
HALDIMAND COUNTY

Report HRD-02-2021 Health and Safety Policy and Program
For Consideration by Council in Committee on February 9, 2020



OBJECTIVE:

To inform Council of the County's 2020 health and safety performance, as well as to approve the 2021 Occupational Health and Safety Policy and Program.

RECOMMENDATIONS:

1. THAT HRD-02-2021 Health and Safety Policy and Program Report be received;
2. AND THAT the 2021 Occupational Health and Safety Program be approved as outlined in Report HRD-02-2021;
3. AND THAT Policy No. 2020-01 be rescinded and replaced with the 2021 Occupational Health and Safety Policy, as outlined in Attachment 5 to Report HRD-02-2021.

Prepared by: Katie Meyer, Health and Safety Coordinator

Reviewed by: Megan Jamieson, Director of Human Resources

Respectfully submitted: Cathy Case, General Manager of Corporate & Social Services

Approved: Craig Manley, MCIP, RPP, Chief Administrative Officer

EXECUTIVE SUMMARY:

The overall health and safety performance at Haldimand County continues to be successfully maintained, with changes, as new legislation has been introduced over the past few years. This confirms the County's safety programs are having the desired impact and the importance of continuing to adapt our safety programs as our workforce, hazards and legislation evolve. In 2020, we experienced a unique year managing both our regular safety programs, as well as learning, developing and implementing programs related to the novel coronavirus (COVID-19). Staff adapted to the significant changes in their ways of work and continued to demonstrate ongoing commitment to the health and safety program by applying the principles of health and safety through prompt reporting of incidents, development of protocol and policy, ongoing training and communication efforts, safety discussions, Joint Health and Safety Committees, to name a few elements.

The 2021 Occupational Health and Safety Program continues to enhance our health and safety practices and knowledge, as well as continues to help us manage the COVID-19 pandemic, by incorporating additional mental health strategies to manage stress, anxiety and COVID fatigue.

Throughout 2021 and 2022 Human Resources will undergo a staffing restructure which will allow for more robust health, safety, wellness and training programs for staff. Our goal in 2021 is to begin building this team, review and document our existing programs and look towards enhancements and best practices for the future. The 2021 program also aims to mitigate the number of injuries/illnesses occurring within the County by: ensuring current policies/procedures/guidelines are effective and being enforced; providing support to staff to encourage discussion around mental health; utilizing the Joint

Health and Safety Committee members to enhance health and safety culture; and continuing to train and engage all employees to further improve health and safety performance.

BACKGROUND:

Section 25(2)(j) of the Occupational Health and Safety Act (the Act) requires employers to prepare and review, at least annually, a written Occupational Health and Safety Policy as well as to develop and maintain a health and safety program to implement that policy.

In 2020, Council approved the Occupational Health and Safety Policy contained in Report HRD-01-2020. In the same report, Council was informed that the 2020 health and safety program would continue with the development of health and safety guidelines, as well as the provision of a variety of health and safety-related training, programs and communication initiatives. We recognize 2020 as a year that our plans needed to shift in order to address the COVID-19 pandemic. The current report provides a brief description of the results of those initiatives, including that of COVID-19, as well as some statistics on overall health and safety performance of the various County operations in 2020.

Haldimand County is a Schedule 2 Workplace Safety and Insurance Board (WSIB) employer, meaning that the County self insures the full cost of workplace injuries to our employees. As a result, it is imperative that the County has a strong health and safety program to minimize the risk and cost of workplace injury.

ANALYSIS:

2020 Health and Safety Initiatives Undertaken:

In 2020, the following health and safety initiatives were undertaken:

1. Trained and conducted ergonomic assessments for all staff working out of the new Haldimand County Administration Building (HCAB) to utilize the ergonomic features of the new office equipment and to prevent musculoskeletal disorders within the County (which was previously identified as the #1 injury within Haldimand County).
2. Developed and implemented required safety protocol for the new HCAB such as panic buttons, fire protocols and wellness features.
3. Implemented and managed COVID-19 safety measures including, but not limited to:
 - a. Development and training of the staff and operations assigned to the planned Interim Care Centre at the Dunnville Arena;
 - b. Assessed needs, purchased and trained staff on proper use and handling of Personal Protective Equipment (PPE);
 - c. Led the “Re-opening Committee” in conducting risk assessments on all County facilities and operations and implementing all measures identified. This resulted in the development of several standard operating procedures and safety plans including, but not limited to, vehicle usage, meeting spaces, sanitation and disinfection protocols, screening, which all necessary staff were trained on and continue to be revisited as the pandemic changes;
 - d. Monitored, approved and delivered requests through the Central Stores of items, such as approved disinfectants, masks and face shields, in conjunction with purchasing staff;

