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# HALDIMAND COUNTY

## Report CS-HR-01-2018 Health and Safety Policy and Program - 2018

For Consideration by Council in Committee on February 6, 2018

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### OBJECTIVE:

To inform Council of the County's 2017 health and safety performance, as well as to approve the 2018 Occupational Health and Safety Policy and Program.

### RECOMMENDATIONS:

1. THAT Report CS-HR-01-2018 Health and Safety Program - 2018 be received;
2. AND THAT the 2018 Occupational Health and Safety Program be approved as outlined in Report CS-HR-01-2018;
3. AND THAT Policy No. 2017-01 be rescinded and replaced with the 2018 Occupational Health and Safety Policy as outlined in Attachment 5 to Report CS-HR-01-2018.

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**Reviewed by:** Megan Jamieson, Manager of Human Resources

**Respectfully submitted:** Karen General, CPA, CGA, General Manager of Corporate Services

**Approved:** Donald G. Boyle, Chief Administrative Officer

### EXECUTIVE SUMMARY:

The overall safety performance at Haldimand County has significantly improved since 2005 and continues to be maintained, with slight changes as new legislation has been introduced over the past few years. This improvement confirms that the County's safety programs are having the desired impact and the importance of continuing to adapt our safety programs as our workforce changes. In 2017, staff demonstrated ongoing commitment to the program by applying the principles of health and safety through prompt reporting of incidents, ongoing training efforts, safety discussions, joint health and safety committees, to name a few elements of the program.

The 2018 Occupational Health and Safety Program focuses primarily on ongoing physical and mental health strategies, with the goal of reducing occupational illness claims, including those claims related to emergency service workers' presumptive legislation and the newly legislated chronic mental stress legislation that is in force as of January 1, 2018 and which covers all county employees.

The 2018 program also aims to mitigate the number of injuries/illnesses occurring in the County by: ensuring current policies/procedures/guidelines are effective and being enforced; 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 2017, Council approved the Occupational Health and Safety Policy in Report CS-HR-01-2017. In the same report, Council was informed that the 2017 health and safety program would continue with the development of health and safety policies and procedures, as well as the provision of a variety of health and safety related training, programs and communication initiatives. The current report provides a brief description of the results of those initiatives, as well as some statistics on overall health and safety performance of various County operations in 2017.

Haldimand County is a Schedule 2 Workplace Safety and Insurance Board (WSIB) employer, meaning that the County itself 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 injuries.

## **ANALYSIS:**

### **2017 Health and Safety Initiatives**

In 2017, the following health and safety initiatives were undertaken:

1. Successfully completed a Post-traumatic Stress Disorder Prevention Plan with submission to the Ministry of Labour, as required, as well as an internal process for managing future claims.
2. Development and deployment of employee packages in the event of an incident/accident requiring medical attention. This streamlines the process for efficiency and consistency across all departments.
3. In conjunction with approved hearing loss prevention program:
  - a. Completed noise testing at all County locations and tested all material that emits ambient noise to raise awareness and promote the importance of utilizing proper equipment, procedures and PPE.
  - b. Completed audiometric testing for new hires in identified positions (work above 85 dBA).
4. 2017 training plan was successfully executed.
5. Estimated value of future benefits/WSIB reserve fund initial planning.
6. Review of the Accident Review Committee mandate including opportunity for administrative efficiencies and analysis.
7. Finalized plans under the 2016 Working Alone guidelines, where required.
8. Continued enhanced "Take Your Kids to Work Day" model from 2016 initiatives with success.
9. Ongoing compliance in respirator fit testing for identified positions.
10. Ergonomic assessments continue to be conducted both in reaction to accident/incident or proactively where risk is demonstrated. This year assessments completed for office personnel, gardening tasks and laundry workers. Developed ergonomic assessment process to formulate a steady approach to ergonomic equipment and follow up procedures.
11. Grandview Lodge held a safety day with a focus on bullying and respect in the workplace.
12. Grandview near miss forms used to track resident behaviour and provide safety suggestions for approaching and dealing with difficult residents.
13. Completed the roll-out of physician awareness and early check-up forms for firefighters as well as education on EAP resources (brochures, posters, etc.).

14. Safety Talks were delivered by Managers and Supervisor to specific employee groups to increase awareness regarding the following topics:
- Hearing protection
  - What is the Workplace Safety and Insurance Board?
  - Cold Stress
  - Accident/Injury Reporting
  - Updated hearing protection
  - Proper Footwear
  - Winter Driving
  - Ongoing WSIB communication and case management and monitoring of difficult cases.

### 2017 Health and Safety Performance

#### *a. Statistics Showing Performance*

A statistical summary of the County's 2017 health and safety performance, broken down by Joint Health and Safety Committee (JHSC) employee group, relative to previous years on record, is contained in the Attachments 1 to 4.

Attachment 1 provides a record of Lost Time Injury/Illness by JHSC since 2005. The total number of incidents (where an employee sustained a work-related injury/illness which prevented them from attending work the day following the incident) increased from 8 in 2016 to 10 in 2017, as shown in the following table:

<b>JHSC Group</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Fire	0	0	2
Emergency Medical Services	4	5	2
CUPE/Non-Union	0	2	4
Grandview Lodge	2	1	2
<b>Total</b>	<b>6</b>	<b>8</b>	<b>10</b>

It is worth noting that a number of these lost time incidents are for only one day and due to timing of reporting/submitting appropriate paperwork for return to work. This issue has been addressed in 2017 with the introduction of return to work packages for all County employees, streamlining the process for efficiency and consistency across departments.

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). While the number of such incidents has increased by 8 from 2016, it is important to note that the types of incidents have not been caused by safety negligence but rather by human error. Of particular note, there was an increase seen in relation to paramedics and firefighters being affected by traumatic instances seen in their line of work. They do have a comprehensive post traumatic stress debriefing program in place and seeking assistance with their symptoms through EAP is encouraged and followed up on. There was also an increase in CUPE/Non-Union medical aids in relation to the summer students. This is due to an increased awareness of reporting requirements (ongoing efforts in 2016 and 2017) and frankly, some incidents are as a result of not observing and being aware of their environments, which is in line with new and young worker statistics across the country.

Attachment 3 outlines that 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 2016 but is still lower than in previous

years. Many of these events are near misses, which demonstrates that employees are becoming more aware of their need to report, and can lead to correcting hazards before a real accident can happen, which is encouraged as part of the program.

Overall incident rates (combination of all three attachments) therefore has increased from 2016 but is our fourth lowest incident year since 2005.

The cause of accidents that occurred in 2017 is provided in Attachment 4, with “struck by” and “overexertion” being the most prevalent reported injury types. Within these types “struck by” incidents generally involve actions by residents against workers at Grandview Lodge or have been a result of employees not observing their surroundings (ex. Hitting head off an AED box, stubbing toes in parking lots, etc.). The most prevalent type of overexertion has been back strains. Other leading types of incidents include slip and falls, exposure to medical/fire scene and cut/laceration.

Further work will be conducted in 2018 designed to aid employees to better understand what is expected of them to avoid these types of incidents. The greatest areas that experienced these types of claims changed to Grandview, closely followed by the CUPE/Non-Union group. Grandview takes action to ensure that mechanical lifts and other lifting plans are in place for each resident. Most of the issues with strains during 2017 pertained to unpredictable patient actions. The Grandview JHSC has been working diligently to address near miss reporting (which is utilized very frequently) to discover behaviour patterns in certain residents and are developing a safety plan for each individual in an effort to reduce the number of employees being injured by residents.

Work has been done this year to raise awareness as to the importance of reporting incidents and illnesses, including a safety talk as well as the creation of the return to work packages for employees that provide more clarity on the a subject matter that can be confusing.

With the implementation of the return to work folders, employees are now providing their physician with a letter from the County stating that a safe and early return to work program is in place. Staff anticipate this increased communication will improve the accuracy and timeliness of information received from physicians, ensuring the parties are working together effectively which should help with an early and safe return to work and assist in reducing lost time injuries. In the past, the delay in receiving relevant information from physicians regarding worker restrictions has allowed for lost-time injuries. The folders are ensuring that employees are aware of the information required to accommodate them at work.

Staff have seen an increase in incidents relating to mental health crises in paramedics and firefighters, as well as one instance at Grandview Lodge, arising from traumatic instances. The number of instances related to mental health is expected to rise given new Chronic Mental Stress legislation (see further 2018 plans for more details).

#### *b. Return to Work Accommodations*

Further to Attachment 1, the following table shows the overall reduction in lost time hours since 2010 indicating that even when lost time incidents occur, our return to work practices are continuing to be effective in terms of having employees return to work more quickly. An increase in lost time hours has been seen in EMS and Fire as a result of claims related to the new presumptive post-traumatic stress disorder (PTSD) legislation. This is an area where continuous monitoring of claims and additional legal counsel has proven to be necessary as these cases are complex and return to work is often delayed due to the sensitivity of the issues. Enhancing our abilities to cope with these cases will continue to be a focus in 2018.

The CUPE/Non-Union group has experienced a decrease in lost time hours due to there being no severe incidents this year and also due to the promptness of return to work processing.

<b>Lost Time Hours by JHSC</b>				
	<b>EMS</b>	<b>Fire</b>	<b>CUPE/Non-Union</b>	<b>Total</b>
2010	435.5	0	174.0	609.5
2011	527.5	30	456.5	1014.0
2012	435.5	0	174.0	609.5
2013	227.0	0	42.5	269.5
2014	24.0	160	25.0	209.0
2015	370.5	0	18.5	389.0
2016	406.5	0	63.0	469.0
2017	413.5	8	56.0	477.5

Although statistics are not available at this time, it is expected that lost time hours at GVL have generally decreased over the years as due to a focus on early and safe return to work as well as return to work accommodations where suitable.

