# STAFF REPORT ACTION REQUIRED

# Occupational Health & Safety Report Second Quarter, 2008

Date:	September 3, 2008
То:	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 two quarters of 2008. There was a decrease of 9.5% 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.

New information about the Ministry of Labour's Safe at Work Ontario strategy is provided.

### RECOMMENDATION

It is recommended that:

1. the Occupational Health & Safety Report, Second Quarter 2008, be forwarded to City Council.

### **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 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup>, 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 two quarters of 2008, with focus placed on the second quarter.

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# **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 two quarters of 2008, is attached in Appendix A. Information is also provided for the same time period in 2005, 2006 and 2007. Information provided includes:

- number of lost time injuries (LTIs) (injuries/illnesses that were approved by the WSIB or are awaiting WSIB adjudication, as the employee has lost time from work as a result of a reported workplace injury),
- number of recurrences (injuries/illnesses that were approved by the WSIB or are awaiting WSIB adjudication, 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 were approved by the WSIB or are awaiting WSIB adjudication, as the employee has sought medical aid but not lost time from work as a result of a reported workplace injury).

The number of lost time injuries (LTIs) decreased by 9.5% relative to the first two quarters of 2007. A decrease in the number of musculoskeletal disorders was the most significant contributor to the overall decrease in LTIs in the second quarter. The additional 11 recurrences occurred in the first quarter.

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

- Long Term Care Homes and Services experienced a 21% decrease in LTIs over the first two quarters of 2008, 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 7% decrease in LTIs, primarily related to a reduction in the first quarter, of the number of musculoskeletal disorders (MSD) and injuries caused by contact with objects and equipment.
- Children's Services has sustained a 27% decrease in LTIs, over the first two quarters, primarily due to a decrease in MSDs.
- Fire Services has achieved a 21% reduction in LTIs relative to the first two quarters of 2007. This is due largely to a reduction in musculoskeletal disorders. Costs, however, continue to increase 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.

- The decrease in LTIs in Fleet Services from 10 to 6 was largely due to a reduction in incidents of employees being struck by or against objects and equipment.
- Shelter, Support and Housing Administration experienced a 28% decrease in LTIs relative to 2007 as a result of a decrease in the number of infectious disease cases.
- The increase in LTIs and associated costs experienced in Revenue Services was due to slips and falls and MSDs, as well as a number of single unrelated events.
- The increase in LTIs in Social Services was largely due to an increase in the number of falls.

### Lost Time Injury (LTI) Frequency

LTI frequency represents the number of lost time injury events occurring per 200,000 hours worked (100 employee-years). Beginning in 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 two quarters of 2008 was 8.36. This is lower than the same period in 2007 (9.19) and the first quarter of 2008 (9.27). 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 two quarters of 2008 are reported in Appendix C. Comparable information is also provided for 2005, 2006 and 2007. Total costs during the first two quarters were \$18.2 million. This includes costs that continue from injuries sustained in pre-amalgamation municipalities. The \$4.2 million related to cancer claims in firefighters had a significant impact on overall costs in the first two quarters 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 year-to-date 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

There were 11 critical injuries reported to the MOL in the 2<sup>nd</sup> quarter of 2008. Three of these events involved the same employee temporarily losing consciousness (fainting) while at work. Another employee experienced a seizure, while another two lost consciousness after experiencing a symptom (dizziness for one, chest pain for the other). None of these events were considered work-related. Work-related critical injuries reported:

- An EMS employee sustained a fracture to the right lower leg after falling backwards while lifting a stretcher.
- A Shelter, Support and Housing Administration employee was attacked by a client on site while making rounds. Worker lost consciousness after hitting her head against a door after being punched in the face.
- A Revenue Services employee fractured her right wrist in avoiding a fall when walking down a stairwell.
- A Children's Services employee fractured her left wrist when she fell on pavement in a playground.
- A Social Development, Finance and Administration employee tripped on a table leg and fell while retrieving printing, fracturing her right wrist.

In all cases Divisions took corrective actions to reduce the risk of a future incident.

### **MOL Orders**

The MOL issued eight orders to the City during the second quarter of 2008. These orders related to the wearing of protective headwear on construction projects, a raised bucket on an unattended front end loader, work practices of an on-site contractor, reporting of outbreaks and use of protective equipment during outbreaks. Corrective actions were taken to address all orders and compliance with all of the orders was met. All orders were distributed by Occupational Health and Safety Managers to all division heads and the unions.

Ministry of Labour inspectors made several visits to City work locations during the first half of 2008 that did not result in orders.

# 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:

- competency 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 MOL Safe At Work Initiative.

Recently, the Ministry of Labour provided additional details regarding the scheduled implementation of the Safe at Work Ontario Strategy when it issued news releases indicating that:

- Inspectors are now "blitzing" Ontario's workplaces to help eliminate specific hazards to health and safety, with the current focus being on workplaces with workers aged 24 and under as well as those employing workers of any age who are new to their jobs.
- As part of the on-going series of "blitzes," inspectors are checking construction sites for electrical hazards, possible chemical and biological hazards and hazards that could result in workers falling or being struck by material or equipment. They will also look for hazards that could lead to structural failures or collapses.
- Future health and safety inspections will focus on the following sectors:
  - in September, inspectors will start to concentrate on industrial workplace hazards that can cause workers to fall,
  - in November, inspectors will focus on electrical hazards in industrial workplaces, and
  - early next year, inspectors will conduct special checks on industrial sector forklift operations and on construction site conditions that could cause workers to be struck by equipment.

To date, no Ministry inspections of City workplaces as part of this new strategy have been conducted.

## WSIB Consultation on occupational disease draft policies

In June, the WSIB invited comments from the public on three occupational disease draft policies, which are intended to help provide a solid and clear platform for fair and consistent occupational disease policy development and adjudication at the WSIB. Submissions will be accepted until October 1, 2008 on draft policies related to occupational disease claim adjudication. City staff are reviewing these policies and evaluating feedback to the Schedule 2 Employers' Group, who will make a submission to the WSIB on behalf of Schedule 2 employers.

# Health and Safety Initiatives and Activities during Second Quarter included:

- development and rollout of on-line resources in support of the MSD Prevention Policy and divisional programs,
- noise surveys to facilitate amendments to health and safety regulations respecting noise at a number of City work locations and operations (e.g. wastewater and water treatment plants, yards, etc),
- air monitoring to determine airborne concentrations of asbestos during road resurfacing projects in which asphalt had asbestos content,
- completion of terms of reference for the structure and function of Purchasing and Materials Management joint health and safety committees,
- MOL approval of completed terms of reference for the structure and function of Municipal Licensing and Standards and Toronto Building joint health and safety committees,
- development and implementation of chemical spill clean-up procedures and assessment of confined spaces in Parks, Forestry and Recreation,
- computer-based and instructor-led training in Fire Services [computer-based Asbestos Awareness, Pandemic Influenza Information Package, Wellness/Fitness Core Condition and

Nutrition and Generic WHMIS; instructor-led Recruit Fire Fighters Safety Orientation, Fire Fighters Safety, Health and Survival (Stand Down for Safety) and Injury Investigation Training],

- comprehensive analysis of Slips/Trips/Falls in several divisions in 2007 was completed, and
- training in EMS [health and safety orientation training for 30 new recruits, which also incorporated MSD Prevention Strategies; training on new Patient & Equipment Handling procedures, relevant to MSD prevention, for all paramedics and supervisors.

#### **Occupational Health and Safety Co-ordinating Committee (OHSCC)**

Initiatives during the second quarter of 2008 included:

- an expert panel discussion on May 26<sup>th</sup> 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,
- obtaining and reviewing a status update from City divisions on their Health and Safety Continuous Improvement initiatives, activities and outcomes,
- revision of the City's Sun protection Policy, in response to changes to Environment Canada's Ultraviolet (UV) Index and Health Canada's recommendations regarding sun screen application, and
- planning for 2008's Joint Health and Safety Committee Recognition Event, scheduled for September 12<sup>th</sup>.

### CONTACT

Alison Anderson Director, Occupational Health and Safety Human Resources Ph. (416) 392-5028 Fax (416) 392-3920 Cindy O'Brien Manager, Occupational Health, Safety and Workers' Compensation Human Resources Ph. (416) 392-5021 Fax (416) 392-5504

### SIGNATURE

Shirley Hoy City Manager

### ATTACHMENTS

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

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