

Occupational Health and Safety Report: First and Second Quarters of 2019

Date: October 30, 2019
To: General Government and Licensing Committee
From: Chief People Officer
Wards: All

SUMMARY

This report provides information on the status of the City of Toronto's health and safety system, specifically performance for the first half of 2019 and actions and priorities to address identified hazards.

There was a 12.9 percent increase in the number of lost time injuries (LTIs) in the first half of 2019 relative to 2018, a 4 percent increase in the number of recurrences and a 5.1 percent increase in the number of medical aid injuries.

The overall invoiced costs related to the City's current Workplace Safety and Insurance Board (WSIB) firm numbers increased from \$13.7 million in the first half of 2018 to \$15.9 million in 2019. Increased costs are primarily attributed to mental/emotional illnesses or disorders including traumatic mental stress and post-traumatic stress disorder (PTSD) in first responders. These costs were \$5.7 million in the first half of 2018 and \$7.4 million in 2019. Legislation introduced in 2016 presumes that if a first responder or other designated worker is diagnosed with PTSD by a psychiatrist or psychologist, the condition is work-related. This pattern of increased costs is continuing from 2016 and mirrors the experience of other municipalities. Toronto Paramedic Services and Toronto Fire Services have developed action plans to address PTSD and submitted them to the Ministry of Labour (MOL). The actions that were identified in the plans continue to be implemented.

The cost of firefighter cancers decreased from \$3.5 million in the first half of 2018 to \$3.1 million in 2019. Additional presumptive legislation regarding firefighter cancers was introduced in 2014 and rolled out incrementally over a period of four years. Decisions regarding new and retroactive claims resulted in significantly increased costs, particularly in 2016 and 2017. The number of new retroactive cases is declining, a trend that is expected to continue.

RECOMMENDATIONS

The Chief People Officer recommends that:

1. City Council receive this report for information.

FINANCIAL IMPACT

There is no financial impact resulting from the adoption of the recommendation in this report.

The Chief Financial Officer and Treasurer 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 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 first half of 2019.

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

Lost Time Injuries, Medical Aid Injuries and Recurrences

Information regarding reported WSIB incidents (work-related injuries/illnesses), by division, from January to June 2019 is attached in Appendix A. This information is also provided for the years 2015 to 2018. The information provided includes:

- Number of LTIs: 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 12.9 percent increase in the total number of LTIs in the first half of 2019 relative to 2018.

The chart that follows summarizes the events and exposures that resulted in increased LTIs in the first half of 2019, the divisions which experienced the increase and actions that are in progress to address the identified hazards.

Events/Exposures resulting in increased LTIs	Divisions experiencing increased LTIs	Actions to address identified hazards
<p>Assaults and violent acts increased by 40 percent from 30 in 2018 to 42 in 2019</p>	<ul style="list-style-type: none"> • Seniors Services and Long-Term Care • Toronto Paramedic Services • Shelter, Support and Housing Administration 	<ul style="list-style-type: none"> • There has been an increased emphasis in these divisions on reporting of workplace violence incidents in order to address prevention. • Actions taken by Seniors Services and Long-Term Care include: <ul style="list-style-type: none"> • Annual education on workplace violence • Personal alarms issued as personal protective equipment • Public Services Health and Safety Association attendance at 2019 Joint Health and Safety Committee (JHSC) Co-chairs Education Day to present on workplace violence prevention in the health care environment • A Behavioural Support Ontario team at each home to work with staff, residents and families to address responsive behaviours and ensure resident and staff safety

Events/Exposures resulting in increased LTIs	Divisions experiencing increased LTIs	Actions to address identified hazards
Slip, trips, missteps and falls increased by 41 percent from 113 in 2018 to 159 in 2019	<ul style="list-style-type: none"> • Toronto Paramedic Services • Parks Forestry and Recreation • Toronto Fire Services • Seniors Services and Long-Term Care • Children's Services 	<ul style="list-style-type: none"> • Actions taken by divisions included: <ul style="list-style-type: none"> • Providing tailgate sessions • Inspecting/reviewing safety footwear • Salting surfaces within areas of City control • A significant number of these injuries occurred under conditions in which no hazard could be identified
Transportation accidents increased from 8 to 19 from 2018 to 2019	<ul style="list-style-type: none"> • Parks Forestry and Recreation • Toronto Paramedic Services • Toronto Public Health 	<ul style="list-style-type: none"> • In the majority of cases, a City vehicle was either rear-ended or side swiped by a non-City vehicle. Incidents were typically referred to Fleet Safety for investigation in the circumstances where a City employee might be at fault.