#### *c. Modified Duties*

Modified duties are often approved to accommodate workplace injury related restrictions, in order that employees can return to work as early as appropriate. In these cases, an injured employee is brought back into work to perform alternate work duties while their regular position is being backfilled. If modified duties are not offered, and the employee is not able to work and the number of lost time hours would be much higher. Additionally 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, plus a WSIB administrative fee. Accordingly, offering modified duties encourages a safe and early return to work, while also providing the employee with meaningful work during their recovery. In 2017, 11 employees worked a total of 1427 hours on a modified duty basis, at a total cost of approximately \$34,651 plus benefits. As shown in the table below, the 2017 modified work experience represented an improvement in lost time hours and most significantly an improvement in wage costs with a \$12,700 cost savings in 2017. Staff anticipate that 2018 may see an increase in modified work costs due to cases related to the new PTSD presumptive legislation, which may have a large impact on these hours.

It is noteworthy that the hours worked on a modified basis following an injury, varies by employee and can be categorized by Division. Grandview Lodge contains the largest number of modified hours this year, up from last year, but still a big improvement from 2005. They continue to experience the greatest numbers in modified work, likely due to the highly regulated tasks (ex. Lifting restrictions necessary for their roles) and 24/7 operational requirements, as well as their comprehensive return to work programs in place.

<b>Modified Work</b>			
	<b># of Employees</b>	<b>Hours</b>	<b>Approx. cost (Wages only)</b>
2009	24	10,938	\$237,420
2010	13	5,165	\$129,240
2011	13	2594	70,510
2012	16	1154	\$27,170
2013	19	3034	\$78,410
2014	21	4097	\$97,110
2015	15	1809	\$50,430
2016	7	1427	\$47,360
2017	11	1407	\$34,651

### Other highlights of the 2017 Health and Safety Program

#### *Continued impact of Bill 163, Supporting Ontario's First Responders Act for Post-Traumatic Stress Disorder*

On April 5<sup>th</sup> 2016, Ontario passed legislation that created a presumption that post-traumatic stress disorder (PTSD) diagnosed in first responders is work-related. 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 2017, the County saw some significant impacts of this legislation and continues to monitor claims as they arise, and have learned that these claims are unpredictable and that the return to work process is quite slow moving due to complexity of issues.

### **Proposed 2018 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 2018 Occupational Health and Safety Policy is included as Attachment 5. The JHSC Co-chairs have reviewed the Policy and recommend only housekeeping changes over the currently approved 2017 Policy.

The proposed Health and Safety Program has been developed for 2018 in consultation with each of the JHSCs and those managers whose operations are directly impacted by the proposals. The initiatives focus on documenting health and safety practices, responding to changing legislation and promoting health practices to prevent injury or reduce time to recover from injury:

1. Continue improvements on processes for managing workers compensation claims, with the goal of developing a Policy/Procedure in future years.
2. Continue review of funding strategy to manage costs associated with Schedule 2 (self-funded) WSIB program and to create better awareness for staff.
3. Continue to research and implement a prevention program to address presumptive disability in firefighters as follows:
  - a. Secure current and future records of attendance at fires
  - b. Develop and implement "medical history declaration form"
  - c. Investigate Norfolk "fit for duty"/alternative promo
  - d. Promotional strategy re: presumptive disabilities
  - e. Promotional strategy re: physician awareness and early checkup
  - f. Promotional strategy re: Haldimand as Schedule 2 employer
  - g. Review other special measures
4. Create a formalized process for equipment requests.
5. Continue to conduct personalized ergonomic assessments for:
  - a. employees returning to work following musculoskeletal injuries
  - b. as requested due to issues experienced
  - c. Other guidelines that will be outlined in proposed ergonomic program
6. Provide the following health and safety training to targeted groups by the Health and Safety Coordinator, via online training or facilitated professional:
  - a. Safety Orientation
  - b. AODA
  - c. WHMIS

- d. Respect in the Workplace
  - e. Confined Space Awareness
  - f. First Aid (Full and Re-certification training)
7. Focus on preventing and closely following any claims of chronic mental stress to ensure the impacts are kept manageable. Note: new legislation in place as of January 1, 2018, which will be presented to Council under separate report.
  8. Continuous policy manual review, with amendments as required
  9. Further implementation of designated PTSD program, including:
    - a. Promotional Strategy: presumptive disabilities
    - b. Pre-hire medical testing
    - c. Education re: brochures, EAP information
  10. Development of a Corporate needle-stick policy
  11. Continue to work with Ministry of Labour to finalize updated JHSC Terms of Reference for CUPE/Non-Union, EMS, Fire, Grandview
  12. Initiate a Health and Safety training package for supervisors (outline duties and education required for safety responsibilities)
  13. Provide regular Safety Talks, Safety Bulletins and other awareness strategies to proactively address or respond to known risks/hazards in the workplace
  14. Update to policies, as needed, to remain compliant with new or changing legislation

## **FINANCIAL/LEGAL IMPLICATIONS:**

The proposed 2018 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 2018 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 to the preparation of risk assessments, development of policies/procedures and to participate 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 2005-2017
2. Total Number of No Lost Time Accidents by JHSC from 2004-2017
3. Total Number of Incidents by JHSC from 2004-2017
4. 2017 Injuries by cause
5. 2017 Proposed Occupational Health and Safety Policy