



Occupational Health and Safety Report: Quarterly and End of Year 2016

Date: September 7, 2017

To: Employee and Labour Relations Committee

From: City Manager and Executive Director of Human Resources

Wards: All

SUMMARY

This report provides information on the status of the City's health and safety system, specifically on activities, priorities and performance during the third and fourth quarters of 2016 and health and safety performance throughout the year.

There was a 3.9% increase in the number of lost time injuries and a 24.8% increase in the number of recurrences in 2016 relative to 2015. There was a 6.2% decrease in medical aid injuries.

Workplace Safety and Insurance Board (WSIB) invoiced costs for 2016 were \$9.9 million higher in 2016 than in 2015. Approximately \$7.7 million of the increased invoiced costs in 2016 are attributable to firefighter cancer claims. Legislation introduced in 2014 presumes certain firefighter cancers to be work-related when specified conditions are met. The legislation, which is retroactive to 1960, provides that a total of 14 primary-site cancers are occupational diseases presumed to have occurred due to the nature of the worker's employment as a firefighter. In 2016, primary site lung cancer was introduced. As of the beginning of 2017, primary site skin cancer has been added.

Excluding firefighter cancers, there was a \$2.2 million increase in WSIB invoiced costs across all firm numbers. Much of this increase is attributable to traumatic mental stress and post-traumatic stress disorder (PTSD)-related claims. In April 2016, legislation was introduced such that if a first responder or other designated worker is diagnosed with PTSD by a psychiatrist or psychologist, the condition is presumed to be work-related unless proven otherwise.

RECOMMENDATIONS

The City Manager and the Executive Director of Human Resources recommends that:

1. City Council receive the Quarterly and End of Year 2016 Occupational Health and Safety Report for information.

FINANCIAL IMPACT

There are no financial impacts to this report.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

DECISION HISTORY

At its meeting of February 1, 2 and 3, 2016, 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. The direction was in response to changes in the Criminal Code with respect to health and safety. This report provides details for the 3rd and 4th Quarters and End of Year 2016.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.EL3.1>

ISSUE BACKGROUND

Continuously improving health and safety performance and building 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 Injuries, Medical Aid Injuries and Recurrences

Information regarding reported 2016 WSIB incidents (work-related injuries/illnesses), by division, during 2016 is attached in Appendix A. Information is also provided for the years 2012 to 2015. Information provided includes:

- Number of lost time injuries: injuries/illnesses in which lost time was approved by the WSIB or is 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 lost additional time as a result of a previously reported workplace injury/illness. No new incident has taken place; and

- Number of medical aids: injuries/illnesses in which health care only was approved by the WSIB or is awaiting WSIB adjudication, as the employee has either sought medical aid but not lost time from work as a result of a reported workplace injury or lost time has not been approved by the WSIB.

Overall, there was a 3.9% increase in the total number of lost time injuries in 2016 relative to 2015. Increase in lost time injuries were noted in the following categories:

- Contact with objects and equipment
- Slips, trips and falls
- Assaults and violent acts

Divisions with the most significant increases in lost time injuries were as follows:

- Children's Services experienced a 21% increase, primarily in injuries resulting from contact with objects and equipment
- Fire Services experienced a 20% increase, primarily in injuries resulting from exposure to harmful substances or environment(s), which includes exposure to traumatic or stressful event(s) and exposure to toxic agents
- Toronto Paramedic Services experienced a 19% increase, primarily in injuries resulting from slips, trips and falls, overexertion in lifting and repetitive or awkward postures and injuries resulting from assaults or violent act(s)
- Parks, Forestry and Recreation experienced a 13% increase, primarily in injuries resulting from contact with objects and equipment and injuries resulting from slips, trips and falls

Divisions with the most significant decreases in lost time injuries were as follows:

- Fleet Services experienced a 92% decrease, primarily in injuries resulting from overexertion in lifting and repetitive or awkward postures
- Toronto Public Health experienced a 28% decrease, primarily in injuries resulting from contact with objects and equipment and slips, trips and falls
- Long Term Care Homes and Services experienced a 14% decrease, primarily in injuries resulting from overexertion and exposure to harmful substances or environment(s) which includes exposure to infectious agents
- Toronto Water experienced a 12% decrease, primarily in injuries resulting from overexertion in lifting and repetitive or awkward postures