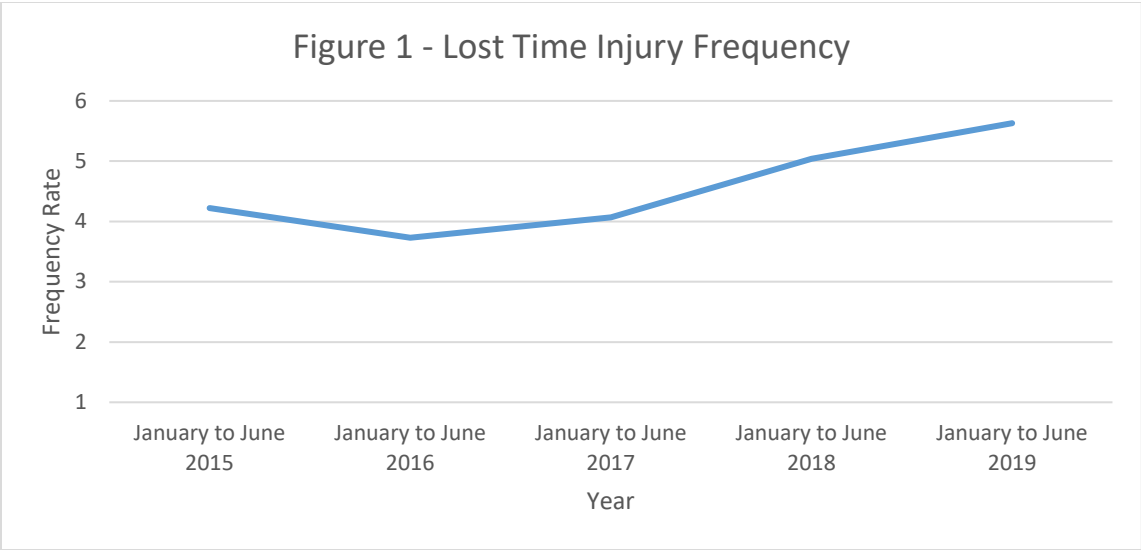
Recurrences

There was a 4 percent increase in recurrences in the first half of 2019 relative to 2018, primarily in injuries resulting from exertion, repetition, awkward posture and vibration/jarring.

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 the first half of 2019 relative to 2018. The LTI frequency increased from 5.04 to 5.63 in in the first half of 2018 relative to 2019.

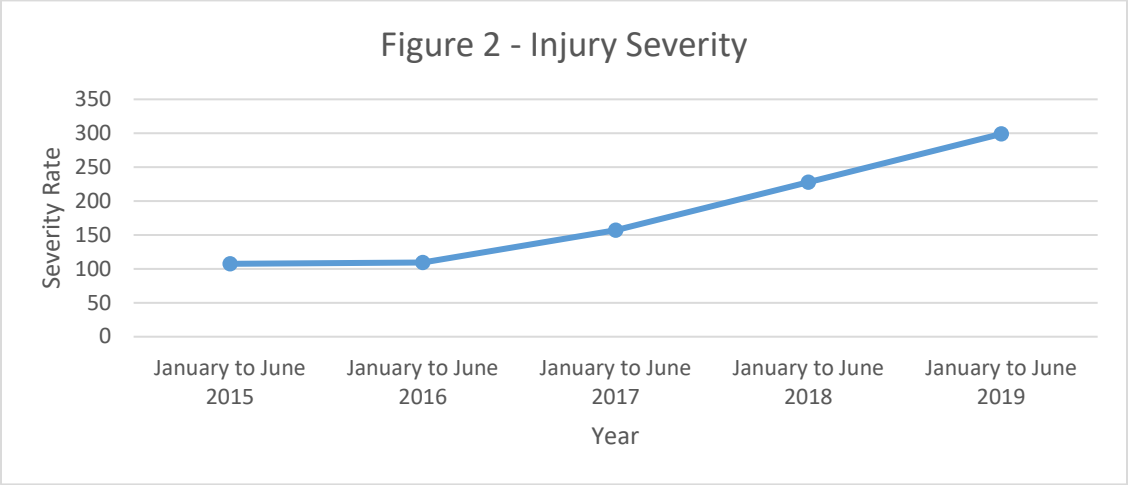


Frequency rates for divisions are reported in Appendix B. It should be noted that in a small City division a single LTI can result in a high frequency rate.

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 the first half of 2019 relative to the severity for the years 2015 to 2017. The City’s 2019 injury severity rate increased from 227.86 in 2018 to 298.98 in 2019.

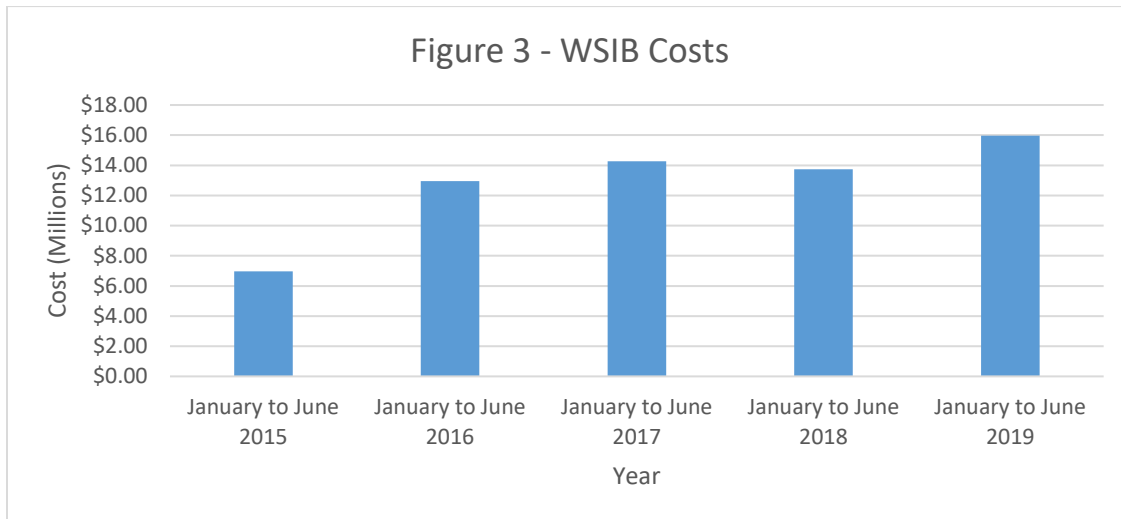


Toronto Paramedic Services, Toronto Fire Services and Shelter, Support and Housing Administration experienced the most significant increase in lost time injury severity. These divisions had the highest number of claims for mental/emotional illnesses or disorders. These claims typically accrue higher than physical health care costs and are more challenging with respect to return to work efforts.

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

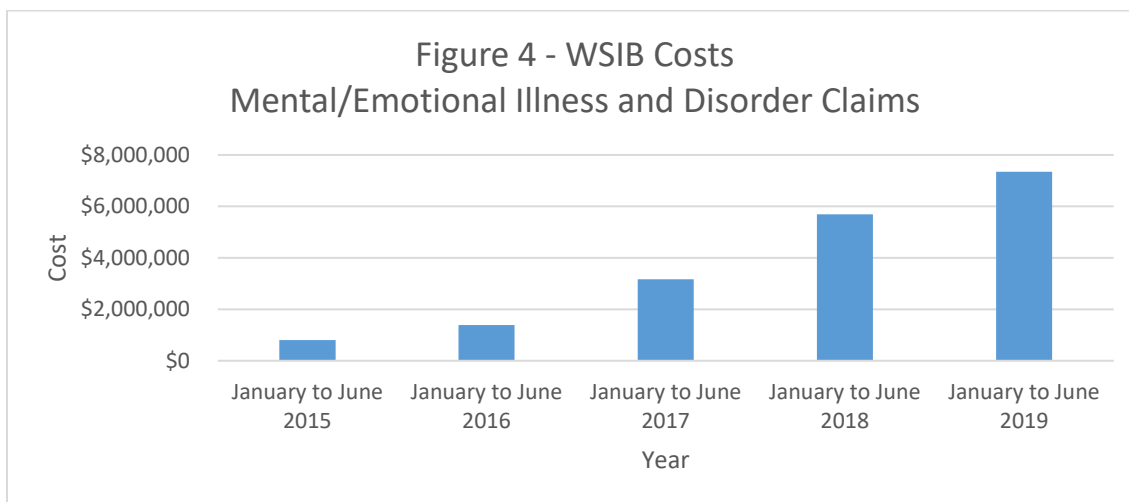
Overall costs incurred under all City firm numbers during the first half of 2019 are reported in Appendix C. Information is also provided for the time period 2015 to 2018. There was a slight decrease in overall costs for former firm numbers from \$4.7 million in the first half of 2018 to \$4.4 million in 2019 as would be expected given the age of these claims.

