



STAFF REPORT INFORMATION ONLY

Occupational Health & Safety Report First Quarter, 2008

Date:	June 30, 2008
To:	Employee & Labour Relations Committee
From:	City Manager
Wards:	All
Reference Number:	

SUMMARY

This report provides information on the status of the City's health and safety system, specifically on activities, priorities and performance during the first quarter of 2008. There is a decrease of 12.3% in the number of lost time injuries relative to the same period in 2007. Information is provided where there have been significant changes in accident experience and costs within divisions, as well as specific actions being taken to improve health and safety performance.

The Ministry of Labour has replaced its *High Risk* strategy with a new *Safe At Work Ontario* strategy. Information about the new directive is provided.

FINANCIAL IMPACT

There are no financial implications to this report beyond what have already been approved in the current year's budget.

DECISION HISTORY

At its meeting of February 1st, 2nd and 3rd, 2005, City Council approved the recommendation of the Employee and Labour Relations Committee that staff report to Council quarterly on the functioning of the City's health and safety system. This report is for the first quarter of 2008.

ISSUE BACKGROUND

Improved occupational health and safety performance and a strong health and safety culture continue to be key priorities for the City. This report on the City's health and safety performance is intended to enable the Mayor and Councillors to monitor the City's performance.

COMMENTS

Injury and Accident Statistics

Number of lost time and medical aid injuries and recurrences

Information regarding reported work-related injuries/illnesses by division, during the first quarter of 2008, is attached in Appendix A. Information is also provided for the first quarter of 2005, 2006 and 2007. Information provided includes:

- number of lost time injuries (LTIs) (injuries/illnesses that are reported to the WSIB, as the employee has lost time from work as a result of a reported workplace injury),
- number of recurrences (injuries/illnesses that are reported to the WSIB, as the employee has sought medical aid and/or has lost time as a result of a previously reported workplace injury/illness. No new incident has taken place), and
- number of medical aids (injuries/illnesses that are reported to the WSIB, as the employee has sought medical aid but not lost time from work as a result of a reported workplace injury).

LTIs decreased by 12.3% relative to the first quarter of 2007. The significant decrease in LTIs relative to 2007 resulted from a reduction in the number of musculoskeletal disorders and injuries resulting from contact with objects and equipment. There was a decrease overall in the number of LTIs attributed to vehicle, work procedure, material handling, people handling and job design. Lost time injuries attributed to environment-related causes increased. This reflects the more severe winter conditions during the first quarter of 2008 relative to 2007. There were a total of 15 additional recurrences from previous lost time injuries.

The data highlights a number of areas where there have been significant changes in accident experience and associated costs.

- Homes for the Aged experienced a 43% decrease in LTIs, due primarily to a reduction in the number of employees who reported illness symptoms consistent with those that occurred during outbreaks of infectious diseases in the homes.
- Emergency Medical Services experienced a 15% decrease in LTIs, primarily related to a reduction in the number of musculoskeletal disorders (MSD). The corporate MSD policy specific to EMS is being implemented as a high priority initiative. Written procedures for patient lifts and transfers were completed and training began in March of this year. Joint union-management teams completed their investigation of equipment options to assist with patient transfers. Trials of stair chairs and slider boards were successful and the recommendation for purchase approved. Training on the new equipment is scheduled for September of this year.

- Children's Services experienced a decrease in LTIs, most notably from a decrease in the injury category of bodily reaction and exertion.
- Fire Services has maintained the 37% reduction in lost time injuries relative to first quarter 2005, however costs have increased significantly due to occupational disease claims as a result of the recent presumptive legislation in respect of certain cancers. This is a cost borne today for workplace practices of the past.
- Shelter, Support and Housing Administration experienced a significant decrease in LTIs relative to 2007 as a result of a decrease in the number of assaults and outbreaks of infectious disease.
- The increase in LTIs experienced in Toronto Water and Social Services was largely due to slips and falls as well as contact with objects/equipment.

Lost Time Injury (LTI) Frequency

LTI frequency represents the number of lost time injury events occurring per 200,000 hours worked (100 employee-years). During 2007, information with respect to time lost from work due to work-related injuries and productive hours worked by City employees was collected in a manner that enables reporting on LTI frequency. Utilization of the formula for LTI frequency will allow for:

- comparison of the performance of each City division relative to others,
- comparison of the performance of each City division with its own performance during previous years, and
- future benchmarking with other organizations that report on LTI frequency.

Frequency rates for divisions are presented in Appendix B. The City's LTI frequency during the first quarter of 2007 was 10.35. During the first quarter of 2008, the LTI frequency was 9.20. This number represents the number of LTIs that will occur per 100 employees in a year assuming injuries continue to occur at the rate experienced in the first quarter. It should be noted that even one LTI in a division with a small number of staff can result in a very high LTI frequency.

Injury and Accident Costs [Overall Costs (all Firm Numbers) and Invoiced New Firm Costs by Division]

Overall costs incurred under all City firm numbers during the first quarter of 2008 are reported in Appendix C. Comparable information is also provided for 2005, 2006 and 2007. Total costs during the first quarter were \$8.4 million. This includes costs that continue from injuries sustained in pre-amalgamation municipalities. The \$1.6 million related to cancer claims in Firefighters had a significant impact on overall costs in the first quarter relative to 2007.