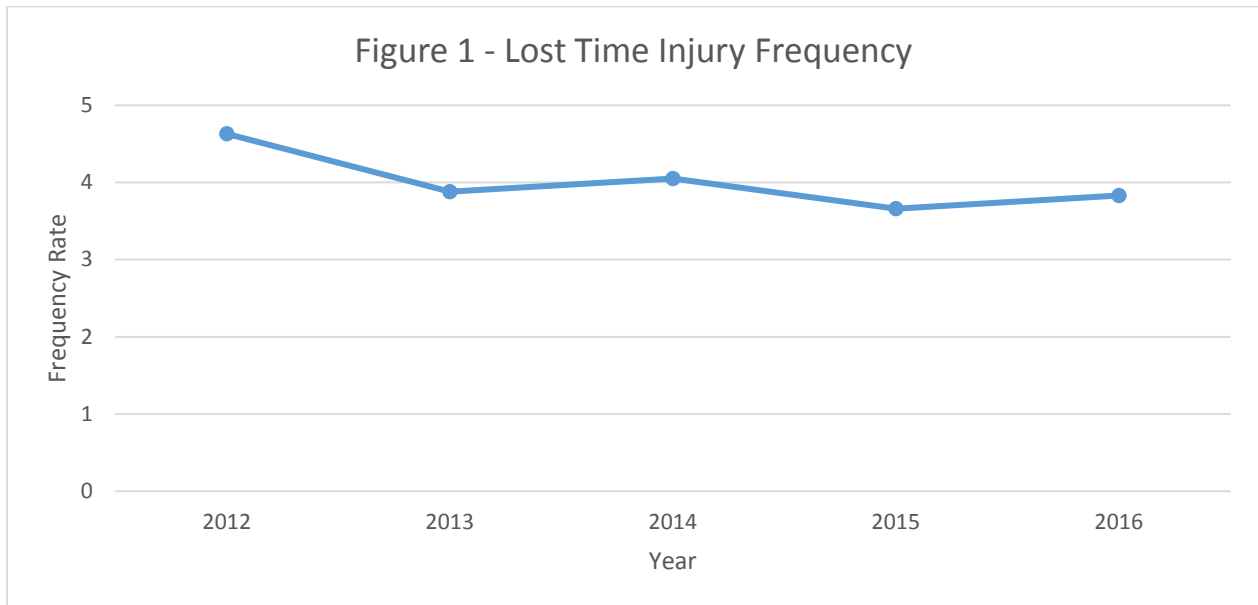
Recurrences

There was a 24.8% increase in recurrences in 2016 relative to 2015. Musculoskeletal disorders and stress-related disorders were the primary contributors to this increase.

Lost Time Injury (LTI) Frequency

LTI frequency represents the number of LTI events (lost time approved by the WSIB or pending WSIB adjudication decision) per 200,000 hours worked (100 employee-years).

Figure 1 below shows the City's LTI frequency during 2016 relative to the frequency during the years 2012 to 2015. The City's 2016 LTI frequency increased from 3.66 in 2015 to 3.83 in 2016.