Figure 3 below shows the overall invoiced costs related to the City's current WSIB firm number.



The overall invoiced costs related to the City's current WSIB firm number increased from \$13.7 million in the first half of 2018 to \$15.9 million in 2019. There was a significant increase to costs associated with claims for mental/emotional illnesses or disorders.

Figure 4 below shows the City's overall invoiced costs related to claims for mental/emotional illnesses or disorders.

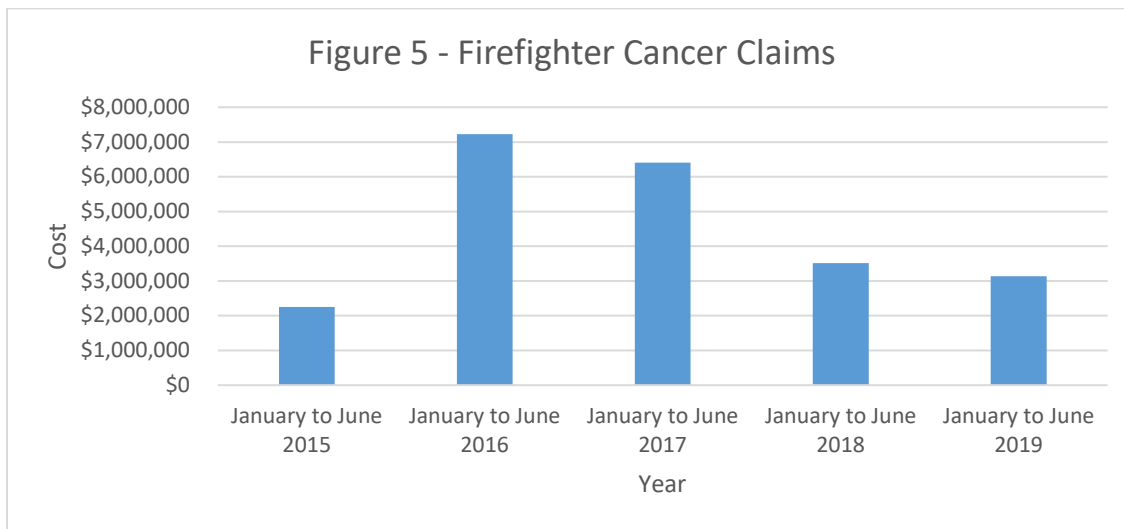


The costs associated with claims for mental/emotional illnesses or disorders increased from \$5.7 million in the first half of 2018 to \$7.4 million in 2019. The most significant increase in

cumulative costs occurred in Toronto Paramedic Services and Toronto Fire Services. Much of this increase is a result of legislation introduced in 2016 that presumes if a first responder is diagnosed with PTSD by a psychiatrist or psychologist, the condition is work-related. PTSD claims are very costly due to the nature of health services required, delays in gaining access to these services and significant length of time in achieving a return to work. This experience mirrors that of other municipalities since the introduction of presumptive PTSD legislation.

The cost of firefighter cancers decreased from \$3.5 million in the first half of 2018 to \$3.1 million in 2019.

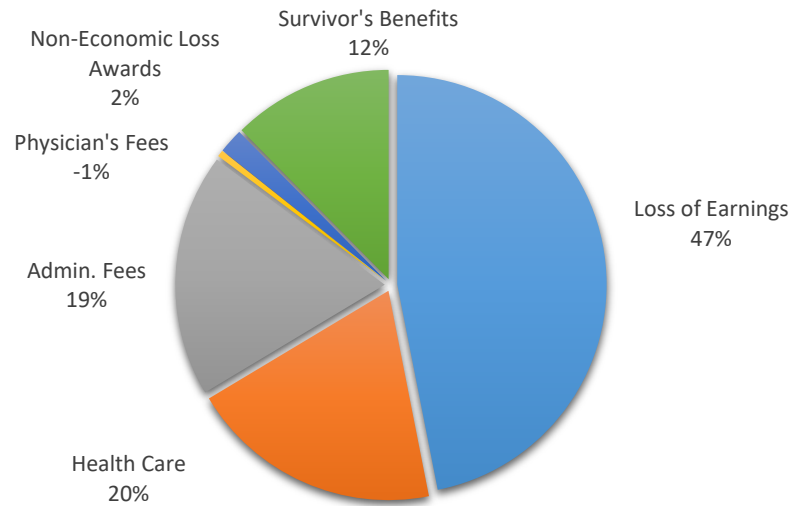
Figure 5 below shows the City's overall invoiced costs related to firefighter cancer claims.



Additional presumptive legislation regarding firefighter cancers was introduced in 2014 and rolled out incrementally over a period of four years. Decisions regarding new and retroactive claims resulted in significantly increased costs, particularly in 2016 and 2017. The number of new retroactive cases is declining, a trend that is expected to continue. Toronto Fire Services remains committed to prevention of future firefighter cancers. Significant efforts have been made to characterize firefighter exposure to cancer causing agents and to ensure exposures are addressed during the purchase of equipment (e.g. bunker gear, helmets, and hoods).

Figure 6 provides the City's WSIB Current Firm costs by cost category in the first half of 2019. Health care and survivor benefits percentages increased, whereas loss of earnings percentage decreased.

Figure 6 - Q1 & Q2 2019 WSIB Costs by Category



Appendix D (i) provides the current City's "WSIB Invoiced Costs" for 2018 for divisions whose costs were less than \$50,000 and Appendix D (ii) for divisions whose costs were greater than \$50,000.

Critical Injuries

Occupational health and safety legislation stipulates requirements for reporting fatalities and critical injuries to the 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.

On May 29th, a Solid Waste Management Services (SWMS) collection operator sustained multiple fractures and internal injuries while riding the rear step of a garbage collection truck. The incident occurred when the truck approached a narrow bridge and encountered another vehicle crossing in the opposite direction. The collection truck was backing up to allow the other vehicle to pass and the employee on the step was pinned between the truck and a tree. The employee later died during surgery and the MOL was advised. SWMS, in partnership with Transportation Services, is seeking to implement fleet related safety and accountability enhancements as part of a proactive approach to safety. This effort will ensure the division's fleet is equipped with advanced safety and technology-based enhancements, thereby increasing the safety of pedestrians, drivers, staff and other road users as well as improving customer service and ensuring increased transparency and accountability. These enhancements include:

- Vehicle Side Guards
- Video Based Telematics

- 360 Degree Camera Systems
- Cloud Based Storage of Data
- Driver History Profile, Preventative In-Case Coaching and Enhanced Training
- Construction of a new Dedicated Training Centre for Onboarding of Collection Operators (Classroom and In-Vehicle Practical Training)

An additional twenty-eight (28) work-related critical injuries were reported to the MOL during the first half of 2019. Of these, eighteen (18) involved fractures, eight (8) involved loss of consciousness, one (1) involved a concussion and one (1) involved smoke inhalation and burns. Appendix E provides further information with respect to these critical injuries, including the divisions in which the injuries occurred.

In addition, seven (7) incidents were reported to the MOL as critical injuries, although no work-related causes were noted e.g. loss of consciousness, seizure.

All of these incidents were investigated in the workplace. Information regarding these incidents and any actions taken to prevent a recurrence are shared with joint health and safety committees (JHSCs) or health and safety representatives.

MOL Orders/Visits without Orders

The MOL issued three (3) compliance-based orders to the City during the first half of 2019. This continues the pattern of significant decrease in orders over previous years.

The orders related to:

- Ladder safety
- Workplace harassment

All orders were complied with.

There were forty-nine (49) MOL visits to City facilities/work operations that did not result in orders during the first half of 2019. These visits were initiated as follows:

- Five (5) of these visits were conducted to follow up on the SWMS fatality.
- Eighteen (18) of these visits were in response to critical injuries/incidents (sometimes repeat visits).
- Nineteen (19) of these visits were in response to complaints (sometimes repeat visits). Four (4) of these were in response to workplace harassment complaints. One (1) was initiated as a work refusal.
- Six (6) of these visits (sometimes repeat visits) were in response to reports of occupational illnesses/outbreaks
- One (1) of these visits was a proactive routine inspection under a provincial slips, trips and falls initiative

MOL Initiatives

Industrial Establishments Regulation Amendments

Amendments have been made to Regulation 851 - Industrial Establishments under the Occupational Health and Safety Act (OHSA) to help modernize workplace health and safety

requirements that apply to Ontario industrial establishments, including offices, factories, arenas, and shops.

