

# STAFF REPORT ACTION REQUIRED

# Occupational Health and Safety Report 1<sup>st</sup> and 2<sup>nd</sup> Quarters 2016

Date:	October 24, 2016
To:	Employee and Labour Relations Committee
From:	City Manager and Executive Director of Human Resources
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 2016.

There was a 9.6% decrease in the number of lost time injuries (LTIs) during the first two quarters of 2016 compared to the first two quarters of 2015. There was an 11.6% decrease in the frequency of lost time injuries and a 1.7% increase in severity. There was a 7.1% decrease in the number of recurrences and a 2.8% decrease in medical aid injuries.

Workplace Safety and Insurance Board (WSIB) invoiced costs increased from approximately \$13.7 million in the first two quarters of 2015 to approximately \$19.3 million in the first two quarters of 2016. The increase in costs are attributed to the following:

- An increase in firefighter cancer costs from approximately \$2.3 million in the first two quarters of 2015 to \$7.2 million in the first two quarters of 2016. This increase is as a result of changes to firefighter presumptive legislation that recognizes additional cancers as being associated with the occupation of firefighting.
- An increase in costs of current and historical claims resulting from:
  - musculoskeletal injuries
  - exposure to harmful substances and environments, specifically traumatic/stressful events and one electrical current exposure
  - assaults/violent acts
- An increase in the WSIB's administration rate from 34.3% in 2015 to 35.9% in 2016.

#### RECOMMENDATIONS

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

1. City Council receive the 1<sup>st</sup> and 2<sup>nd</sup> Quarters 2016 Occupational Health and Safety Report for information.

## **Financial Impact**

There are no financial impacts to this report.

The Deputy City Manager & 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 2016.

#### 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 2016 is attached in Appendix A. Information is also provided for the comparable time period from 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 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.

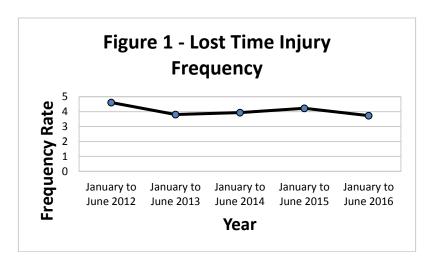
Overall, there was a 9.6% decrease in the total number of lost time injuries in the first two quarters of 2016 relative to the first two quarters of 2015. This decrease can be attributed to:

- Fewer outbreaks of infectious disease in Shelter, Support and Housing Administration and Long Term Care Homes and Services
- Fewer incidents arising from exposure to traumatic or stressful events in Shelter, Support and Housing Administration and Long Term Care Homes and Services
- Fewer exposures to harmful substances/environments in Toronto Paramedic Services

There was a 7.1% decrease in the number of recurrences and a 2.8% decrease in medical aid injuries.

# Lost Time Injury (LTI) Frequency

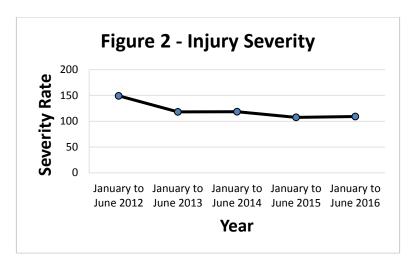
LTI frequency represents the number of LTI events (lost time approved by the WSIB or pending WSIB adjudication decision) per 200,000 hours worked (100 employee-years). The trend in the City's injury frequency during the first two quarters of 2016 relative to the frequency during the first two quarters in 2012 to 2015 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 relative to hours worked. Figure 2 below shows the City's severity rate during the first two quarters of 2016 relative to the severity for the first two quarters in 2012 to 2015.



The severity number represents the number of days lost per 100 employees in the year. Improvements are a reflection of reduced injury severity and effectiveness of return-towork efforts.

# <u>Injury and Accident Costs [Overall Costs (all firm numbers) and Invoiced New Firm</u> Costs by Division]

Overall costs incurred under all City firm numbers during the first two quarters of 2016 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 2012 to 2015.

WSIB invoiced costs for the first two quarters of 2016 was approximately \$19.3 million, \$5.6 million higher than the first two quarters of 2015. Factors that contributed to this increase include:

- Firefighter cancer claim costs increased by approximately \$5.0 million.
- A \$1.2 million increase in costs of current and historical claims resulting from:
  - musculoskeletal injuries
  - exposure to harmful substances and environments, specifically traumatic/stressful events and one electrical current exposure
  - assaults/violent acts
- The WSIB's administration rate increased from 34.3% in 2015 to 35.9% in 2016.

This information is summarized in Figure 3 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 2016. Appendix D (ii) provides the same information for divisions whose costs were greater than \$50,000.

Figure 4 below provides the City's WSIB Current Firm costs (i.e. post-amalgamation) by cost category. Health care and loss of earning percentages are lower than last year whereas the survivors' benefits percentage has increased as a result of firefighter cancer claims.

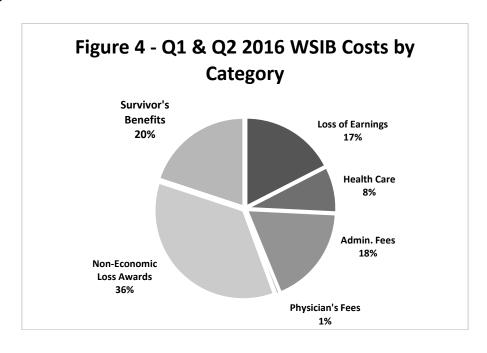


Figure 5 below shows the WSIB costs for the current City firm number exclusive of firefighter cancers.

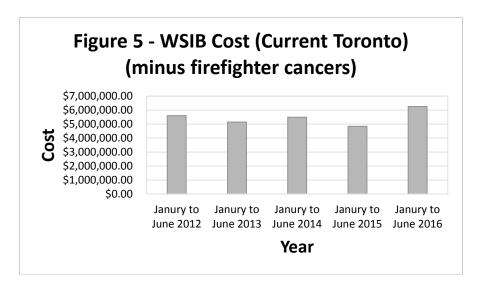
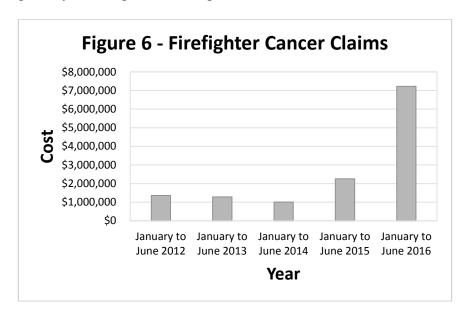


Figure 6 below shows the WSIB costs associated with firefighter cancers. The increase is as a result of changes to the presumptive legislation for firefighter-related occupational diseases retroactive to 1960. The list of allowable cancers was increased effective May 2014, with primary site lung cancer being introduced in 2016.



#### 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.

Seven work-related critical injuries were reported to the MOL in the first quarter of 2016:

- A Toronto Water employee sustained a right broken collar bone when the vehicle in which he was a passenger hit the back of a flatbed truck.
- A Parks, Forestry and Recreation employee sustained a fractured left leg when attempting to stop a moving vehicle from rolling.
- A Long-Term Care Home and Services employee sustained a fractured right shoulder during a fall after tripping over an air mattress pressure monitor.
- A Toronto Water employee sustained a fractured lower right leg when the key to a water main that he and another employee were turning broke at the base, causing him to slip and fall backwards.
- A Solid Waste Management Services employee sustained a fractured right shoulder after losing his footing on ice/slush when stepping up on the rear step of a truck while holding a grab bar.
- A Solid Waste Management Services employee sustained multiple injuries, including loss of consciousness and a fractured collarbone, when he lost control of the tractor trailer he was driving. The vehicle rolled over.
- A Facilities Management employee sustained a fractured right ankle when she stepped on a sewer cover that was depressed approximately 2 inches.

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

Five work-related critical injuries were reported to the MOL in the second quarter of 2016:

- A Toronto Water employee momentarily lost consciousness when he misjudged his foot placement and fell into an excavation site.
- A Parks, Forestry & Recreation employee sustained a fractured ankle when she tripped while walking down a set of stairs at an off-site event.
- A Parks, Forestry & Recreation employee sustained a fractured arm when the backhoe he was operating struck a snow-covered catch basin, and he was thrust forward into the steering wheel.
- A Parks, Forestry & Recreation employee's chainsaw made contact with an electric arc while responding to an after-hours storm call.
- An Employment & Social Services employee sustained a fractured ankle after colliding with another employee in a hallway.

In addition, six incidents were reported to the MOL as critical injuries, although no work-related causes were identified. In these cases, employees:

- Lost consciousness
- Experienced seizure-like symptoms
- Sustained a fracture
- Experienced a heart attack

#### **MOL Visits (with and without orders)**

The MOL issued five orders to the City during the first quarter of 2016. These orders related to:

- Mould remediation
- Signage used during provision of traffic direction
- Maintenance of the rear step of a vehicle
- Fall protection during use of a fixed ladder (accompanied by order regarding compliance plan)

The MOL issued two orders to the City during the second quarter of 2016 during one visit. These orders related to the maintenance of a portable ladder with frame damage.

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 twenty-three MOL visits to City facilities/work operations that did not result in orders, during the first quarter of 2016. Four of these visits were follow-up visits regarding previous orders, incidents, complaints or injuries; four were routine inspections; six resulted from new injuries; seven resulted from complaints; one occurred in response to asbestos found during floor work and another resulted from outbreaks/reported occupational diseases.

There were eighteen MOL visits to City facilities/work operations that did not result in orders, during the second quarter of 2016. Three of these visits were follow-up visits regarding previous orders, incidents, complaints or injuries; eight resulted from new injuries; two resulted from complaints; two resulted from outbreaks/reported occupational diseases; two from a MOL blitz; and one to provide advice to the City.

#### **MOL and WSIB Initiatives**

#### New Sexual Violence and Harassment Legislation

As a result of the passage of Bill 132, An Act to amend various statutes with respect to sexual violence, sexual harassment, domestic violence and related matters, various

existing statutes with respect to sexual violence, sexual harassment, and domestic violence have been amended. Amendments to the *Occupational Health and Safety Act* include modifying the current definition of "workplace harassment" and imposing additional obligations on employers concerning their workplace harassment policies, programs and investigations.

The OHSA's definition of "workplace harassment" has been expanded to include "workplace sexual harassment".

The OHSA now requires an employer's program to implement a workplace harassment policy to set out:

- Measures and procedures for workers to report incidents of workplace harassment to a person other than the employer or supervisor, if the employer or supervisor is the alleged harasser;
- How incidents or complaints of workplace harassment will be investigated and dealt with:
- That information obtained about an incident or complaint of workplace
  harassment, including identifying information about any individuals involved,
  will not be disclosed unless the disclosure is necessary for the investigation or
  corrective action, or is required by law; and
- How a worker who has allegedly experienced workplace harassment and the alleged harasser (if he or she is a worker of the employer) will be informed of the results of the investigation and of any corrective action taken.

The Human Rights Office tabled recommended changes with the OHSCC at their meeting in June. A process was put in place for review by a working group of the committee.

Employers continue to be required to renew their program at least annually and provide workers with appropriate information and instruction on the contents of both the policy and program.

# Ministry of Labour Proposes to Mandate Construction Hazard Awareness Training

The Ministry of Labour is proposing amendments to the Occupational Health and Safety Awareness and Training Regulation (O. Reg. 297/13) under the Occupational Health and Safety Act. The amendments, if approved, would apply to employers who engage in "construction" as defined under the Act.

The proposed amendments would require employers to ensure that workers performing work to which the Construction Projects Regulation (O. Reg. 213/91) applies complete a construction hazard awareness training program. Employers could meet the training requirement in one of two ways, by ensuring that their workers:

- Successfully complete a training program approved as meeting the criteria of a construction health and safety awareness training program and provider standard established by the ministry's Chief Prevention Officer (CPO)
- Complete a training program developed by their employer, in consultation with the joint health and safety committee (JHSC), based on the learning outcomes set out in the regulation

The proposal includes a two-year transition period to give employers time to ensure that existing workers have completed the training before the proposed amendments come into force.

## Ontario Passes Legislation to Support First Responders with PTSD

On April 5 2016, Ontario passed legislation that creates 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.

From a City perspective, the presumption applies to police officers, firefighters, paramedics, dispatchers of 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.

#### MOL 2016-2017 Inspection Blitz Schedule

The MOL has released its inspection blitz schedule for 2016-2017. The focus of a number of these blitzes applies directly to City work operations, as follows:

- Falls in the construction and industrial sectors from May to July
- New and young workers in the industrial sector from July to September
- Mobile cranes and material hoisting in the construction sector in August and September
- Chemical handling in the industrial sector in September and October
- Electrical hazards in the construction sector in November and December

Results of these visits will be reported at year end.

#### CONTACTS

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**

Peter Wallace	Kerry Pond
City Manager	Executive Director of Human Resources

#### **ATTACHMENTS**

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

Appendix B – LTI Frequency (January – June) by Division

Appendix C – WSIB Costs for all Firm Numbers (January – June)

Appendix D (i) – WSIB Invoiced Costs (January – June) (<\$50,000)

Appendix D (ii) - WSIB Invoiced Costs (January – June) (>\$50,000)