The "WSIB Invoiced Costs" report identifies all WSIB invoiced costs for firm number 855935, by division. Appendix D(i) provides the information for divisions whose costs for the year were less than \$100,000. Appendix D(ii) provides the same information for divisions whose costs were greater than \$100,000. Information for 2005, 2006 and 2007 costs is also provided.

Critical Injuries

During the first quarter of 2008, thirteen critical injuries were reported to the Ministry of Labour. Two of these involved employees temporarily losing consciousness (fainting) while at work. One employee was found unconscious on the tipping floor of a transfer station and subsequently passed away of a suspected heart attack. None of these were considered work-related. Work-related critical injuries reported:

- five employees in different divisions fractured a limb as a result of a slip and fall on ice,
- a Parks, Forestry and Recreation employee sustained multiple fractures and deep cuts to his lower left leg, when tilling a flowerbed; the tiller caught his leg as he became pinned by the branch,
- a Parks, Forestry and Recreation employee broke their foot during a recreation program where the toboggan struck a tree,
- an Emergency Medical Services employee sustained a fracture to the left radius and ulna when the ambulance he was driving struck a streetcar, and
- in two separate events, two Parks, Forestry and Recreation employees became unconscious as the result of falls while shovelling snow left by Zambonis during ice flooding operations.

MOL Orders

The MOL issued four orders to the City during the first quarter of 2008.

All orders were distributed by HR Occupational Health and Safety Managers to all division heads and the unions. Compliance with all of the orders was met.

Health and Safety Activities during the first quarter of 2008

Significant activity occurred during the first quarter in implementing the City's *Musculoskeletal Disorder Prevention* policy. Many divisions focused on training as a preliminary activity, to be followed by MSD hazard identification (ID). Most divisions have begun supervisory MSD training. Some have also begun joint health and safety committee and worker training. Specific divisional progress of note to date includes:

- Long-Term Care Homes and Services established a joint MSD steering committee, determined the number of hazard IDs to be completed, and determined the process and locations where these analyses will be done. Training of those who will complete the hazard IDs will be completed by the end of June.
- Continuous Improvement Committees in Solid Waste Management Services and Transportation Services divisions are focusing on MSDs. Their committee activities will enhance the implementation of the MSD prevention program. In Solid Waste Management Services, continuous improvement team members are being trained as worker trainers.
- Emergency Medical Services has proceeded quickly to establish a divisional MSD prevention program. Training on specific procedures for tasks that present elevated risk is ongoing.
- Children's Services has completed JHSC and Supervisory training. Five centres have been selected to serve as locations for MSD hazard identification. The process will be completed by small groups which include JHSC members.

- Public Health supervisory training is scheduled and worker training will be conducted by supervisors.
- Fire Services plans to address MSD hazards on a task-by-task basis. MSD Policy training is being customized and will be made available to workers in an on-line format.

Ministry of Labour (MOL)/ Workplace Safety and Insurance Board (WSIB) Update

Safe At Work Ontario

The Ministry of Labour has replaced its 2004-2008 *High Risk* strategy and initiative with a new *Safe at Work Ontario* strategy. This change of strategy follows feedback from stakeholders, including the City of Toronto, during implementation of the high risk program. The goal of the new strategy continues to be the reduction of fatalities, critical and lost-time injuries. Within this new strategy, the MOL will identify and engage workplaces based on a variety of factors, including their health and safety record, history of non-compliance and presence of hazards inherent to the activities of the business. A key focus will be on the health and safety culture of Ontario workplaces. Ministry inspectors will continue to conduct proactive workplace inspections. Health and safety culture will be assessed on three parameters:

- competence – the level of knowledge of the Occupational Health and Safety Act’s requirements,
- commitment – leadership to make the workplace safe, and
- capacity – resources to address issues in the workplace.

Inspectors will focus on sector-specific hazards, for example, fall protection and moving equipment in construction, falls and being struck by objects in industrial settings, exposure to infectious disease, violence in the workplace and MSDs in health care settings. MOL priorities around young worker safety, workplace violence and pains and strains will be a focus during inspections in all workplaces. The priorities established by the City over the last two years are consistent with the MOL Safe At Work Initiative.

Accreditation Program for Ontario Workplaces

The WSIB is working together with stakeholder groups to develop a *Health and Safety Accreditation Program for Ontario Workplaces*. Feedback from a formal consultation process has been incorporated into a draft Pilot Program Standard. The Pilot Program launch is scheduled for June 2008.

Occupational Health and Safety Co-ordinating Committee (OHSCC)

Initiatives during the first quarter of 2008 included:

- an expert panel discussion on May 26th on the topic “Protective Measures for Employees in the Event of an Influenza Pandemic”,
- implementation of the training requirements of the *Musculoskeletal Disorder (MSD) Prevention* policy,
- a Workplace Violence Survey, to which approximately 300 joint health and safety committee members and health and safety representatives responded,

- revisions to the City's *Supervisory Occupational Health and Safety Competence* policy,
- approval of amendments to the City's *Investigation and Reporting of Work-Related Injuries, Accidents and Incidents* policy, and
- working groups recommendations on actions to enhance JHSC effectiveness, a Code of Conduct for users of City facilities and measures to support occupational health and safety continuous improvement.

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SIGNATURE

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ATTACHMENTS

Appendix A
Appendix B
Appendix C
Appendix D(i)
Appendix D(ii)