They will increase flexibility by:

- allowing the use of alternative procedures if worker health and safety is at least as well protected
- allowing workers to wear personal flotation devices instead of lifejackets when appropriate
- allowing the use of antidotes, flushing fluids or washes instead of eyewash fountains or emergency showers, where appropriate, to prevent permanent injury to the eyes or skin

The amended regulation came into effect on July 1, 2019

Amendments to Workplace Hazardous Materials Information System (WHMIS)

In January 2019, the Ontario government amended the WHMIS Regulation (R.R.O. 1990, Regulation 860) under the OHS Act to allow an exception for employers to create workplace labels for WHMIS 1988 products that will continue to be used in the workplace after November 30, 2018. Employers who wish to use WHMIS 1988 products in the workplace can produce a workplace label to be affixed to the products in question, which would replace any WHMIS 1988 label. Employers are also required to produce a WHMIS 2015 compliant safety data sheet (SDS) to replace the WHMIS 1988 material SDS where they are unable to obtain an SDS from the supplier. These amendments to the WHMIS Regulation came into effect on January 21, 2019. Ontario has now completed the transition from WHMIS 1988 to WHMIS 2015.

Occupational Health Regulatory Modernization Amendments

In June 2019, the Ontario government announced amendments to streamline and modernize the occupational health regulatory scheme under the OHS Act. O. Reg. 185/19 amends Regulation 833 (Control of Exposure to Biological or Chemical Agents) to include:

- Definitions relating to respirators and breathing apparatus;
- Compliance requirements for measuring airborne concentrations;
- A requirement that employers provide and workers use respirators in specified circumstances; and
- A new “Respiratory Protection Program”.

Similar amendments are made to O. Reg. 490/09 (Designated Substances).

The amended regulations will come into effect on January 1, 2020.

Upcoming Provincial Health and Safety Inspection Initiatives

During the time period from September 1 to December 27, 2019, the MOL will conduct focused inspection campaigns on musculoskeletal disorders (MSDs) and respiratory hazards. The MSD initiative will focus on hazards that may lead to MSDs during manual materials handling and client handling activities, and helping workplaces to eliminate or control these hazards. During the respiratory hazards initiative, inspectors will focus on work processes

that generate dusts, fumes and vapours and the controls that should be in place to minimize the risk of worker exposures that may result in occupational illness.

Key City Health and Safety Initiatives

Some key health and safety initiatives during the first half of 2019 included:

- Rollout of Psychosocial Risk Assessment Guidelines to assist City divisions in evaluating and improving organizational wellness
- Completion of divisional MSD Annual Reports outlining actions taken to address MSDs in 2018
- Development of new occupational health and safety policies regarding Working at Heights and Naloxone Administration
- Review and amendments to the WHMIS, Respiratory Protection and Emergency Eyewash and Emergency Shower policies in response to legislative amendments
- A joint City/Local 79 Health and Safety Summit addressing mental health-related issues
- Continued joint management and labour review of JHSC Terms of Reference for Multi-Workplace JHSCs in City divisions
- Communication to all JHSC certified members regarding the MOL's new Certification Management System
- Development of a new City JHSC Membership Directory

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SIGNATURE

Omo Akintan
Chief People Officer

ATTACHMENTS

- Appendix A - Workplace Safety and Insurance Board Incidents (January-June) by Division
- Appendix B - Lost Time Injury Frequency (January to June) by Division
- Appendix C - Workplace Safety and Insurance Board Costs for All Firm Numbers (January to June 2015-2019)
- Appendix D - Workplace Safety and Insurance Board Invoiced Costs Less Than \$50,000 (January to June 2015-2019)
- Appendix E - Workplace Safety and Insurance Board Invoiced Costs Greater Than 50,000 (January to June 2015-2019)
- Appendix F - Critical Injuries Reported to the Ministry of Labour, January 1 to June 30, 2019