

---

# HALDIMAND COUNTY

## Report HRD-01-2022 Health and Safety Policy and Program For Consideration by Council in Committee on March 1, 2022

---



### OBJECTIVE:

To inform Council of the County's 2021 health and safety performance, as well as to approve the 2022 Occupational Health and Safety Policy and Program.

### RECOMMENDATIONS:

1. THAT HRD-01-2022 Health and Safety Policy and Program Report be received;
2. AND THAT the 2022 Occupational Health and Safety Program be approved as outlined in Report HRD-01-2022;
3. AND THAT Policy No. 2021-02 be rescinded and replaced with the 2022 Occupational Health and Safety Policy, as outlined in Attachment 5 to Report HRD-01-2022.

**Prepared by:** Katie Meyer, Supervisor, Employee Wellness and Development

**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 2021, we experienced another 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 2022 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 new mental health strategies to manage stress, anxiety and COVID fatigue.

In January 2022, Human Resources underwent its final restructure to the Wellness and Development team. This change will allow for more robust recruitment, health, safety, wellness and training programs for staff. Our goal in 2022 is to begin building this team, review and document our existing programs and establish future goals/objectives to enhance our programs. The 2022 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 2021, Council approved the Occupational Health and Safety Policy contained in Report HRD-02-2021. In the same report, Council was informed that the 2021 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 2021 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 status 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 2021.

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:**

### *2021 Health and Safety Initiatives Undertaken:*

In 2021, the following health and safety initiatives were undertaken:

1. Implemented and managed COVID-19 safety measures including, but not limited to:
  - a. Aided in the staffing, training and safety measures of mass vaccination clinics;
  - b. Assessed changing needs, purchased and trained staff on proper use and handling of Personal Protective Equipment (PPE);
  - c. Developed and revised standard operating procedures based on current situations and public health measures, including but not limited to, travel within Canada, implementing medical masks and eye protection for those who could not physical distance as part of their job, screening and isolation changes. All updates/changes were regularly communicated with staff;
  - 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 provincial restrictions, childcare needs or self-isolation requirements;
  - f. Provided direction, monitored and managed all confirmed and potential COVID-19 cases within staff (over 300 staff isolations were reported and managed in 2021);
  - g. Aide in workplace outbreak case management, including investigating how the virus was contracted (work related for all positive staff), as well as audits from the Ministry of Labour. The County was not issued any orders through any COVID-19 outbreaks based on our safety measures in place.

- h. Escalated scheduled fit testing for required front-line staff to ensure ongoing access to N95 respirators as supply access and medical recommendations changed;
  - i. Three COVID-19 Vaccination Policies were development and implemented across Haldimand County. The COVID-19 Vaccination Team managed all vaccination disclosures, testing requirements, recruitment of only vaccinated staff. The Policy required a significant amount of time for the team to manage test submissions, compliance with the policy, leave of absences and progressive discipline/terminations of those in non-compliance with the policy.
2. Created and launched a non-emergency remote work policy for administrative staff. This policy was created in response to the significant remote working measures put in place to response to the COVID-19 pandemic; however, it is expected that staff will utilize this policy for non-emergency remote work in 2022 forward.
  3. Training on WSIB Case Management and Sick Leave practices was implemented to Grandview Lodge and Paramedic Services staff, for better understanding and to ensure efficiencies in process were being met.

### 2021 Health and Safety Performance:

#### *a. Statistics Showing Performance*

A statistical summary of the County's 2021 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 been maintained from 8 in 2020 to 8 in 2021, as shown in the following table.

<b>JHSC Group</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>
Fire	0	0	0
Paramedic Services	5	4	1
CUPE/Non-Union	5	3	1
Grandview Lodge	5	1	6
<b>Total</b>	<b>15</b>	<b>8</b>	<b>8</b>

The lost time claims were primarily related to slips, trips and falls (ice, cords in resident rooms) and over exertion/strains/sprains from lifts with residents. Although Grandview Lodge has a no lift policy, staff are required to move residents to positions to utilize mechanical aids or when unexpected movements occur (ie. resident falls). Residents are known to be admitted to Grandview Lodge now younger, stronger but with decreased cognitive ability presenting a greater risk to staff. 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). We saw an increase from 14 in 2020 to 26 in 2021. We recognize the record low statistics in 2020 were impacted by the fact that several staff were on emergency leave due to the pandemic and minimal seasonal staff / students were employed. It is important to note, our experience remained average in CUPE/Non-Union/VFF groups, however saw a

significant spike (6 in 2020 to 15 in 2021) at Grandview Lodge. Through analysis of the data staff can identify an increase in staff reporting fatigue, working short and increase in hours due to the COVID-19 pandemic which may have contributed to the cause of incident. Staff recognize after nearly 2 years in healthcare, an increase in injuries is expected due to both physical and mental fatigue.

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 51 in 2020 to 61 in 2021, however remains average in terms of what the data year over year.

#### *b. Cause / Type of Accidents*

The cause/type of accidents that occurred in 2021 are provided in Attachment 4. It is important to note two specific areas –over exertion/strain/sprain and slip, trips and falls, which have significantly contributed to the 2022 plan. Other leading types of incidents fall under the category of ‘workplace violence’ from a third party which is focused on in the 2022 plans as well.

##### **(I) Over exertion/strain/sprain**

As demonstrated on Attachment 4, “Over exertion/strain/sprain” injuries were the most prevalent reported injury types in 2021. This has been the number one injury over the past 10 years. 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 within our CUPE/Non-union staff. Grandview Lodge had an increase in over exertion/strain/sprain injuries in 2021. In analyzing the incidents, it was felt that due to increased workload, staff shortages (isolations/vacancies/single employer rules), extended COVID-19 outbreaks 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 with the Grandview Lodge JHSC’s to address these injuries.

##### **(II) Slips, Trips and Falls**

We continued to see a few slip, trip and fall injuries due to ice, one of which resulted in concussion, which have a delayed and cautious recovery process. Staff investigated each incident and confirmed snow and salting measures are regularly taking place. Staff have been reminded on proper footwear and to exercise caution in the winter months. Additionally, we saw an increase in slip, trip and fall injuries at Grandview Lodge due to cords within residents room. The Grandview Lodge Joint Health and Safety is cognizant of this hazard and focuses on resident rooms when conducting workplace inspections, as well as when working on the floor.

##### **(III) Workplace Violence**

Our Municipal Enforcement Officers saw significant uptake in confrontational calls, primarily related to gatherings in Port Maitland and Hagersville Quarry over the summer months that were reported as violating COVID-19 restrictions. 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. Additionally, we saw a similar trend in Paramedic Services during response to calls in 2021. As part of the 2022, health and safety program, we will be collecting and analyzing data as part of investigation into a pilot project in Ontario surrounding Paramedic Violence. We also experienced increase in negative behaviours from members of the public towards other public-facing staff. Staff attribute some of these increased behaviours to psychological stress on our community as we continued with the COVID-19 pandemic. However, we will continue to investigate preventative measures and training for appropriate response.

### c. 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, a significant portion of the hours are related to psychological injury claims. We also experienced an increase in physical injuries, where a pre-existing psychological condition (non-occupational) hinders the staff members ability to recover for a safe and early return to work. Staff work closely with the WSIB to delineate between compensable and non-compensable injury/illness and challenges in return to work. 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 we have seen a decrease in the number of psychological claims indicating the Post Traumatic Stress Disorder Program, Employee Family Assistance Program (EFAP) and commitment from staff are effective in supporting a psychologically safe workplace.

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
2021	517	0	2624 (70% PTSD related)	129.25

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

### d. 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 may be 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 2021 modified work experience slightly increased. In 2021, staff worked closely with injured employees to return them to a full capacity, however saw employees requiring modified duties for longer periods. Often a psychological component (due to personal reasons or as a result of the injury) hindered their ability to fully return to work. The Employee Wellness Representative, worked closely with these individuals to develop rapport, to open the lines of communication and 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 financially. It has also resulted in some valuable feedback from staff indicating that the process has been a supportive and positive experience for staff. Staff will continue to focus efforts on psychological impacts on injuries/illness in the workplace.

<b>Modified Work Hours by JHSC</b>				
<b>Year</b>	<b>Paramedic Services</b>	<b>Fire</b>	<b>Non-Union/CUPE</b>	<b>Grandview</b>
<b>2009</b>	980	1,141	2,193	6,626
<b>2010</b>	252	1,317	1,917	1,624
<b>2011</b>	374	735	48	1,437
<b>2012</b>	160	0	0	994
<b>2013</b>	672	463	28	1,914
<b>2014</b>	36	358	0	3,543
<b>2015</b>	768	0	19.5	1,022
<b>2016</b>	980	0	52	395
<b>2017</b>	234.5	35	11	1161
<b>2018</b>	234	0	68	716
<b>2019</b>	1148.50	0	891 (97% related to 1 PTSD claim)	1146.75
<b>2020</b>	1601	0	236	537.5
<b>2021</b>	1898	0	118	630

*e. Novel Coronavirus (COVID-19):*

Haldimand County staff, without hesitation and across all service areas, have made significant effort and saw progress in rethinking and modifying our working methods to reduce the spread of COVID-19. This has however, created change, additional workload and ultimately increased stress and anxiety levels for employees, including health and safety representatives.

In the 2021 calendar year, Haldimand County experienced a total of 48 confirmed cases of COVID-19 amongst staff. Of the 48 confirmed cases, 1 occurrence was found to be workplace transmission. This is a notably low number in light of what we have seen as Provincial and Regional statistics; this demonstrates that the measures in place were effective. In addition, health and safety staff, together with the related supervisor have responded to and managed over 300 staff isolations due to confirmed or potential exposure to COVID-19. These could include Public Health directed self-isolation requirements; identified close contacts; symptomatic staff whom fail the daily COVID-19 screening tool and/or positive case. 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 until October 2021. For 2021, this equated to a

total of 4,625.25 lost hours directly tied to COVID-19 measures, at an estimated cost to the County of \$124,247.27. 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. Staff also monitored staffing levels and implemented “test to work” protocols when areas met critical staff levels such as Paramedic Services and Grandview Lodge. After October 2021, staff worked with those required to self-isolate to determine which financial benefit they qualified for (Working Income Protection Benefit, Infectious Disease Emergency Leave or Canada Recovery Benefit.). All benefits required health and safety staff to submit applications on behalf of the employee to ensure they qualified for payment.

In 2021, Haldimand County introduced three COVID-19 Vaccination Policy; two requiring the vaccine as mandatory (Grandview Lodge and Paramedic Services) and one requiring mandatory disclosure of vaccine status (all other groups). The policies required all staff, students and Haldimand County Representatives (volunteers, Board Members, Council etc.) to disclose their vaccination status. To date, 5% of Haldimand County staff, students and volunteers remain unvaccinated. All eligible unvaccinated staff undergo regular testing as per the Haldimand County Rapid Antigen Testing Standard Operating Procedure. Additionally, a COVID-19 Vaccination Team was established to manage the disclosures, testing, questions and isolations through the Delta Variant and when Omicron spiked.

The health and safety team carried out detailed risk assessments for work locations to ensure a safe plan was implemented for both staff and public. This plan was continuously updated as the situation evolved. In order to ensure the effectiveness of the measures and reduce the spread of COVID-19, the 5 JHSC's increased meeting frequencies, as needed and in some situations moved to weekly meetings to ensure all precautions were being taken and staff had the most up-to-date information.

The pandemic dramatically shifted our ways of work, forcing groups to work remotely, cohort, onboard new staff virtually and more. 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. 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. We saw staff asking for wellness programs and ways to engage with one another as positive mental health was becoming a challenge for staff. The health and safety team lead the Wellness Committee to virtual initiatives or on-site events when safe to do so.

Throughout 2022, 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 begin to re-open in a much greater capacity 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 2022 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 2022 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 2021 Policy.

The proposed Health and Safety Program has been developed for 2022 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 to monitor COVID-19 measures and return to the physical workplace with eased restrictions and capacity limits.
2. Develop and deliver a comprehensive leadership training program for those in supervisory roles including training and information on:
  - Health and safety training
  - Stay at work programs
3. Revise the Working at Heights program, including comprehensive inspection program and new tool development required to aid staff in inspection and for record purposes.
4. Provide health and safety training to targeted groups via online training or facilitated by a professional. A great focus of this years plan will be on “catching up” on training delayed or deferred as a result of COVID-19 restrictions.
5. Begin to review and modernize health and safety policies and programs and move towards a comprehensive health and safety manual which will aid in the new training program and ongoing resource support.
6. Revise corporate health and safety orientation, such as Grandview Lodge participating corporately, and align with improvements taking place within the general corporate orientation / introduction to Haldimand County workplace culture.
7. In conjunction with the Corporate Business Application Strategy (BAS) project, investigate into electronic accident reporting, including workflows to managers and disability management opportunities, including provide training to all users as necessary.
8. Review the time commitments and requirements of participating in the WSIB Excellence Program. This program is an opportunity to audit our workplace health and safety programs, connect with professionals on best practices and improve workplace culture. The program helps businesses create goals and objectives to create a healthier and safer workplace, and is an opportunity to review our programs and receive recognition for health and safety achievements. Staff recognize the importance of this program and will make steps to investigate whether it can be accomplished within the 2022 work plan, or if it should be recommended as a future priority.
9. Workplace Violence Risk Assessments reviewed and/or completed for targeted Haldimand County workplaces
10. In collaboration with Paramedic Services, investigate into a pilot program focused around workplace violence against paramedics. This is a program focused on collecting statistics and analyzing data related to violence towards medics when attending calls (patients, families). Upon collection of the data and completion of the analysis, we will work towards a program to further protect paramedics against violence on the job.
11. Begin developing an emergency protocols manual including information such as, but not limited to fire safety, safety, lockdown, shelter in place and extreme weather event (tornado). It is anticipated that this initiative will span over the next few years and will be accomplished in priority order.

## **FINANCIAL/LEGAL IMPLICATIONS:**

The proposed 2022 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 2022 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 2008-2021
2. Total Number of No Lost Time Accidents by JHSC from 2008-2021
3. Total Number of Incidents by JHSC from 2008-2021
4. 2021 Injuries by Cause
5. 2022 Proposed Occupational Health and Safety Policy