

Corporate Report

REPORT NUMBER 125-2025-City Manager's Office-Human Resources

DATE

PREPARED

March 31, 2025

FILE

MEETING DATE April 28, 2025

SUBJECT 2024 Annual Safety Review Report

RECOMMENDATION

For information only.

EXECUTIVE SUMMARY

Council has directed Administration to report annually on the corporation's safety performance and initiatives. This report provides an overview of corporate injury statistics, safety programming and claim cost information for 2024.

While the total of all reported incidents increased by 2.1% in 2024, lost time incidents decreased by 7%. Over-exertion and mental stress continue to be the leading causes of injury. Mental stress injuries, primarily impacting paramedics, accounted for over 21% of all reported injuries. Across the corporation, Workplace Safety and Insurance Board (WSIB) claims decreased by 16.5% compared to 2023.

Incidents of workplace violence resulting in an injury or near miss continue to be assessed for specific corrective actions to protect employees. In 2024 de-escalation training was provided to many frontline staff. The Employee Safety Task Force (ESTF), established in 2023, aims to improve safety through prevention and support from increasing levels of violence, moral injury, and vicarious trauma. Along with de-escalation training, increases in provincial funding for social support resources, an upcoming media campaign, and dedicated social support at City Hall are all action items intended to meet the goals of the ESTF.

The Ministry of Labour, Immigration, Training, and Skills Development (MLITSD) conducted 29 site visits in 2024, issuing orders related to PPE, safety equipment, and employee education. Each order was resolved within the specified time frame. Six critical injuries were reported in 2024, resulting mainly from slip and fall incidents.

The Safety Management System (SMS) will be fully implemented by the end of 2025. The City of Thunder Bay's SMS is guided by the ISO 45001 standard, with the objective of driving continuous improvement through the identification and control of safety hazards. In 2024, significant progress was made through audits and gap analyses of the various SMS elements, with 43 internal audits conducted across the organization.

Multiple legislative changes were introduced in 2024, including the recognition of telework under the Occupational Health and Safety Act (OHSA), updates on electronic access to health and safety documents, and the recognition of workplace harassment that occurs virtually. Further amendments also expanded coverage for firefighters and fire investigators diagnosed with certain types of cancer under the Workplace Safety & Insurance Act.

DISCUSSION

The Safety & Wellness Section is mandated to establish a safety program, act as a resource, and provide oversight of the safety program for all City of Thunder Bay (CTB) departments, excluding the Thunder Bay Police Service, affiliated boards and commissions.

Safety Management System (SMS) Implementation

The SMS is a structured approach to identify and address safety hazards and associated risks to protect staff and the corporation. The SMS is a plan-do-check-act system of identifying hazards, implementing controls, assessing effectiveness (auditing), and correcting deficiencies.

Full implementation of the SMS Manual, guided by the ISO 45001 standard, will be completed by the end of 2025. The implementation process has involved conducting both audits and gap analysis simultaneously each year for the purpose of assessing the level of corporate compliance to the SMS Manual.

In 2024, forty-three internal audits were conducted across the corporation on elements 2 – Legal and Other Requirements, 4 – Hazard Analysis, and 10 – Performance Measuring and Monitoring. Simultaneously, gap analyses were conducted for elements 8 – Health and Safety Document Control and 12 – Management of Change.

Legislative and Standards Update

In 2024, Working for Workers Act Four, Five, and Six were introduced and included changes to the Occupational Health and Safety Act (OHSA) and the Workplace Safety and Insurance Act. Changes to the OHSA that impact the CTB include an amendment that now recognizes telework. Work conducted in private homes is now covered under the OHSA, ensuring workers are protected regardless of their location. However, the "industrial establishment" definition has been amended to exclude home offices,

providing clarity on workplaces to which, Regulation 851 (Industrial Establishments) applies.

Further amendments allow electronic copies of health and safety documentation in a readily accessible electronic format for the following documents: joint health and safety committee (JHSC) names and work locations, a copy of the OHSA, and the workplace's health and safety policy. It also permits JHSC members to participate in meetings virtually bringing the Act in line with modern workplaces and technology.

The definition of "workplace harassment" in the OHSA has been expanded to include virtual harassment conducted through information and communication technologies. Similarly, "workplace sexual harassment" now includes harassment or advances made through virtual communication.

The Workplace Safety and Insurance Act has also been updated to include presumptive coverage for primary site skin cancers, primary site kidney cancers and primary site colorectal cancers for fire fighters and fire investigators provided they have had at least 10 years of service before being diagnosed.

