continuing to accumulate lost time, increased by 8.5% from 2023
- Total WSIB costs increased from \$12,504,215 in 2023 to \$14,672,562

Human Resources continues to collaborate with operating departments to ensure preventative strategies and mitigation measures are implemented that improve the health, safety and wellness of employees. Activities across the organization include policy and procedure development, communication, training, targeted implementation of advanced tools, equipment, education and preventive measures all aimed at reducing the frequency and severity of injuries over time.

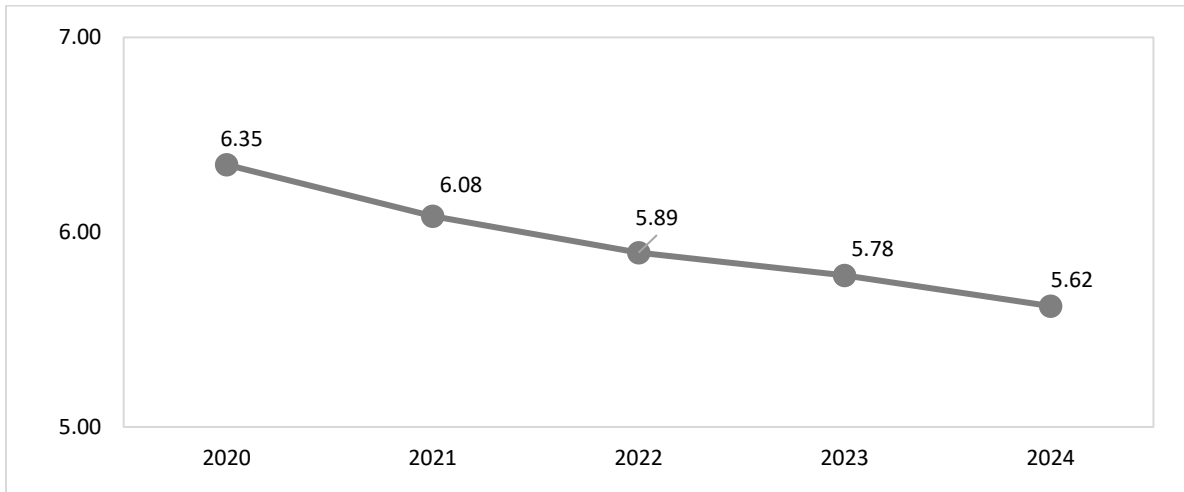
### Graph 1: New Lost Time Injuries from 2020 to 2024

The number of New Lost Time Injuries decreased from 417 in 2023 to 379 in 2024 (-9.1%).



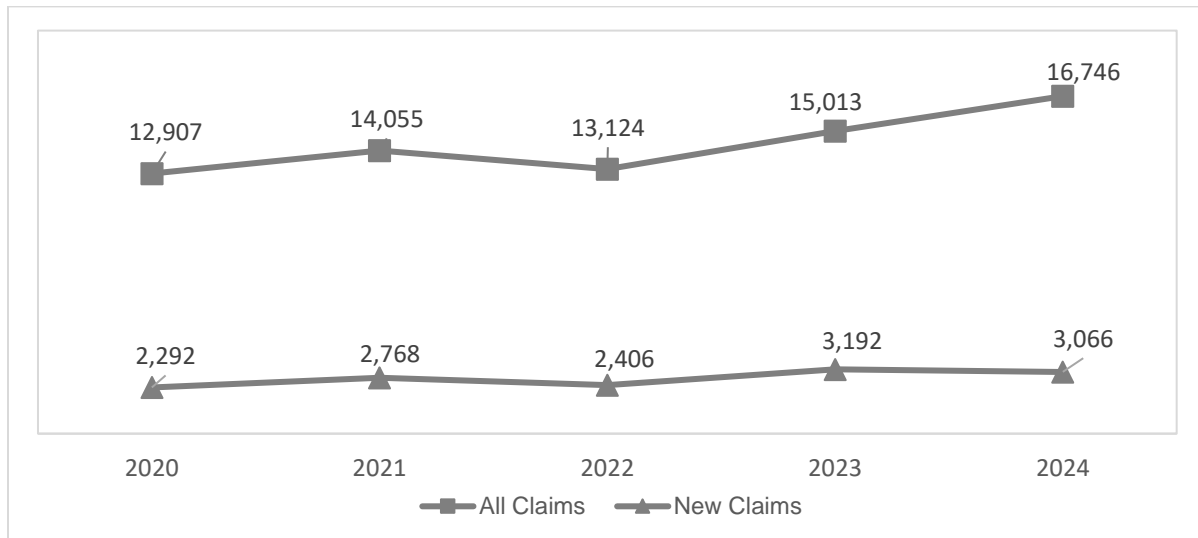
**Graph 2: Lost Time Injury Rate from 2020 to 2024**

The Lost Time Injury Rate decreased in 2024 by 2.7%.