- e. Performed ergonomic assessments, as requested, and developed “at home” office resources for employees required to work remotely to comply with stay-at-home orders or self-isolation requirements;
 - f. Provided direction, monitored and managed all confirmed and potential COVID-19 cases within staff;
 - g. Escalated scheduled fit testing for required front-line staff to ensure ongoing access to N95 respirators as supply access and medical recommendations changed;
 - h. Undertook various wellness initiatives to aid in stress, anxiety and disconnect during the pandemic (ex. Corona Chronicles, access to webinars and assistive resources)
4. Continued mental health training to all staff through “The Working Mind Program” with the Mental Health Commission of Canada. This was a trial of offering the program virtually, accompanied by a staff lead debrief and was well received by staff.
 5. A significant number of ergonomic assessments were conducted for both proactive and reactive reasons. In particular, assessments were completed for lifting activities and assessment of equipment (to ensure the safest equipment is purchased) within operations to decrease stress on the back and shoulders.
 6. The County’s ladder safety program was enhanced to audit the program, ultimately resulting in the integration of resources and customization of education to the specific applications being used.

2020 Health and Safety Performance:

a. Statistics Showing Performance

A statistical summary of the County’s 2020 health and safety performance, broken down by Joint Health and Safety Committee (JHSC) employee group, relative to previous years on record, is contained in Attachments 1 to 4.

Attachment 1 provides a record of Lost Time Injury/Illness (where an employee sustained a work-related injury/illness which prevented them from attending work the day following the incident) since 2005. The total number of incidents has decreased from 15 incidents in 2019 to 8 in 2020, as shown in the following table.

JHSC Group	2018	2019	2020
Fire	0	0	0
Paramedic Services	2	5	4
CUPE/Non-Union	3	5	3
Grandview Lodge	5	5	1
Total	10	15	8

It is worth noting that all Paramedic Services lost time incidents occurred in Q3 and Q4 and were related to back strains. Although significant work has been done to mitigate risk of these injuries, such as power stretchers and body mechanics training, in 2020 we found contributing factors to be: additional supplies in equipment bags, making these bags heavier to carry; increased call volume which doesn’t allow for the breaks between calls at times and additional PPE requirements due to COVID-19, which caused restricted movement. The remaining lost time claims were primarily related to slips, trips and falls (ice, hallway, stairs) which will be reviewed further in 2021. Staff worked diligently in all lost time claims to

offer suitable modified duties and to return the injured employees as soon as possible to remain engaged in the workplace.

Attachment 2 shows the total number of Medical Aid Injury/Illness incidents (where an employee sustains a work-related injury, requiring medical attention from a healthcare professional, but is able to immediately return to work on regular or modified duties). The number of incidents is a record low, showing a decrease from 18 in 2019 to 14 in 2020. We recognize several staff were on emergency leave due to the pandemic and minimal students were employed; nonetheless, the data suggests effectiveness of the County health and safety programs, which aid in the reduction of injury severity even with the increase to lost time claims.

Attachment 3 outlines the total number of Reportable Incidents First Aid/Near Miss (an unexpected event that may or may not have caused injury or damage, but did not require medical attention from a healthcare professional). The number of incidents increased from 68 in 2019 to 76 in 2020. Of this experience, 54% of these claims were related to COVID-19 workplace exposures within Paramedic Services. We recognize this to be a concerning number, but after further analysis, note all workplace exposures occurred in March 2020 and were related to the outbreak declared at the private long term care home, Anson Place where paramedics were unknowingly being exposed to confirmed or potential cases of COVID-19.

b. Cause / Type of Accidents

The cause/type of accidents that occurred in 2020 are provided in Attachment 4. It is important to note two specific areas – exposure to COVID-19 and over exertion/strain/sprain, which have significantly contributed to the 2020 plan. Other leading types of incidents include slips, trips and falls and workplace violence.

(I) Exposure

In 2020, we submitted 41 COVID-19 related Workplace Safety Insurance Board (WSIB) claims on behalf of employees. Claims are submitted to the WSIB when a workplace exposure is identified by Public Health, which require the employee to self-isolate and be tested. For more information on non-occupational COVID-19 related cases, see section (f) below: *Novel Coronavirus (COVID-19)*.

(II) Over exertion/strain/sprain

As demonstrated on Attachment 4, “Over exertion/strain/sprain” injuries were the most prevalent reported injury types in 2020. In 2019, staff developed an ergonomic guideline and training program which was launched to CUPE/Non-union staff and has contributed to a reduction in this type of injury. Specifically, training on body mechanics has been a regular part of the training program for first responders and Grandview Lodge staff. In speaking with the supervisors and JHSC’s of these areas, it was felt that due to increased workload and COVID fatigue, staff were more susceptible to these injuries and did not recover as fast. It is noteworthy that, due to the pandemic, access to healthcare (physiotherapy, chiropractor) has been delayed or offered virtually, contributing to delays in recovery. As precautions allow, we will continue to work through the ergonomics program with the Emergency Services and Grandview Lodge JHSC’s to introduce hands-on ergonomic training.

(III) Slips, Trips and Falls

We saw an increase in severe slip, trip and fall injuries with some resulting in concussion, which have a delayed and cautious recovery process. Staff investigated each incident requesting the expertise of staff from outside the division, such as building inspectors and the Ministry of Labour where necessary. Through Ministry of Labour investigations, the County was found to take all reasonable precautions. However, we recognize these injuries are still happening; therefore, we plan to provide additional on-site, task specific training and

provide assistance to staff to ensure they have the expertise and the comfort level required, as well as take the time needed to carry out their jobs safely.

(IV) Workplace Violence

Our Municipal Enforcement Officers saw significant uptake in confrontational calls, primarily related to COVID-19 gatherings in Port Maitland and Hagersville Quarry over the summer months. Staff were exposed to spitting, derogatory comments and actions from members of the public. Staff have been provided with de-escalating violence training, are often deployed in pairs and directed to disengage and call the OPP should they feel threatened. Additional investigation will be carried out in 2021 as to how else we can better equip our Officers to effectively reduce and/or respond to this type of workplace violence.

c. Mental Stress Claims

Bill 163 (implemented in 2016) created a presumption that post-traumatic stress disorder (PTSD) diagnosed in first responders is work related. Previous reports to Council described provincial legislation related to these types of claims. Once a Paramedic or a Firefighter is diagnosed with PTSD by either a Psychiatrist or Psychologist, the employee becomes entitled to WSIB benefits, without the need to prove a causal link between PTSD and a workplace event. In 2019, the County continued to experience its biggest impact with 4 active claims. In 2020, we were able to resolve 3 psychological claims with 2 claims remaining active. We continue to monitor these claims as they arise and have learned that these claims are unpredictable and that the return to work is complex and costly.

In response:

- The County introduced, with endorsement from the Paramedic JHSC, a program to document employees who attend traumatic calls to ensure proper follow up is completed and monitoring can take place. Reports were completed for emergency services calls deemed as potentially traumatic (i.e. infant vital signs absent, fatality in motor vehicle accident, known patient fatality). In these cases, first responders are debriefed on calls and assistance is offered, as appropriate. First responders are then monitored and flagged if repeated exposure reports are completed for the same individuals. In 2020, we saw over 60 traumatic exposure reports submitted and followed up on.
- A new pay code was developed to monitor first responders who are sent home by the Deputy Chief, Paramedic Services or Chief, Emergency Services following a particularly traumatic incident. Typically, with a physical injury, we would require the individual to seek medical attention; however, sending a first responder to the hospital was found to be ineffective, especially at times where we might be sending the first responder to the same facility that they have just delivered an injured patient to. Instead, a debrief is carried out and arrangements made to ensure the first responder has the appropriate support in place when they arrive home. A total of 36 hours have been used by 3 employees resulting in a cost of \$2,331.27. It is important to note, the supportive environment which surrounds this program has been recognized by the WSIB for its efforts in creative and compassionate accommodation.
- A new first responder specific EAP service was trialed for firefighters in 2020 with positive feedback. This continues to be a focus as the County investigates opportunities for improved EAP solutions going forward.

Staff anticipate that incidents related to mental stress generally will continue to rise given focused efforts provincially and locally on awareness. All JHSC's will focus on proactive

measures, where appropriate, and ways to end the stigma of asking for help before it becomes a complex claim.

d. *Lost Time Claims*

Further to Attachment 1, the following table shows the overall lost time hours since 2009. It is evident that the lost time experience has significantly increased over recent years; however, if analyzed, 55% of the combined 2,796 lost time hours are related to psychological injury claims. It is evident that the spike in lost time hours over the past three years is directly linked to the legislative changes related to presumptive liability, mental health regulations and a better acceptance of mental health issues in general. It is also important to note that much of these hours can be attributed primarily to one psychological injury claim which, despite significant work by staff and the individual, experienced a setback in return to work proving the ongoing challenges of returning to work with a psychological injury.