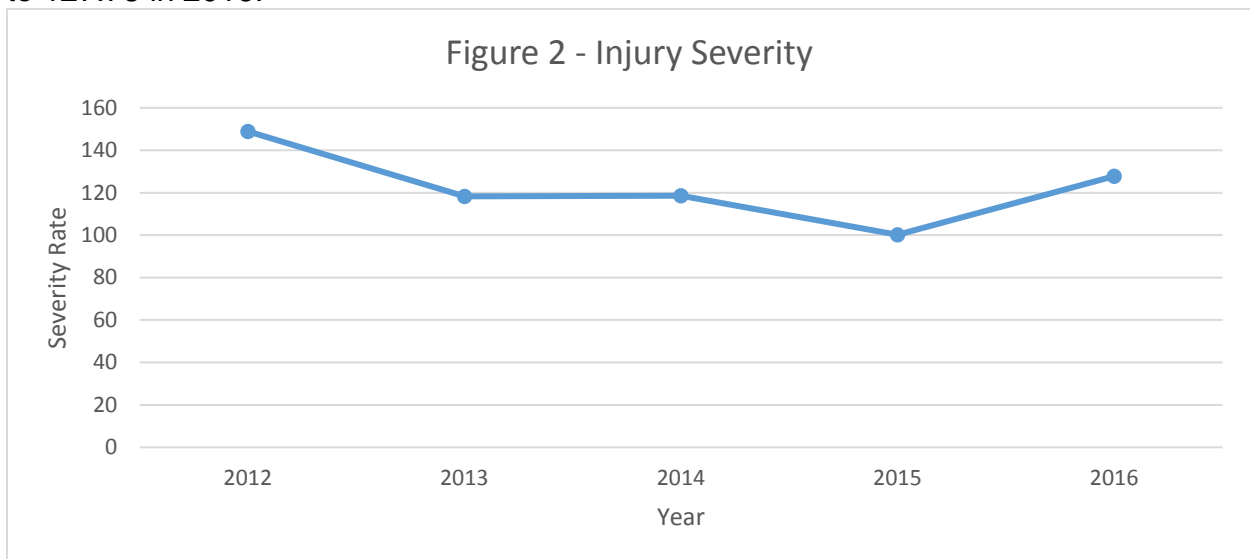


Frequency rates for divisions are reported in Appendix B. It should be noted that in a small City division a single LTI can result in a high frequency rate.

Injury Severity Rate

The injury severity rate is a standardized statistic that enables comparison, year-over-year, of the number of days lost relative to hours worked. The severity number represents the number of days lost per 100 employees in the year.

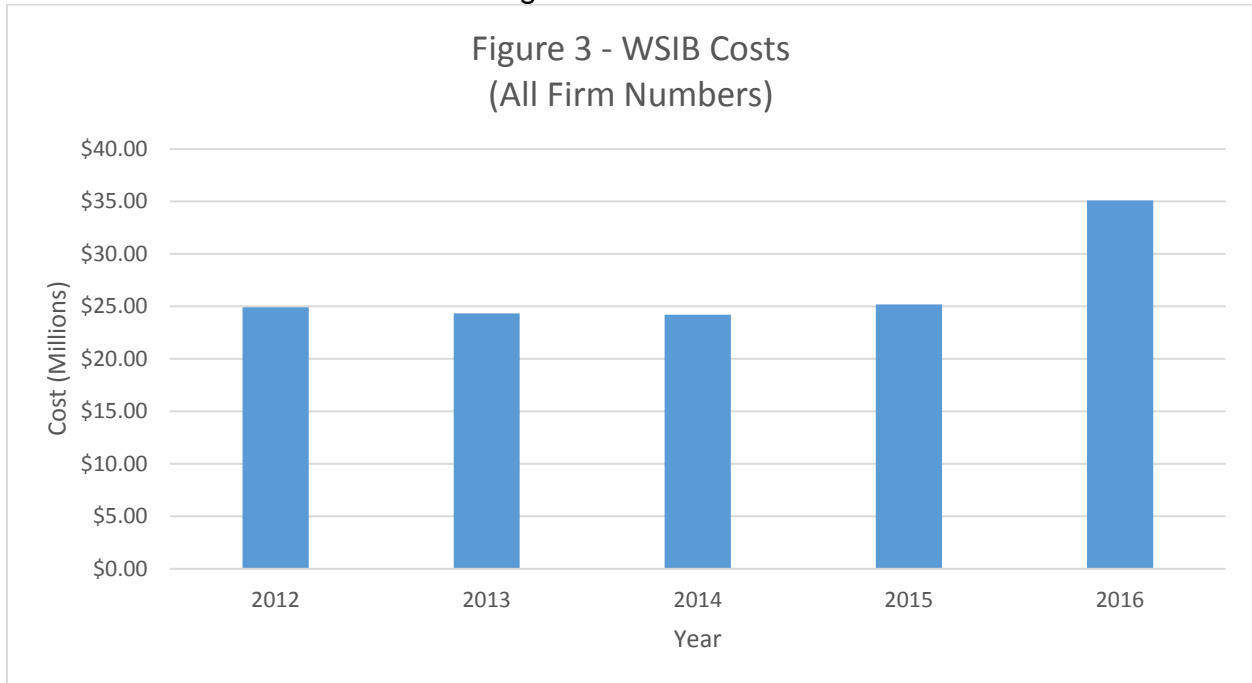
Figure 2 below shows the City's severity rate during 2016 relative to the severity for the years 2012 to 2015. The City's 2016 injury severity rate increased from 100.18 in 2015 to 127.78 in 2016.



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 2016 are reported in Appendix C. Information is also provided for the time period 2012 to 2015.

This information is summarized in Figure 3 below.