**Graph 3: Number of Days Lost from 2020 to 2024**

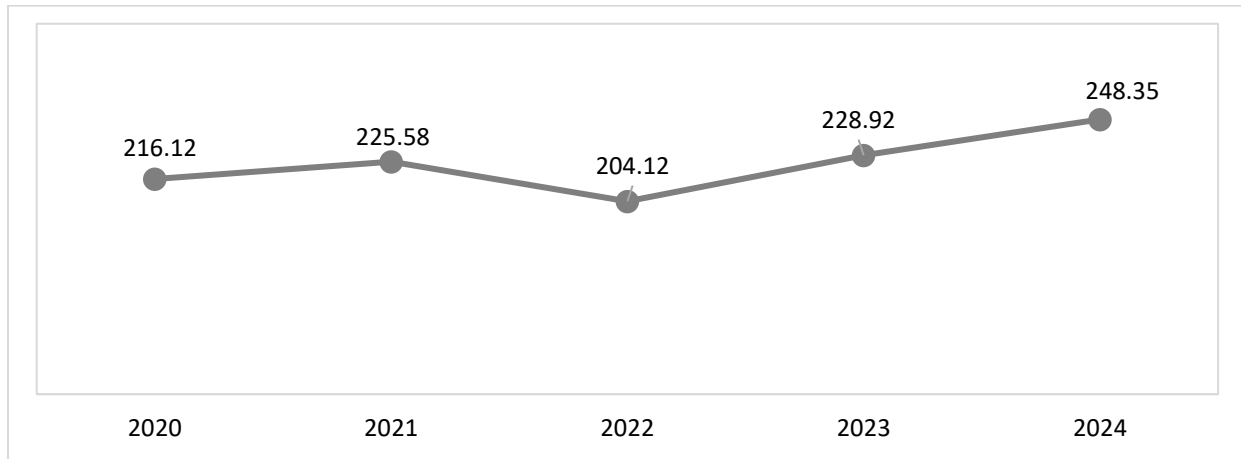
When compared to 2023, the number of days lost for new claims decreased by 3.9% and increased by 11.5% for all claims in 2024. Data for all claims reported below includes lost time accrued for claims initiated prior to the current reporting year that continue to accrue lost time until the injury has been resolved.



**Graph 4: Lost Time Injury Severity Rate – All Claims from 2020 to 2024**

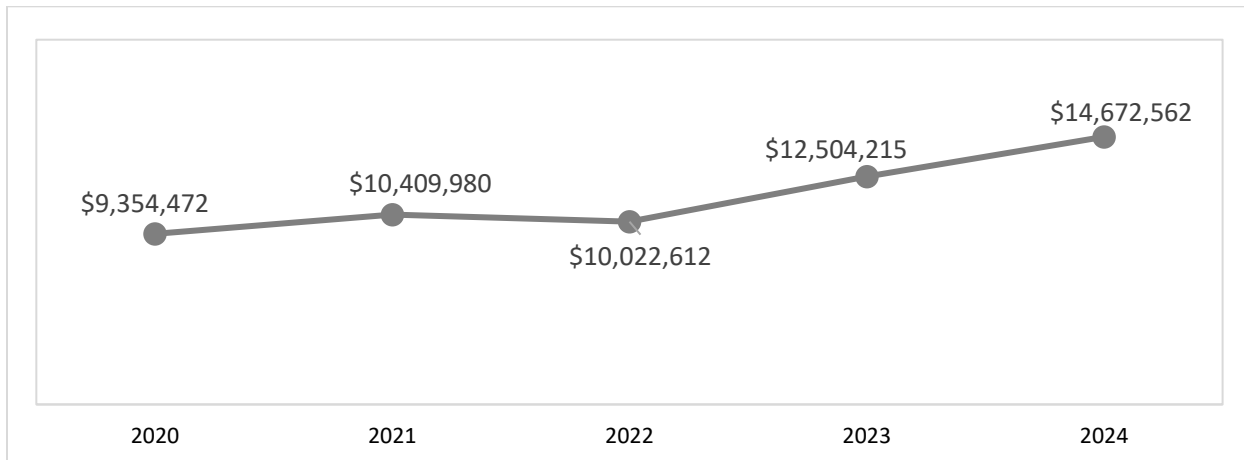
The Lost Time Injury Severity Rate increased by 8.5% in 2024 when compared to 2023. Although the Lost Time Injury Rate is declining year over year the severity rate has increased in 2024. This is the result of the number of days lost from injuries that occurred in prior years which continue to impact the severity rate in the current year. For example, a mental health claim can have lost time incurred over multiple years. Human

Resources continues to facilitate early and safe return to work for employees to promote shorter absences from work. Days lost can be impacted by the injury type, the employee's limitations and restrictions and the availability of suitable modified work.



**Graph 5: Total WSIB costs for Occupational Injuries and Illnesses from 2020 to 2024**

Costs related to all WSIB claims increased 17.3% in 2024 when compared to 2023. These costs include health care and employee loss of earnings, which increased with progression through wage grids and cost of living increases. Loss of earnings also includes lost time incurred in the reporting year from claims initiated in prior years. Costs reported exclude physician, administration fees applied by the WSIB, and bridge benefits paid to employees while their claim is pending.

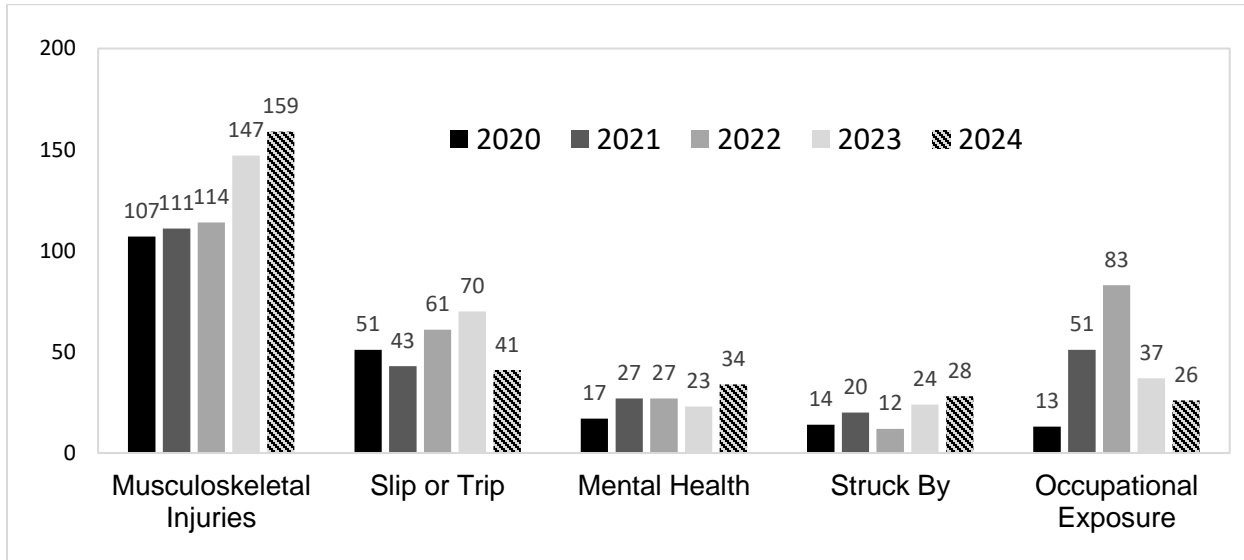


**Graph 6: Top Five Lost Time Injury Types from 2020 to 2024**

The most common types of Lost Time Injuries in 2024 were Musculoskeletal Disorders, injuries from a Slip or Trip, Mental Health, Struck By and Occupational Exposure. When comparing Lost Time Injury types in 2024 with previous years, there were significant declines in Slip or Trip injuries (-41.4%) and Occupational Exposure injuries (-29.7%),

and increases in Musculoskeletal (+8.2%), Mental Health (+47.8%), and Struck By (+16.7%) injuries.

Musculoskeletal Disorders remain the leading Lost Time Injury type in 2024, making up over 40% of all Lost Time Injuries. Much of the City’s injury prevention work has focused on reducing the risks associated with ergonomic hazards and poor body mechanics.



**Overall Lost Time Injuries by Department from 2020 to 2024**

The tables below include departmental statistics related to Lost Time Injury Rate and Lost Time Injury Severity Rate.

**Table 2: Lost Time Injury Rate from 2020 to 2024**

	Lost Time Injury Rate				
	2020	2021	2022	2023	2024
City Housing Hamilton	2.24	2.96	4.35	3.62	2.65
City Manager’s Office	0	0.89	0	0.81	0
Healthy and Safe Communities	7.38	8.72	8.67	7.70	8.10
Corporate Services	0.46	0.46	0	0.42	0.40
Planning & Economic Development	2.23	1.68	1.59	1.17	1.98
Public Works	5.37	5.57	5.27	7.70	5.22
<b>Corporation Total</b>	<b>6.35</b>	<b>6.08</b>	<b>5.89</b>	<b>5.78</b>	<b>5.62</b>

**Table 3: Lost Time Injury Severity Rate – All Claims from 2020 to 2024**

	Lost Time Injury Severity Rate – All Claims				
	2020	2021	2022	2023	2024
City Housing Hamilton	164.48	175.62	28.27	351.85	275.71
City Manager’s Office	0.86	22.15	0	109.19	219.18
Healthy and Safe Communities	271.13	238.96	222.34	239.73	266.09
Corporate Services	63.07	86.49	88.64	57.14	91.56
Planning & Economic Development	153.61	31.53	34.39	74.68	47.45
Public Works	202.45	283.73	255.45	276.84	297.79
<b>Corporation Total</b>	<b>216.12</b>	<b>225.58</b>	<b>204.12</b>	<b>228.92</b>	<b>248.35</b>

### 1.1. 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 occupational injuries and illnesses.

**Table 4: Lost Time Injury Count by Division from 2020 to 2024**

	Lost Time Injury Count				
	2020	2021	2022	2023	2024
Hamilton Fire Department	35	52	39	50	46
Hamilton Paramedic Services	76	89	108	73	99
Hamilton Street Railway	67	78	72	107	84
Long-Term Care	62	97	121	73	64

Injury trend analyses from 2020 to 2024 and initiatives to prevent and mitigate injuries for these divisions are available in Appendix B.

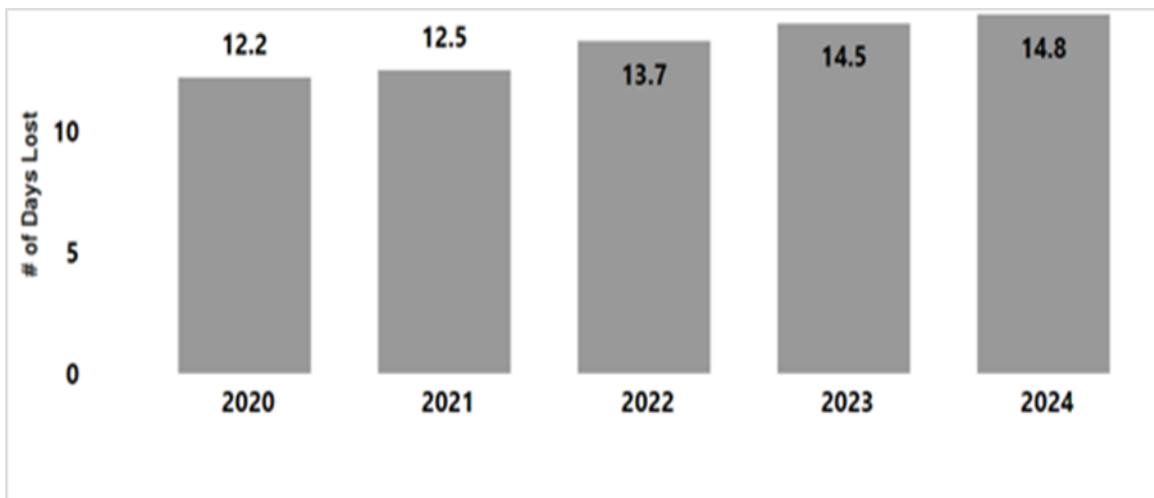
### 2.0 Short-Term Disability Absence Summary (excluding Fire, Police & Library)

The tables and graphs below provide an overview of the City’s Short-Term Disability (STD) absence experience over the past five years both City-wide and by department. Also included is an analysis of absence duration and occurrences for the year 2024 only. Information provided excludes absence data from Hamilton Police Services, Fire and Hamilton Public Library. Fire sick data has historically been excluded from City-wide reporting as Fire employees have a sick bank with different collective agreement provisions regarding entitlement when compared to other union groups. STD absence data by department and top five divisional levels can be found in Appendix C.

In 2024, the City had 5,368 eligible employees for income protection. In this report, the average STD days lost per eligible employee is based on a standard 7-hour shift. The data is presented in this way to account for varying shift schedules across the City, which allows for comparison by department and division. For example, Hamilton Paramedics typically work 12-hour shifts, so in order to compare the average STD days lost per employee with other divisions, lost time is expressed in 7-hour days.

Human Resources continues to collaborate with operating departments to manage employee absences and provide support to employees who are absent from work. When an employee absence occurs, Human Resources ensures the absence is administered according to the terms and conditions of relevant collective agreements and City policies. Human Resources maintains communication with the absent employee and provides necessary support. When an employee is ready to return to work, by collaborating with healthcare providers and leveraging workplace resources, Human Resources provides individual accommodation plans to assist employees successfully return to the workplace.

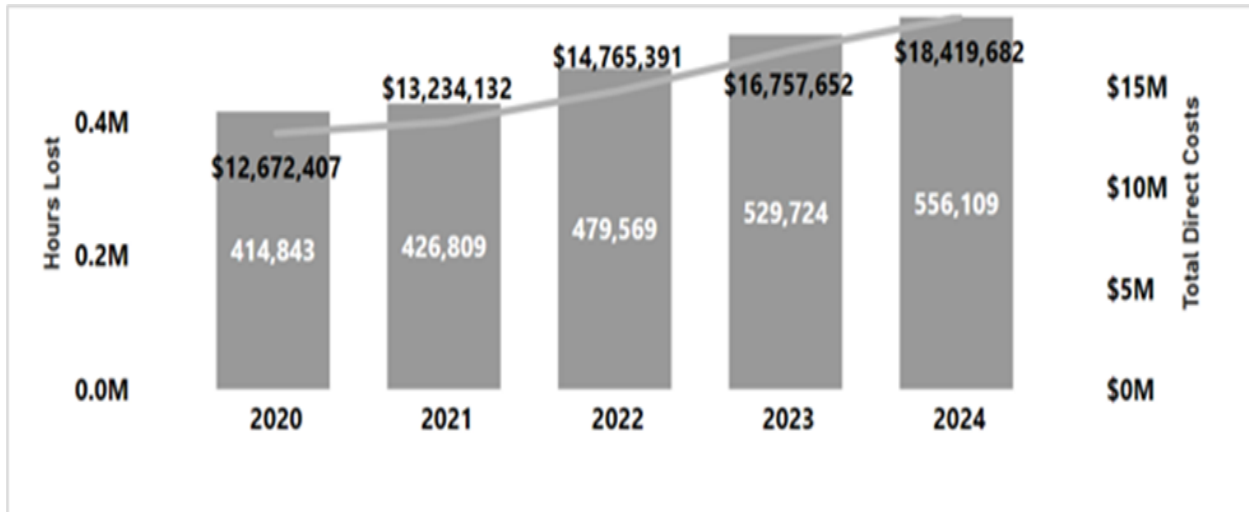
**Graph 7: Average STD Days Lost per Eligible Employee**



The average number of STD days lost per eligible employee in 2024 was 14.8 days. This is a 2.1% increase in STD days lost compared to 2023.