Lost Time Hours by JHSC				
Year	Paramedic Services	Fire	CUPE/Non-Union	Grandview Lodge
2009	2,811	0	1,838.25	Hours not tracked
2010	435.5	0	174	
2011	527.5	30	456.5	
2012	435.5	0	174	
2013	227	0	42.5	
2014	24	160	25	
2015	370.5	0	18.5	
2016	406.5	0	66	
2017	413.5	8	56	
2018	2663.5 (96% PTSD related)	0	1931 (93% PTSD related)	
2019	1793 (84% PTSD related)	0	656.50 (35% PTSD related)	492 (53% mental health related)
2020	516 (80% PTSD related)	0	2184.5 (60% PTSD related)	95.5

Note: hours related to self-isolation for COVID-19 claims are not captured in this table.

e. *Return to Work – Modified Duties*

Under various legislation, including Human Rights, we have the duty to accommodate injured/ill workers to the point of undue hardship. As a result, modified duties are offered to accommodate workplace injury related restrictions and to allow for the employee to return to work, in some capacity, as early as appropriate. In these cases, an injured employee is brought back to work to perform alternate work duties above current complement. If modified duties are not offered and the employee is not able to work, then the number of lost time hours would be much higher. Any loss of earnings by virtue of the employee not being able to work, as a result of a workplace injury, would need to be paid by the employer, in addition to a WSIB administrative fee. Accordingly, offering modified duties encourages a cost-effective, safe and early return to work and allows the employee to remain engaged in the workplace, while also providing for meaningful work during their recovery.

As shown in the table below, the 2020 modified work experience decreased. This is not to say that modified work has not been successful. In fact, this decrease could be a result of promptly engaging

staff in modified work or staff at work programs which have escalated an employee's ability to return to full capacity. The Employee Wellness Representative position, which was introduced in 2019, has allowed for immediate contact with the employee and the ability to customize a return to work program suitable for their needs. This prompt, hands-on approach has held all parties accountable and has proven to be successful not only financially, but in terms of a supportive, positive experience for staff.

Modified Work Hours by JHSC				
Year	Paramedic Services	Fire	Non-Union/CUPE	Grandview
2009	980	1,141	2,193	6,626
2010	252	1,317	1,917	1,624
2011	374	735	48	1,437
2012	160	0	0	994
2013	672	463	28	1,914
2014	36	358	0	3,543
2015	768	0	19.5	1,022
2016	980	0	52	395
2017	234.5	35	11	1161
2018	234	0	68	716
2019	1148.50	0	891 (97% related to 1 PTSD claim)	1146.75
2020	1601	0	236	537.5

f. Novel Coronavirus (COVID-19):

Haldimand County staff, without hesitation and across all service areas, have made significant progress in rethinking and modifying our working methods to reduce the spread of COVID-19. This has created additional workloads and ultimately increased stress and anxiety levels.

In the 2020 calendar year, Haldimand County experienced a total of 8 confirmed cases of COVID-19 amongst staff:

- Grandview Lodge - 3 confirmed cases of COVID-19 with Grandview Lodge staff, 1 contracted staff person and 3 residents of Grandview Lodge. Through investigation, it was determined workplace transmission took place establishing reporting requirements under both the Occupational Health and Safety Act (OHSA) and the Workplace Safety and Insurance Act, 1997 (WSIA). Through the Ministry of Labour investigation, it was found the employer had taken all reasonable precautions and identified the breakroom in lunchroom/breakrooms as workers remove their masks to eat.
- Emergency Services – 2 positive staff cases with inconclusive findings as to whether workplace transmission took place as the employee both travelled to and attended Anson Place long term care home prior to COVID-19 being identified in the home.
- Non-Healthcare - 2 positive staff cases were identified outside of the healthcare sector, including an arena facility and HCAB. Both resulted in no workplace transmission proving the precautions established were effective in stopping the spread.

In 2020, health and safety staff, together with the related supervisor have responded to and managed 274 staff through confirmed or potential exposure to COVID-19, such as: Public Health directed self-isolation requirements; identified close contacts; symptomatic staff whom fail the daily COVID-19 screening tool; etc. Where possible, staff were directed to work remotely during isolation periods. For those who were unable to work remotely, but were required by public health to self-isolate, the County provided a leave of absence with no loss of earnings. For 2020, this equated to a total of 6,899.25 lost hours directly tied to COVID-19 measures, amounting to an estimated cost of \$219,120. These costs are tracked and reported for the purposes of available provincial funding or other grant opportunities and are in addition to other COVID-19 costs such as additional staffing hours, overtime, PPE, materials and special programming.

In order to reduce the spread of COVID-19, the 5 JHSC's increased meeting frequencies (weekly or monthly) to ensure all precautions were being taken and staff had the most up-to-date information. In addition, a Re-opening Committee was developed to carry out detailed risk assessments for work locations to ensure a safe plan was implemented for both staff and public. This plan was continuously updated and the situation evolved.

The pandemic dramatically shifted our ways of work, forcing groups to work remotely, cohort, create redundancy within service, learn new modes of communication and collaboration, and some workers had to transition to new work and processes to address emergent civil services. From a health and safety perspective, these all come with risk, meaning we quickly needed to adapt our training methods and education to meet the needs of staff. For example, an administrative staff member is redeployed to facilities and parks maintenance or as a housekeeper in an interim care centre with little to no experience, or simply working remotely without an established office. Staff utilized unique approaches, and at times virtually let us into their homes to ensure a safe working environment, such as how to setup a home office using items around the house.

Throughout 2021, we will continue to not only look at the immediate safety risks (exposure to COVID-19) and new opportunities, but the psychological impacts the pandemic has created on our staff. As we one day begin to re-open again and precautions are removed, we will have a changed perception on the way we do work, which means revised or new health and safety programs must emerge.

Proposed 2021 Health and Safety Policy and Program:

Section 25(2)(j) of the Occupational Health and Safety Act requires employers to review, at least once annually, a written Occupational Health and Safety Policy as well as to develop a health and safety program to implement that policy.

A copy of the recommended 2021 Occupational Health and Safety Policy is included as Attachment #5. The JHSC Co-chairs, as well as the Senior Management Team, have reviewed the Policy and have recommended no changes to the currently approved 2020 Policy.

The proposed Health and Safety Program has been developed for 2021 in consultation with the JHSC's and those managers whose operations are directly impacted by the proposals. The initiatives focus on reviewing health and safety practices and providing greater education to all staff on mental health and psychological injuries in the workplace and COVID-19 safety and fatigue. Specifically, the following plan has been established:

1. Continue implementing a mental health prevention program using the National Standard of Canada on Psychological Health and Safety in the Workplace, including all staff trained in The Working Mind Program.
2. Re-opening Haldimand County public facilities with both physical and psychological health and safety in the forefront for users and staff.
3. Create and begin formalizing the following new policies, programs and/or guidelines:

- a. Remote Work
 - b. Fit for Duty
 - c. Needle sticks and Sharps
 - d. Noxious weeds
4. Provide health and safety training to groups targeted by the Health and Safety Coordinator, via online training or facilitated by a professional.
 5. Revise workplace inspection templates and launch digital workplace inspections and tracking for future implementation.
 6. Review and revise health and safety policies and programs to reflect the changes within the Corporation and move towards a comprehensive health and safety manual which will include a new virtual training program.
 7. Revise corporate health and safety orientation to address the organizational changes and opportunities to provide a more comprehensive training, particularly for those going into supervisory roles for the first time and/or in an “acting” capacity.
 8. In partnership with Legal and Support Services, implement electronic accident reporting and provide training to all users.
 9. Review Corporate Health and Safety training programs for opportunities to implement annual training days.

FINANCIAL/LEGAL IMPLICATIONS:

The proposed 2021 Occupational Health and Safety Program will not require any additional funds to implement as all anticipated expenditures can be accommodated within the base budget. Should an unexpected issue arise during the year that requires additional funds, a report will be submitted to Council for specific approval.

Approval of this report, specifically as it relates to the 2021 policy and program will meet Haldimand County’s legal obligations under Section 25(2) (j) of the Occupational Health and Safety Act.

STAKEHOLDER IMPACTS:

Health and safety impacts all areas of the Corporation. Time will be required of Managers, Non-Union Supervisors, JHSC representatives and select employees to provide input into the preparation of risk assessments, development of policies/procedures and participation in training and workplace inspections mandated by the County.

REPORT IMPACTS:

Agreement: No

By-law: No

Budget Amendment: No

Policy: Yes

ATTACHMENTS:

1. Total Number of Lost Time Accidents by JHSC from 2006-2020
2. Total Number of No Lost Time Accidents by JHSC from 2006-2020
3. Total Number of Incidents by JHSC from 2006-2020
4. 2020 Injuries by Cause
5. 2021 Proposed Occupational Health and Safety Policy