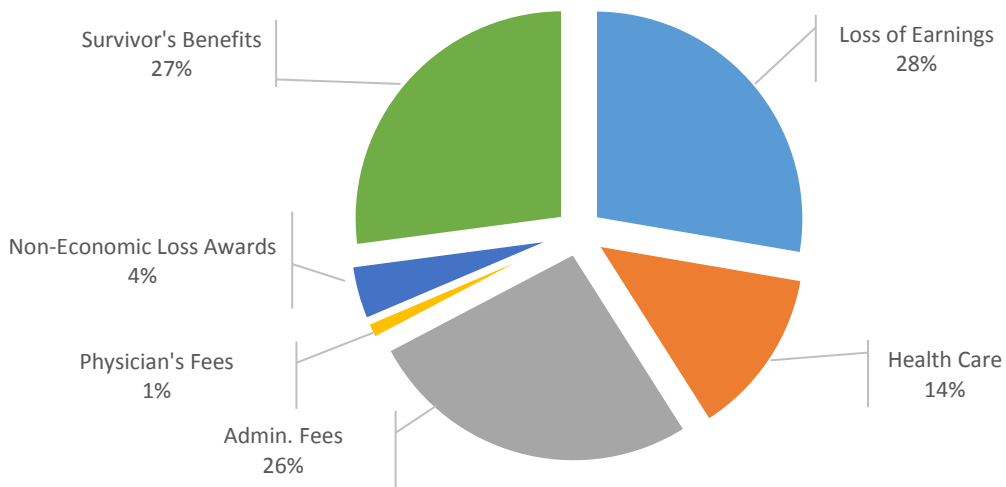


WSIB invoiced costs were \$9.9 million higher in 2016 than in 2015. The majority of the increased costs are attributable to firefighter cancer claims. Legislation introduced in 2014 presumes certain firefighter cancers to be work-related when specified conditions are met (e.g. duration of firefighting employment). In 2015, presumption of primary site prostate cancer came into effect for claims dating back to 1960 for firefighters with 15 or more years of firefighting employment. Primary site lung cancer was introduced in 2016 and skin cancer in 2017.

Other major contributors to the increased cost are traumatic mental stress and PTSD claims. In April 2016, legislation was introduced such that if a first responder or other designated worker is diagnosed with PTSD by a psychiatrist or psychologist, the condition is presumed to be work-related unless the contrary is shown.

Figure 4 below provides the City's WSIB Current Firm costs by cost category in 2016. In 2016, health care and loss of earnings percentages decreased, whereas the survivors' benefits percentage increased significantly as a result of firefighter cancer claims.

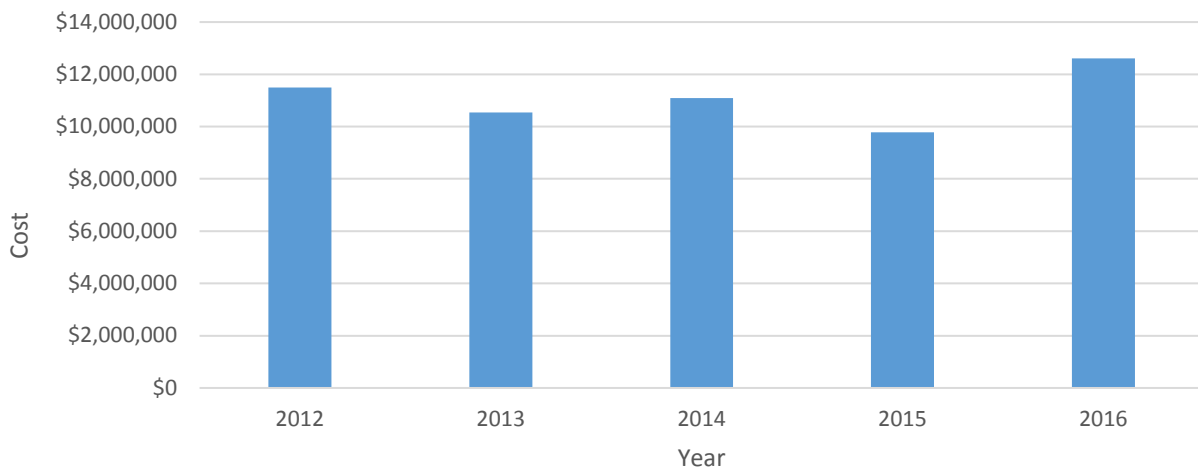
Figure 4 - 2016 WSIB Costs by Category



Appendix D (i) provides the current City's "WSIB Invoiced Costs" for 2016 for divisions whose costs were less than \$50,000 and Appendix D (ii) for divisions whose costs were greater than \$50,000.

Figure 5 below shows the City's WSIB costs for the current City firm number, exclusive of firefighter cancers.

Figure 5 - WSIB Cost (Current Toronto)
(minus firefighter cancers)



Critical Injuries

Occupational health and safety legislation stipulates requirements for reporting fatalities and critical injuries to the Ministry of Labour (MOL). A critical injury is an injury of a serious nature that:

- (a) places life in jeopardy,
- (b) produces unconsciousness,
- (c) results in substantial loss of blood,
- (d) involves the fracture of a leg or arm but not a finger or toe,
- (e) involves the amputation of a leg, arm, hand or foot but not a finger or toe,
- (f) consists of burns to a major portion of the body, or
- (g) causes the loss of sight in an eye.

Eleven work-related critical injuries were reported to the MOL in the third quarter of 2016:

- A Municipal Licensing and Standards employee sustained a head injury after the vehicle he was operating was struck from behind by another vehicle.
- A Parks, Forestry and Recreation employee lost consciousness while lifeguarding at a pool.
- A Parks, Forestry and Recreation employee temporarily lost sight in his right eye when gas was released through the nozzle of a propane tank.
- A Solid Waste Management Services employee, when exiting a truck at fuel pumps, slipped on fuel and sustained a right wrist fracture.
- An Employment and Social Services employee lost her balance and fell, sustaining a left wrist fracture.
- A Municipal Licensing and Standards employee sustained a fractured right ankle when she stepped out of the driver's side of a City vehicle into a small pothole.
- A Transportation Services employee tripped on uneven sidewalk during a paving operation, fell and sustained a right wrist fracture.
- A Municipal Licensing and Standards employee lost consciousness while driving and collided with a bus shelter, sustaining cuts and lacerations.
- A Transportation Services employee tripped on the leg of a table, fell and sustained a fractured right ankle.
- A Fire Services employee rolled his ankle while entering a truck, sustaining a fractured left ankle.
- A Municipal Licensing and Standards employee sustained a fractured left foot when she turned her ankle while walking in the parking lot.

Three additional incidents for which no work-related causes or outcomes were identified were also reported to the MOL as critical; two incidents in which employees lost consciousness and one in which an employee experienced a stroke while at work. One incident off-site that resulted in an employee critical injury was reported, as were three incidents in which members of the public experienced critical injuries on City premises.

Ten work-related critical injuries were reported to the MOL in the fourth quarter of 2016:

- A Facilities Management employee lost the tip of his finger when the finger was caught in a pulley belt.

- A Long-Term Care Homes and Services employee lost consciousness after falling from a two-step stool
- A Fire Services employee sustained burns to his neck, scalp and elbow when fighting an apartment fire.
- A Parks, Forestry and Recreation employee slipped and sustained a fractured knee cap while shovelling snow off the ice after Zamboni use.
- A Shelter, Support and Housing Administration employee slipped on food in a dining room, fell and sustained a fractured right elbow.
- A Parks, Forestry and Recreation employee fell while removing condensation off arena lobby glass. He hit a rink board support bracket during the fall, hit his head on the concrete floor and lost consciousness.
- A Parks, Forestry and Recreation employee sustained fractured wrists when she tripped on uneven paving stones and fell
- A Parks, Forestry and Recreation employee sustained a fractured left ankle when the employee stepped into a depression while exiting a pick-up truck.
- A Solid Waste Management Services employee lost consciousness when a chunk of ice or branch hit his head as he was riding the rear step of a collection truck.
- A Parks, Forestry and Recreation employee lost consciousness after being struck in the right hand by a "tot deck" at a pool.

Additionally, two incidents in which employees lost consciousness with no work-related causes or outcomes identified were also reported to the MOL as critical.

MOL Orders/Visits without Orders

One MOL order requiring reassessment of workplace violence risk was issued to the City in the third quarter of 2016. Two MOL orders were issued to the City during the fourth quarter of 2016; one regarding protective headwear on a construction project and the other regarding critical injury notification. Ten MOL orders in total were issued to the City in 2016, a significant reduction from each of the previous five years.

All orders were complied with.

MOL visits that do not result in orders are also tracked. Reports on the issues addressed during these visits are reviewed by the Occupational Health and Safety Coordinating Committee (OHSCC). It is intended that the information will inform the OHSCC regarding the MOL's priorities and expected employer responses to these priority issues.

There were twenty-one MOL visits to City facilities/work operations that did not result in orders during the third quarter of 2016. Ten of these visits resulted from new injuries, six resulted from complaints and five were to follow up on earlier visits regarding injuries/complaints.

There were twenty MOL visits to City facilities/work operations that did not result in orders during the fourth quarter of 2016. Seven of these visits resulted from new injuries.

Six resulted from complaints, five visits were to follow up on earlier visits regarding injuries/complaints/orders, one was a routine inspection and one resulted from a work refusal.

MOL and WSIB Initiatives

Legislation Passed to Support First Responders with PTSD

On April 6 2016, Ontario passed legislation creating a presumption that post-traumatic Stress disorder (PTSD) diagnosed in first responders is work-related. Under the Supporting Ontario's First Responders Act, the presumption allows for faster access to WSIB benefits, resources and timely treatment. Once a first responder is diagnosed with PTSD by either a psychiatrist or a psychologist, the claims process to be eligible for WSIB benefits will be expedited without the need to prove a causal link between PTSD and a workplace event. The presumption applies to a number of professions including, but not limited to, firefighters, paramedics, dispatchers of police, firefighter and ambulance services and emergency response teams. The act also allows the Minister of Labour to request and publish PTSD prevention plans from employers of workers who are covered by the presumption which is a part of the province's strategy to prevent or mitigate the risk of PTSD.

As a result of this legislation, the WSIB has established a PTSD roster to assist in providing early clinical expert assessment and recommendations to the WSIB for workers in communities across Ontario. Further, the Ministry of Labour has introduced a website titled firstrespondersfirst.ca. Among other things, the website provides employers with a PTSD Resource Toolkit and workers with a self-assessment tool.

Clarification on the Definition of Regulation 834: Critical Injury

In January 2017, the Ministry of Labour issued a notice to provide clarity around the application of Regulation 834, clauses (d) and (e) of the critical injury definition. While the fracture or amputation of a single finger or single toe does not constitute a critical injury, the fracture or amputation of more than one finger or more than one toe does constitute a critical injury if an injury is of a serious nature.

Key City Health & Safety Initiatives

Some key health and safety initiatives in 2016 included:

- Preparation and submission to the MOL of applications to be a continued provider of joint health and safety committee certification training
- Implementation of new E-learning modules for WHMIS 1988 and WHMIS 2015
- Development and implementation of PTSD Prevention Plans for Fire Services and Toronto Paramedic Services
- Development of new resources to increase awareness of domestic violence/ intimate-partner violence in the workplace

- Development and implementation of a new template Terms of Reference for Multi-Workplace Joint Health and Safety Committees to enable adherence to new MOL requirements
- A successful Joint Health and Safety Committee Recognition Event in September

Continuous Improvement: Progress towards Target Zero

Despite an increase in lost time injuries in 2016, there continues to be a significant decrease in lost time injuries resulting in fewer days lost due to workplace incidents from 2007 to 2016 since the implementation of the continuous improvement initiative: Target Zero. This demonstrates the success of continuous improvement joint efforts of employees, union representatives, supervisors and managers.

Figure 6 below provides a summary of key performance indicators comparing 2007 to 2016.

Figure 6: Target Zero Continuous Improvement Progress

| Performance Indicator | 2007 | 2016 | % Change |
|---------------------------|---------|---------|----------|
| Lost Time Injuries (LTIs) | 1703 | 843 | 50.5% |
| Medical Aids | 1410 | 922 | 34.6% |
| Recurrences | 370 | 126 | 65.9% |
| Frequency | 7.9 | 3.83 | 51.5% |
| Severity | 242.6 | 127.8 | 47.3% |
| Days Lost | 52,336 | 27,626 | 47.2% |
| WSIB Costs | \$30.9M | \$35.1M | 18.4% |

CONTACT

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SIGNATURE

Kerry Pond, Executive Director, Human Resources

Peter Wallace, City Manager

ATTACHMENTS

Appendix A – WSIB Incidents (January – December) by Division

Appendix B – LTI Frequency by Division

Appendix C – WSIB Costs for all Firm Numbers

Appendix D (i) – WSIB Invoiced Costs to Year End (<\$50,000)

Appendix D (ii) - WSIB Invoiced Costs to Year End (>\$50,000)