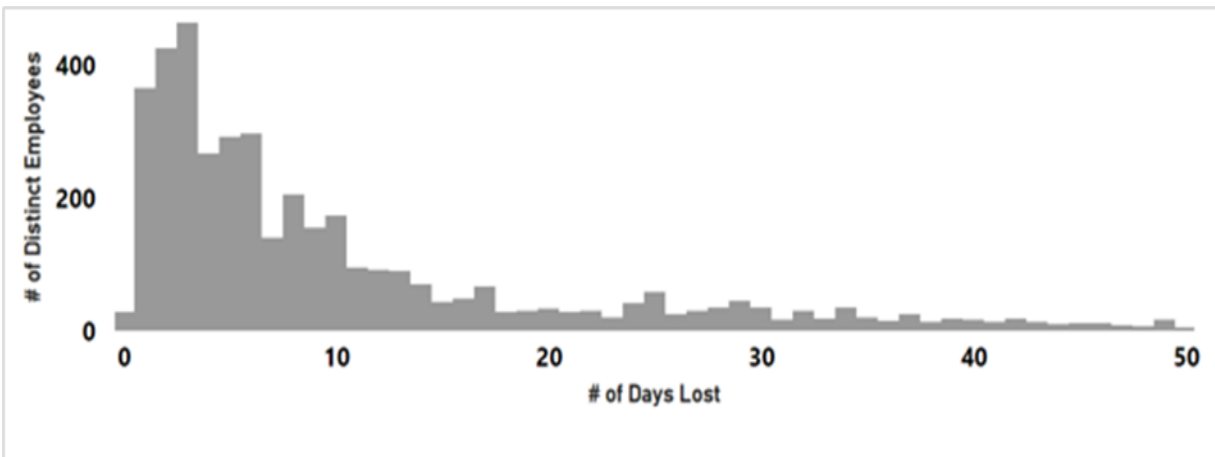


**Graph 8: STD Lost Time and Direct Costs**



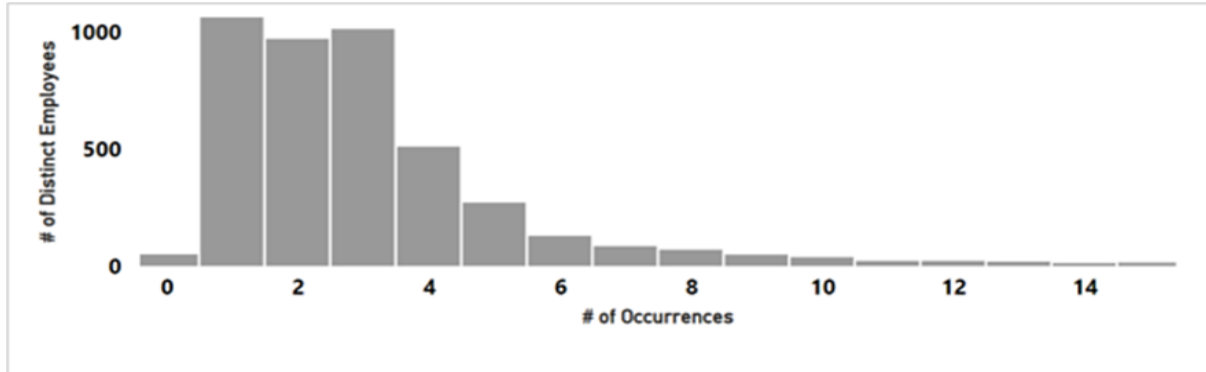
As Graph 8 illustrates, the total direct cost of STD absences in 2024 was \$18,419,682, which is a 9.9% increase from \$16,757,652 in 2023. The increase can be attributed to the rise in average lost days per employee in 2024 and increases in employee wages (progression through wage grids and cost of living increases) during the same period.

**Graph 9: Employee Distribution by Number of STD Days Lost for 2024**



Graph 9 illustrates that most STD absences are one to seven days in duration. This outcome is expected, in part due to the influence of two factors: the requirement to provide a doctor’s note on the fourth day of absence and the requirement to provide a completed STD claim form on the sixth or eighth day of absence, as per collective agreement and policy requirements, as applicable. Employees may opt to return to work prior to documentation being required by Human Resources.

**Graph 10: STD Occurrence Distribution for 2024**



An STD occurrence refers to any instance when an employee is not present at their scheduled shift due to a non-occupational sick absence. Each occurrence is recorded in the Human Resource’s Time and Attendance tracking system. As illustrated above in Graph 10, most employees incurred three or fewer absence occurrences in 2024. This trend is likely explained by collective agreement or policy provisions that incorporate a reduction in compensation on the fourth and subsequent occurrences in a calendar year.

**Table 5: Absence Summary by Department**

The table below provides departmental statistics on average STD days lost per eligible employee.

	Average STD Days Lost Per Eligible Employee				
	2020	2021	2022	2023	2024
City Wide Data (excluding Fire, Police, Library)	12.2	12.5	13.7	14.4	14.8
City Housing Hamilton	12.1	13.6	12.2	15.0	12.6
City Manager’s Office	5.4	1.1	5.7	5.5	7.8
Healthy and Safe Communities	14.0	14.3	15.3	16.4	17.5
Corporate Services	5.9	5.4	6.0	7.4	8.0
Planning & Economic Development	8.5	7.8	8.8	9.4	9.0
Public Works	13.5	14.4	15.9	15.9	16.3

**3.0 Long-Term Disability Absences**

Long-Term Disability (LTD) absences are non-occupational illnesses or injuries that extend beyond 130 days and are managed by a third-party (Manulife).