Ministry of Labour Immigration, Training and Skills Development

The Ministry of Labour Immigration, Training and Skills Development (MLITSD) attended CTB worksites on 28 occasions in 2024, as outlined in Table 1.

Table 1: Number of MLITSD Site Visits Completed and Orders Received per Year

Year	2020	2021	2022	2023	2024
Total Visits	33	15	47	41	28
Visits with Orders Issued	5	4	10	8	8
Number of Orders Issued	8	13	17	14	17

Of the 28 MLITSD visits conducted in 2024:

- 13 were proactive compliance audits by inspectors to various worksites.
- 7 visits were follow-ups to reported critical incidents.
- 4 visits were in response to the reporting of occupational illnesses: NIHL and COVID outbreaks in long term care.
- 2 visits were in response to a complaint and a work refusal.
- 2 visits were follow-ups.

All orders have been complied with and can be summarized as follows:

- 2 orders related to PPE including failure to wear head and eye protection,
- 4 orders related to maintenance and accessibility of eye wash stations/bottles,
- 2 orders to educate employees on work refusal process, and the process for submitting maintenance requests,
- 2 orders to review measures and procedures related to spills and ladder usage,

- 2 orders related to lack of warning signs for fall hazards and lack of safeguards from traffic for workers,
- 1 order to provide documentation for ammonia and CO detectors
- 1 order to provide a safety data sheet,
- 1 order to provide the respiratory protection program,
- 1 order to maintain equipment in good condition, and
- 1 order to have a lifting device inspected.

Critical Injuries/Serious or Major Incidents

Critical injuries are defined as follows under Ontario Regulation 420/21 of the Occupational Health and Safety Act:

“critically injured” means 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 a toe,
- e) involves the amputation of a leg, arm, hand or foot but not a finger or a toe,
- f) consists of burns to a major portion of the body, or
- g) causes the loss of sight in an eye.

Critical injuries and serious or major incidents, defined in the OHSA, require extensive investigation, must be reported to the MLITSD and may include incidents involving a non-worker where it can be reasonably determined that there is a connection between the hazard and the risk to workers.

A summary of reported critical injuries annually over the last five years is provided in Table 2.

Table 2: Number of Critical Injuries per Year

Year	# of Critical Injuries
2020	4
2021	2
2022	2
2023	6
2024	6

In 2024, six critical injuries resulting in fractures were reported to the MLITSD. Four of these were slip and fall incidents that occurred on a: wet pool deck; recently mopped floor; outdoor ramp; and an uncovered sump pit during an emergency response event. The remaining two injuries were caused by contact with other surfaces. The first one was a spinal fracture from striking the roof of the vehicle when the vehicle entered an unmarked ditch during a snowstorm, and the other occurred during rink flooding operations when an employee lost their grip on a hose and struck their hand.

Workplace Incidents

Incidents that require health care or result in lost time are required to be reported to the Workplace Safety and Insurance Board (WSIB). Reporting of all incidents, including first aid and hazards/near misses is encouraged to identify trends and capture accurate data for prevention efforts. The incident reports are shared with management and JHSCs to assist in hazard identification and focus Safety & Wellness efforts.

Workplace Incidents by Classification

Incidents are classified in four categories:

- Hazards - incidents where the situation or environment has the potential to cause injury (i.e. an employee slipped but caught themselves before falling). Hazards are also known as “near misses”.
- First Aid - incidents where an employee is injured but does not require formal medical aid from a health care practitioner. This could include a cut that is bandaged in the workplace, or a first responder who seeks peer support following a challenging call.
- Health Care - incidents where an employee requires medical aid from a health care practitioner (i.e. employee goes to hospital to evaluate strained knee). Health care incidents are reportable to WSIB.
- Lost Time - incidents where an employee is injured and is required to be off work beyond the date of injury to recover. These injuries can range from muscle strains to mental stress. Lost time incidents are reportable to the WSIB.

A comparison of the total number of incidents based on classification over the last five years is summarized in Figure 1.

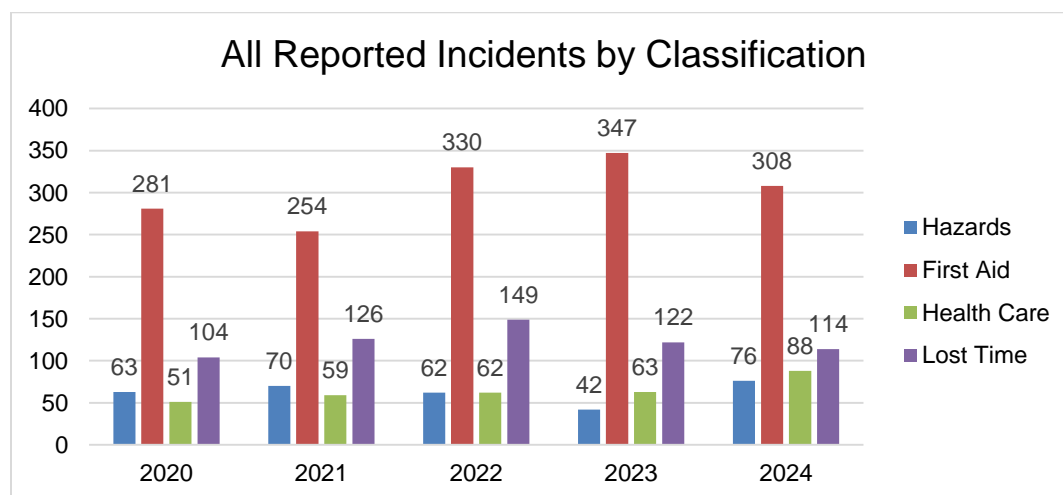


Figure 1: Total Incidents by Classification per Year

Note (1): The above incidents do not include Recurrent Claims, Police or Outside Boards claims.

Note (2): Numbers may fluctuate year over year based on WSIB activity such as claim approvals, denials, or appeals.

The overall number of reported incidents in 2024 increased by 2.1% from 574 incidents to 586. However, the number of Lost Time claims decreased by 7% from 2023.

Workplace Incidents by Type of Injury

Over Exertion and Strain (OES) Injuries – 112 OES injuries were reported in 2024, comprising 19.2% of all injuries. These injuries are often caused by unpredictable lifts and transfers of long-term care residents and emergency services patients. In other physically repetitive jobs, like waste collection and transit, employees commonly suffer from back and shoulder injuries. To improve operational practices and provide a practical learning experience, the CTB and Lakehead University Kinesiology program partnered in the fall of 2024 to develop a best practice guide for the operational areas with the highest reported OES injuries. The areas that participated include, Superior North Emergency Medical Services (SNEMS), Parks, Transit, and Forestry/Horticulture. Deliverables for this project are expected by May 2025.

Struck or Contact by Injuries – 95 struck or contact by injuries were reported in 2024, comprising 16.2% of all injuries. These injuries most often happen when an employee is struck by a patient or long-term care resident, with the highest reports coming from EMS, and Pioneer Ridge. Prevention efforts concentrate on training staff to recognize early signs of negative behaviors and to better manage them. However, situations can change rapidly, and residents or clients may act unpredictably. In EMS, the level of impairment is a key factor in many injuries, and training in defensive tactics is offered to help prevent these incidents. At Pioneer Ridge, gentle persuasive approach and emotion-based care (butterfly approach) training is offered.

Mental Stress Injuries – 125 mental stress injuries were reported in 2024, comprising 21.4% of all injuries. Most of the mental stress injuries reported were experienced by paramedics (76%). Prevention efforts are focused on improving access to mental health supports including peer support, debriefing after difficult calls, mental health counselling, and improving working conditions to bolster employee resiliency. Notably, mental stress injuries for Thunder Bay Fire Rescue (TBFR) decreased to zero for 2024.

Figure 2 below summarizes the number of incidents by type over the past three years.

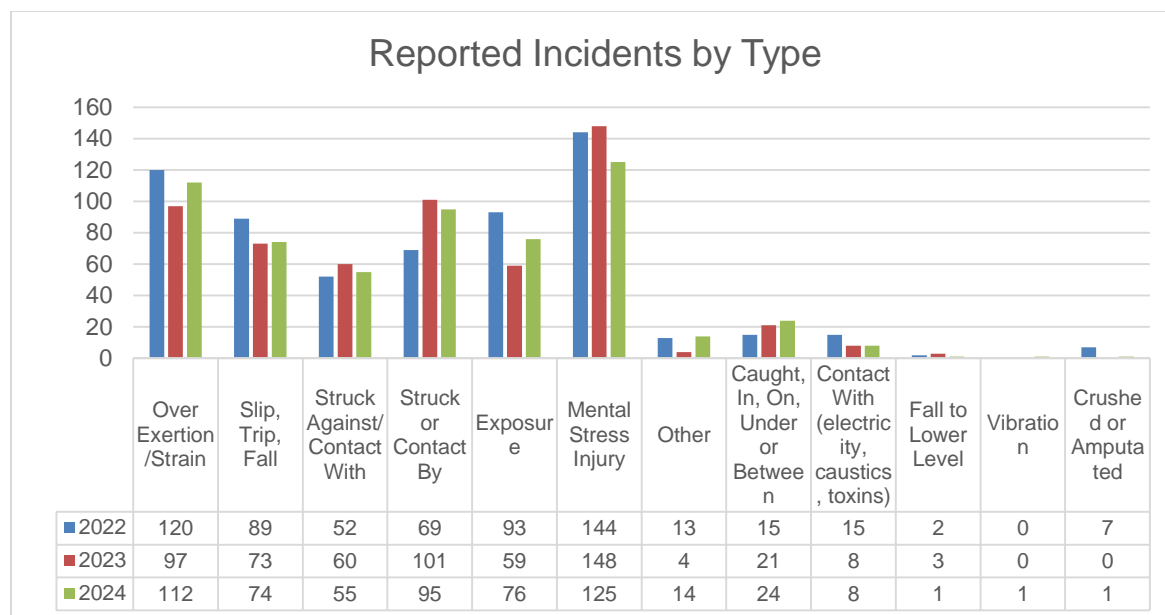


Figure 2: Incident Totals by Type and Year

Note: Incidents classified as "Other" are either incidents where there is not a direct workplace cause that could be identified by the Supervisor, or where the events are unusual and cannot be slotted within the standardized categories.

Workplace Safety and Insurance Board (WSIB)

WSIB benefits are payable to any employee who is deemed to have incurred a workplace injury or illness as determined by WSIB. The CTB is a Schedule 2 employer, meaning that we are billed and pay actual benefit costs plus an administration fee. WSIB maintains full authority over the claims entitlement process.

From 2023 to 2024 there was a 16.5% reduction in overall claims resulting in lower WSIB compensation costs compared to 2023.

Figure 3 below summarizes the total WSIB Claim Costs over the last five years, and the departments where the costs originate.

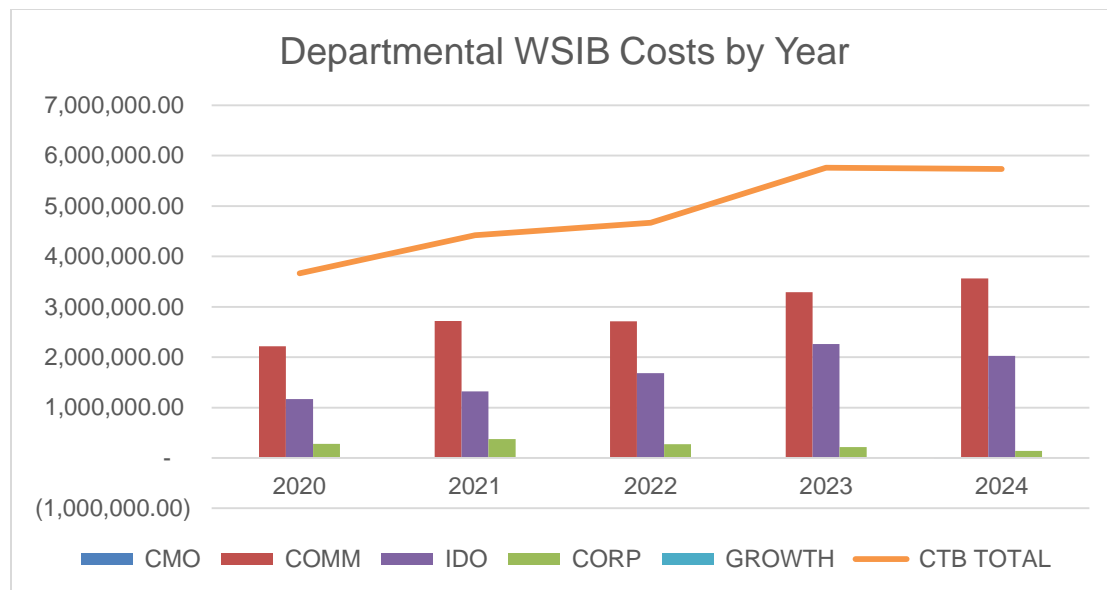


Figure 3: The total cost of approved WSIB claims per year by Department.

Thunder Bay Fire Rescue (TBFR), in the Infrastructure & