Occupational Health and Safety Report: 1st and 2nd Quarters 2017

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 first two quarters of 2017.

There was a 6.8% increase in the number of lost time injuries (LTIs) during the first two quarters of 2017 compared to the first two quarters of 2016. There was a 9.1% increase in the frequency of lost time injuries and a 43.6% increase in severity. There was a 10.8% decrease in the number of recurrences and a 7.6% increase in medical aid injuries.

Workplace Safety and Insurance Board (WSIB) invoiced costs increased from approximately $19.3 million in the first two quarters of 2016 to approximately $20.1 million in the first two quarters of 2017.

This overall increase is almost entirely attributable to claims for mental/emotional illnesses and disorders. While this type of claim occurred in a number of divisions, increased costs are predominantly attributable to Toronto Fire Services and Toronto Paramedic Services claims. A portion of the increased costs results from presumptive legislation regarding post-traumatic stress disorder (PTSD) in first responders. A larger proportion of this increase, however, results from claims for other types of mental/emotional illnesses and disorders.

While the overall cost of firefighter cancer claims decreased during the first two quarters of 2017 relative to 2016, firefighter cancer claims continue to account for more than 40% of the City’s current WSIB firm number costs.
RECOMMENDATIONS

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


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, 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 2017.

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

ISSUE BACKGROUND

Continuously improving 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 Injuries, Medical Aid Injuries and Recurrences

Information regarding reported work-related injuries/illnesses, by division, during the first two quarters of 2017 is attached in Appendix A. Information is also provided for the comparable time period from 2013 to 2016. 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 time as a result of a previously reported workplace injury/illness. No new incident has taken place; and,

Number of medical aids: injury/illness in which health care only was approved by the WSIB or claim 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 has lost time that has not been approved by the WSIB.

Overall, there was a 6.8% increase in the total number of lost time injuries in the first two quarters of 2017 relative to the first two quarters of 2016. This increase can be attributed to:

- An increased number of reported exposures to harmful substances/environments in Toronto Paramedic Services specifically within the category “exposure to traumatic or stressful events”
- An increased number of slips, trips and falls
- An increased number of contact with objects and equipment in Fleet Services

Fire Services experienced a significant decrease in the total number of lost time injuries in the first two quarters of 2017 relative to the first two quarters of 2016 across all main injury categories, most notably slips, trips and falls, musculoskeletal disorders and contact with objects and equipment. The increase in the time loss of injuries, however, resulted in an overall increase in severity and costs.

There was a 10.8% decrease in the number of recurrences and a 7.6% increase in medical aid injuries.

**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). The trend in the City's injury frequency during the first two quarters of 2017 relative to the frequency during the first two quarters in 2013 to 2016 is provided below.
Frequency rates for divisions are reported in Appendix B. It should be noted that in a division with a small number of staff, 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 as a result of work-related injury and illness relative to hours worked. Figure 2 below shows the City's severity rate during the first two quarters of 2017 relative to the severity for the first two quarters in 2013 to 2016.
The severity number represents the number of days lost per 100 employees in the year.

The two divisions that had the highest number of claims for mental/emotional illnesses and disorders, Toronto Fire Services and Toronto Paramedic Services, experienced the most significant increases in lost time injury severity.

**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 2017 are reported in Appendix C. This includes costs that continue from injuries sustained in pre-amalgamation municipalities. Information is also provided for the comparable time period in 2013 to 2016.

This information is summarized in Figure 3 below.

WSIB invoiced costs for the first two quarters of 2017 were approximately $20.1 million, approximately $840,000 higher than the first two quarters of 2016. Factors that contributed to this increase include:

- An increase of over $920,000 in costs associated with claims for mental/emotional illnesses and disorders in Toronto Fire Services, approximately $518,000 of which are attributable to PTSD claims
- An increase of over $935,000 in costs associated with claims for mental/emotional illnesses and disorders in Toronto Paramedic Services, approximately $270,000 of which are attributable to PTSD claims

Both Fire services and Paramedic Services submitted a workplace post-traumatic stress disorder prevention plan to the Ministry of Labour in April this year.
The plans included actions for prevention, intervention and recovery, and return-to-work. Recent efforts have focused on reviewing best practices as well as identifying and addressing any gaps identified as a result of assessments and reviews.

The MOL recommended framework is in keeping with the City's Psychological Health and Safety Policy and includes the following key elements:

- A statement of commitment to promote mental health and psychological well-being and to actions to prevent harm to worker psychological health
- Actions to enhance mental health knowledge at all levels and eliminate stigma
- Actions aimed at primary prevention in which changes are made to conditions that may contribute to psychological health problems
- Actions aimed at intervention in which psychological health problems are identified and addressed at an early stage through training and provision of Employee Assistance and Employee Health and Rehabilitation
- Actions to support access to psychological treatment and accommodations to stay at work or return-to-work.

The City's trend in WSIB claim costs for mental/emotional illnesses and disorders is shown in Figure 4 below.

The "WSIB Invoiced Costs" reports identify all WSIB invoiced costs by division. Appendix D (i) provides the information for divisions whose costs were less than $50,000 in the first two quarters of 2017. Appendix D (ii) provides the same information for divisions whose costs were greater than $50,000.
Figure 5 below provides the City's WSIB current firm costs by cost category.

Figure 6 below shows the WSIB costs for the current City firm number exclusive of firefighter cancers.

Figure 7 below shows the WSIB costs associated with firefighter cancers. The increase in recent years are as a result of changes to the presumptive legislation for firefighter-related occupational diseases retroactive to 1960.
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.

Eight work-related critical injuries were reported to the MOL in the first quarter of 2017:
- A Toronto Paramedic Services employee experienced right chest pain and unconsciousness after his vehicle swerved off the roadway and struck a hydro pole and residential concrete partition
- A Toronto Paramedic Services employee reported unconsciousness as a result of involvement in a partial rollover accident. The vehicle in which he was the passenger was struck in the rear driver side, slid sideways and tipped over, landing on the passenger side
- A Parks, Forestry and Recreation employee slipped on ice in a parking lot, fracturing an arm bone
- A Fire Services employee slipped on wet stairs at a fire scene, rolling his ankle and sustaining a fracture of the left leg
- A Solid Waste Management employee sustained a right ankle fracture when he was walking along a boulevard and stepped into a hole
- A Parks, Forestry and Recreation employee reported loss of consciousness after striking his head on a low doorframe

![Figure 7 - Firefighter Cancer Claims](image-url)
• A Parks, Forestry and Recreation employee sustained a left foot fracture while demonstrating a gymnastics move
• A Solid Waste Management employee sustained a left leg fracture when he was struck and knocked to the ground by a trailer on the tipping floor. His left leg was pinned under the trailer tire

In addition, three incidents in which employees lost consciousness or experienced seizures were reported to the MOL as critical injuries, although no work-related causes were identified.

Seven work-related critical injuries were reported to the MOL in the second quarter of 2017:
• A Solid Waste Management employee sustained an ankle fracture when he slipped on cracked/uneven pavement and rolled his right ankle
• A Municipal Licensing and Standards employee sustained right shoulder and right ankle fractures after slipping and falling partially into a covered swimming pool she was inspecting
• A Parks, Forestry and Recreation employee struck her right wrist while removing volleyball net posts, sustaining a fracture
• A Toronto Paramedic Services employee sustained a left ankle fracture after rolling his ankle while exiting an ambulance on a roadway
• A Long-Term Care Homes and Services employee sustained a bone fracture in the right foot as a result of a misstep
• A Transportation Services employee sustained a right wrist fracture when his vehicle was struck from behind by another vehicle
• A Transportation Services employee sustained a right knee fracture when he tripped on a clothes line cable, which caught his foot causing him to fall

In addition, eleven incidents were reported to the MOL as critical injuries in the first two quarters, although no work-related causes were identified. In these cases, employees:
• Lost consciousness
• Experienced seizure-like symptoms
• Suffered an aneurysm
• Experienced a heart attack

MOL Visits (with and without orders)
The MOL issued four orders to the City during the first quarter of 2017. These orders related to:
• Information and instruction regarding ladder safety
• Acquainting workers with hazard of ice on roof of rear-loading packer (with compliance plan ordered)
• Availability of personal protective equipment for responding to outbreak

The MOL issued two orders to the City during the second quarter of 2017, both of which related to maintenance of eyewash fountains.
All orders were complied with.

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

There were eighteen MOL visits to City facilities/work operations that did not result in orders during the first quarter of 2017. Five of these visits were in response to newly-reported critical injuries/incidents, eight were follow-up visits to earlier critical injuries/incidents, one was in response to a work refusal, one was a routine inspection, one was in response to an anonymous complaint, one was to follow up on an earlier order and one was to investigate reported occupational illness.

There were twenty-one MOL visits to City facilities/work operations that did not result in orders during the second quarter of 2017. Seven of these visits were in response to newly-reported critical injuries/incidents, two were follow-up visits to earlier critical injuries/incidents, four were in response to complaints, five were to investigate reported occupational illness, two were in response to concerns regarding asbestos exposure and one was a follow-up to an earlier complaint.

MOL and WSIB Initiatives

Ontario Legislation Passed to Expand Mental Stress Entitlement to Include Chronic Mental Stress

The provincial government’s budget implementation legislation, the Stronger, Healthier Ontario Act, received Royal Assent on May 17, 2017. It includes amendments to the Workplace Safety and Insurance Act, 1997 (WSIA) to allow entitlement for chronic mental stress for workplace injuries that occur on or after January 1, 2018. Previously, the WSIA and WSIB’s operational policy limited entitlement to benefits for traumatic mental stress that was “an acute reaction to a sudden and unexpected event”.

The WSIB has developed a new draft Traumatic or Chronic Mental Stress Operational Policy to reflect these amendments that will replace the existing Traumatic Mental Stress Operational Policy. Under this policy, three conditions will need to be met for a person to be entitled to benefits:

- An appropriate regulated health professional, such as a family physician, provides a diagnosis based on the Diagnostic and Statistical Manual of Mental Disorders (DSM)
- The person has experienced (a) substantial work-related stressor(s), like workplace bullying or harassment, and
- The work-related stressor(s) must have caused or significantly contributed to the chronic mental stress.

The stressor(s) must be excessive in comparison to the normal pressures/tensions experienced by workers in similar circumstances and must have significantly contributed to the chronic mental stress.
This policy maintains the existing exclusion from benefits for mental stress caused by an employer's decisions or actions relating to the worker's employment, including a decision to change working conditions, disciplinary actions, etc. However, it will allow benefits for traumatic or chronic mental stress due to an employer's actions or decisions that are not a part of the employment function. It will also allow benefits when there is a combination of the employer's decisions and other work-related stressors, assuming the other work-related stressors are a significant contributing cause of the traumatic or chronic mental stress.

**MOL 2017 - 2018 Inspection Blitz Schedule**

The MOL has released its inspection blitz and initiatives schedule for 2017-2018. The focus of a number of these blitzes and initiatives applies directly to City work operations, as follows:

- New and young workers in the industrial sector from May to August 2017
- Falls, including slips and trips, in the health care and industrial sectors from October to November 2017
- Machine guarding and electrical hazards in the industrial sector from January to February 2018
- Preventing “struck by” injuries in the industrial sector from April 2017 to March 2018
- Noise in all sectors from April 2017 to March 2018
- Workplace Hazardous Materials Information System (WHMIS) in all sectors from April 2017 to March 2018

**Key City Health & Safety Initiatives**

Key initiatives include:

- Rollout of the City’s Domestic Violence in the Workplace website
- Enhancements to the City’s Mental Wellness website
- Amendments to the City’s WHMIS policy
- Amendments to the Sun Protection Guidelines to incorporate recommendations of Ontario’s Sun Safety Working Group
- Submission of Joint Health and Safety Committee (JHSC) Certification Refresher Training to the MOL for approval of the City as provider
- Obtaining MOL approval for the City as a recognized provider of all levels of JHSC Certification training
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SIGNATURE

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City Manager

ATTACHMENTS

Appendix A – WSIB Incidents (January to June) by Division
Appendix B – Lost Time Injury Frequency (January to June) by Division
Appendix C – WSIB Costs (January to June) for all Firm Numbers
Appendix D (i) – WSIB Invoiced Costs <$50,000 (January to June)
Appendix D (ii) - WSIB Invoiced Costs >$50,000 (January to June)