Table 6 below shows 80 new LTD claims were received by Manulife in 2024, representing an increase of 5 claims or 6.7% when compared to 2023. The new LTD claim rate for 2024 is trending above 2023 but less claims than the highest number in the reporting period of 98 claims in 2020.

The incident rate for new LTD claims approved during the 2024 reporting period increased slightly from 14.01 in 2023 to 14.80 per 1000 insured employees in 2024. This number indicates that a stable number of employees continue to require long-term disability income protection at the City.

**Table 6: Long-Term Disability Claims Data from 2020 to 2024**

Data	2020	2021	2022	2023	2024
New LTD Claims	98	54	70	75	80
LTD Active Claims at the end of Q4 by Year	229	224	211	220	233
Incident rate for new claims per 1000 employees	20.63	11.47	14.87	14.01	14.80
LTD Costs (monthly benefit payments, administrative fees, legal fees, vacation payouts and severances)	\$8,381,638	\$7,944,549	\$8,778,436	\$9,188,641	\$8,905,185

**Table 7: Long-Term Disability Claims Received by Diagnosis - 2022 to 2024**

Claim Type	2022			2023			2024		
	MH	MSK	CAN	MH	MSK	CAN	MH	MSK	CAN
City of Hamilton	39%	27%	11%	41%	24%	8%	38%	31%	8%
Industry Comparator	46%	25%	9%	38%	26%	10%	42%	26%	10%
MH = Mental Health                      MSK = Musculoskeletal                      CAN = Cancer *Claim type for new claims received in year									

Mental health continues to be the most frequent diagnostic category representing 38% of all LTD claims received by Manulife in 2024. This percentage is slightly below the industry comparison group (N= 42%). The City's LTD claims arising from musculoskeletal conditions are above the industry average. Cancer claims are trending slightly below the industry average in 2024.

#### 4.0 Absence Mitigation Strategies and Measures

Human Resources is dedicated to fostering a safe, supportive, and inclusive work environment for all employees. In addition to strategies and initiatives at the departmental and divisional level, Human Resources undertakes absence prevention and mitigation initiatives across the organization. Measures pertaining to mental health and wellbeing are explained later in this report.

#### Workplace Accommodation Activity

Human Resources continues to manage comprehensive return-to-work programs that ensure employees who have experienced illness or injury can reintegrate into the workplace on a safe and timely basis. The team coordinates necessary accommodations and creates structured plans for returning to work. In addition to these efforts, the team ensures that the City's practices meet legal requirements under the Human Rights Code regarding the duty to accommodate. The focus on accommodation efforts reflects the City's dedication to building a resilient and adaptable workforce.

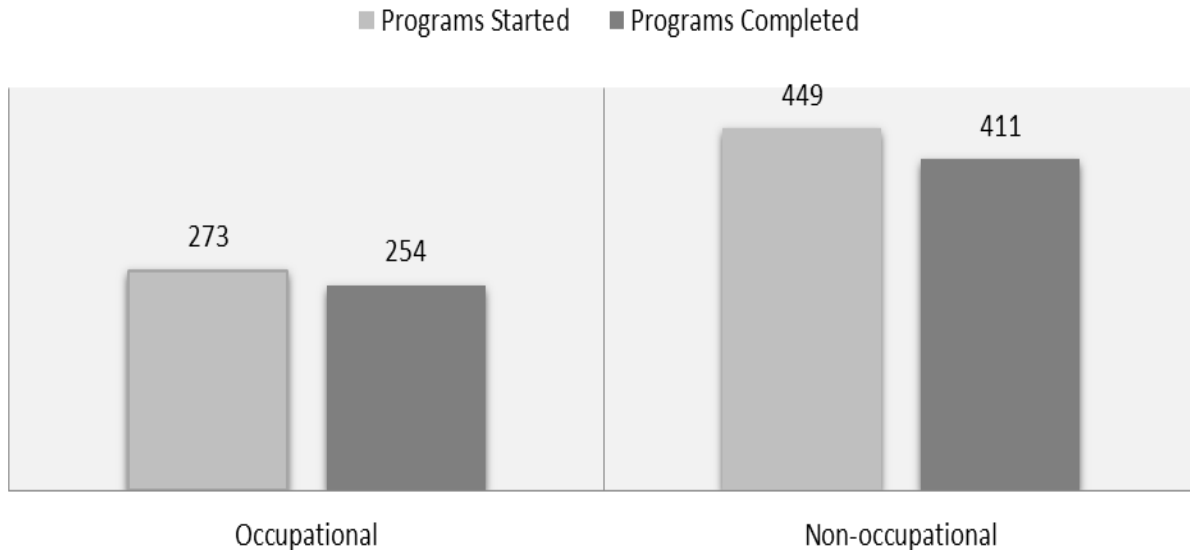
#### Table 8: Overview of Workplace Accommodation Activity from 2020 to 2024

In 2024, Human Resources assisted 630 employees successfully return to full-time hours and regular work duties through the accommodation process. When adjusted for those employees who classify as totally disabled, and those who retired or resigned their employment, this represents a 96.5% success rate in finding suitable accommodations for eligible employees.

Accommodation Outcomes	2020	2021	2022	2023	2024
Return to work full duties own position	459	498	606	587	630
Permanent accommodation own position	7	1	3	3	6
Permanent accommodation new position	3	3	14	10	7
Accommodation no longer available or not suitable	16	6	9	21	23
Recurrence or employee is totally disabled	42	59	63	67	64
Other (e.g., retired, maternity leave, resigned)	22	37	56	29	28
<b>Total Accommodation Cases Closed</b>	<b>549</b>	<b>601</b>	<b>751</b>	<b>717</b>	<b>758</b>

### Graph 11: Workplace Accommodation Programs Started and Completed in 2024

In 2024, Human Resources received a total of 722 requests for accommodation by employees needing assistance in staying at work or returning to work: 273 accommodations arising from occupational claims and 449 accommodations arising from non-occupational (STD) claims.



### Absence and Injury Prevention Activities

Human Resources works closely with departments and divisions to develop, implement, and maintain absence and injury prevention initiatives across the organization. A few highlights of these initiatives from 2024 include:

- Four emergency response learning modules were created, first as in-person training, and in 2024 were transitioned to online learning. The modules, available to all staff and managed by Corporate Safety and Security, include 1) Situational Awareness, 2) Lockdown, 3) Hold and Secure, and 4) Shelter in Place.
- Emergency drills were held, at various locations, to support employees with applying knowledge gained through formal training.
- A new robust Health, Safety and Wellness webpage was created on Howi to improve accessibility to important resources for employees and leaders. The page now includes a variety of topic related information and resources that employees and leaders can use to create safer workplaces. This resource also includes a newly developed page dedicated to Joint Health and Safety Committees across the City to them fulfill their responsibilities in supporting the Internal Responsibility System.

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- Created 12 new health, safety and wellness resources and updated 20 existing resources to ensure employees and leaders are provided with valuable current information about injury prevention. Examples include bulletins on topics such as Heat Stress, Outdoor Air Quality, Preventing Workplace Violence, Tips for De-escalation, Talking About Suicide, Mental Health Resources, etc.
  - Managed the Corporate Respiratory Fit-testing Program and delivered services to 44 employees. 16 influenza clinics were held with 335 vaccines administered.
  - Supported the City's response to the solar eclipse by providing advice and resources to support the Emergency Operations Centre, employees and people leaders.
  - Hosted the City's Joint Health and Safety Committee Appreciation Day in October for over 100 attendees, which included opening remarks from the City Manager. This highly successful event enables Joint Health and Safety Committee members to gain valuable knowledge, skills and develop connections across departments for the purposes of sharing lessons learned.
  - Managed interactions with the Ministry of Labour, Immigration, Training and Skills Development Inspectors including:
    - 7 complaints
    - 20 critical injuries
    - 4 work refusals
    - 21 occupational illnesses.
  - 324 employees were trained in the Workplace Hazardous Materials Information System (WHMIS) training program. The program includes hazard classification system for workplace chemical safety symbols, labelling and information sheets in our workplaces.
  - 96 people leaders completed online required leader health and safety awareness training for supervisors; 857 front-line staff completed the required online training for workers. The training ensures leaders and employees are aware of their rights and duties under the Occupational Health and Safety Act.
  - 84 leaders completed Contractor Health and Safety Management training. This program is designed to equip leaders with the knowledge and skills needed to understand and apply legislative obligations as defined in the Occupational Health and Safety Act when hiring contractors. This program is now available on demand through online learning.
  - Delivered Safe Handling and Disposal of Sharps train the trainer program to leaders.
  - 140 supervisors completed the leader learning program that enables supervisors to understand their responsibilities under the Occupational Health and Safety Act and how to apply them in the workplace.

- Positions with frequent absences or workplace injuries continue to be evaluated for the completion of Physical and Cognitive Demands Analysis. This analysis helps clearly define the physical and cognitive requirements of positions and supports the identification of appropriate modified duties.
- The Return-to-Work Services team within Human Resources continues to engage third-party providers such as occupational physicians, psychologists, occupational therapists, and ergonomists to aid in claims management and to help facilitate early and safe return to work. Partnering with these providers can help assist in an employee's recovery, reduce the risk of re-injury, and ensure accommodations are in place to support the employee's return to work.
- Fire and Paramedic Services Leadership Teams and Return-to-Work Services continue to proactively review opportunities for increased availability for early and safe return to work opportunities. This process is assisted by a dedicated Return-to-Work Specialist assigned to both Fire and Paramedic Services divisions. Fire and Paramedics face unique physical and psychological challenges that require specialized knowledge of occupational demands, functional abilities, and accommodation options. The dedicated RTW Specialists for these areas can tailor return-to-work plans to align with operational requirements, such as shift work, lifting restrictions, and exposure risks.
- In addition, with Council approval in the fall of 2024, Paramedic Services moved forward with the recruitment of an experienced Scheduling and Attendance Program Manager in December. The Program Manager working collaboratively with the dedicated Return-To-Work Specialist for the area will help promote early and safe return to work and mitigate the impact of absences on paramedic scheduling.

Human Resources continues to work on implementing the City's Workplace Mental Health and Wellbeing Strategy approved in 2023. Highlights of key deliverables completed in 2024 include:

- Critical Incident Peer Support (CIPS) Team responded to 21 events that affected the workplace. The CIPS Team is comprised of City employees who support others through critical incident stress management response. Interventions are designed to reduce emotional and physiological symptoms.
- Human Resources assisted in the creation of HSR's first Critical Incident Peer Support Team by providing guidance and support to enable training, volunteer recruitment and establish a framework for operation.
- RZone Respectful Environments Policy and program was launched on September 16<sup>th</sup> across the City of Hamilton to promote safe, positive and supportive work environments and interactions for all residents, visitors and staff at any City facility or space. The program includes setting expectations, broad communication across the

organization, employee education, incident reporting and tracking and a public awareness campaign. To date, approximately 6,000 City employees have completed the RZone training.

- 92 employees received training on non-violent crisis intervention techniques.
- A Caregiver Resources guide was developed and communicated to provide targeted support to this vulnerable employee group.
- Employees and their families have access to LifeSpeak, a web-based program with expert-led online videos, tip sheets, podcasts, web chat and more that address a wide variety of health, family, eldercare, personal growth and development and work-life balance topics. Over the course of the past year employees accessed over 6,000 of these resources. It's free, confidential, and available 24/7 from home or work on a computer or phone.
- Homewood Health delivers Employee Family Assistance Program (EFAP) services to all employees and their dependant family members. EFAP is a free and confidential service offering access to a variety of professionals who are available to help 24 hours a day, 7 days a week. It includes short-term counselling along with health and wellness services and resources for everyday challenges and life demands we all face. EFAP offers enhanced services through Pathfinder which includes tailored personalized care plans and service recommendations based on the employee's unique presenting concerns. Table 9 shows the service utilization rate over the last five years.

**Table 9: Employee Family Assistance Program Service Utilization Rate from 2020 to 2024**

	Percentage				
	2020	2021	2022	2023	2024
Service utilization rate	13.63	14.27	12.37	12.01	13.94
Municipal sector average	15.63	10.79	12.63	11.53	11.67

- EFAP counselling cases over the last five years show that mental health continues to be the most significant reason that employees are engaging in this service.



**Table 10: Reasons for EFAP counselling cases from 2020 to 2024**

Reason	Percentage				
	2020	2021	2022	2023	2024
Mental Health	58.4	57.5	48.8*	52.6	52.1
Marital/Relationships	16.3	15.9	21.3	18.2	18.5
Family Concerns	8.0	9.8	9.9	7.4	9.1
Work	8.2	8.1	10.1	10.8	9.4
Crisis/Trauma	4.8	4.6	6.3	5.2	4.7
Addiction	1.7	1.7	1.5	3.0	2.8
Health	1.8	1.3	1.2	1.2	2.0

\*Counselling with professional and new self-directed online program for depression and anxiety starting 2022

- Life Smart Coaching is a service that employees and dependents have access to as part of EFAP. The table below indicates that legal advisory services, particularly regarding family, divorce and/or custody, continue to be the most significant area of coaching offered followed by relationship, stress and burnout solutions.

**Table 11: Reasons for EFAP Life Smart Coaching from 2020 to 2024**

Reason	Percentage				
	2020	2021	2022	2023	2024
Legal	54.0	43.2	42.9	37.7	32.1
Relationship solutions	2.8	7.8	10.6	11.9	18.1
Burnout and stress solutions	2.8	8.9	7.6	11.9	21.7
Nutrition	9.1	16.7	9.4	8.8	4.1
Child/eldercare	8.0	4.1	6.5	7.5	5.5
Financial	5.7	3.6	7.1	7.5	6.8
Career coaching	8.0	8.9	5.3	6.9	4.1
Grief and loss	4.5	3.1	8.8	5.0	5.9

- Positive mental health and wellbeing are kept top of mind for employees through regular communications by Human Resources (e.g. newsletters, Howi updates, etc.) that include curated content that aligns with national mental health and wellbeing awareness events, service provider campaigns, tools and resources. Campaigns are focused on priority topics for employees.
- The Working Mind training by the Mental Health Commission of Canada helps employees and leaders better understand mental illness and poor mental health, stigma and stigma's effect on individuals and the workplace. To date, 68 people leaders and 58 frontline staff have completed the training.

## Alternatives

Not applicable

## Relationship to Council Strategic Priorities

This information report contributes to Council's Priorities by supporting Responsiveness and Transparency enabling strategic decisions involving employee absences contributing to building a high performing public service.

## Previous Reports Submitted

- [Annual Employee Absence Report 2023 HUR24005 City Wide](#)

## Consultation

Leaders from the operational areas of focus identified in this report were consulted and include:

- Shawn De Jager, Manager and Assistant Deputy Chief, Hamilton Fire Department, Healthy and Safe Communities
- Michael Sanderson, Director/Chief of Hamilton Paramedic Service, Healthy and Safe Communities
- Maureen Cosyn Heath, Director, Transit, Public Works
- Holly Odoardi, Senior Administrator, Long Term Care Division, Healthy and Safe Communities

The Senior Leadership Team was consulted.

## Appendices and Schedules Attached

Appendix A: Definitions

Appendix B: Injury trend analysis from 2020 to 2024 for operational areas of focus

Appendix C: Absence summary by department

**Prepared by:** Yakov Sluchenkov, Director, Employee Health & Labour Relations  
City Manager's Office, Human Resources

Iva Peressini, Manager, Health, Safety and Wellness Services  
City Manager's Office, Human Resources

Heather McNicol, Manager, Return-to-Work Services  
City Manager's Office, Human Resources

**Submitted and recommended by:** Lora Fontana, Executive Director of Human Resources  
City Manager's Office, Human Resources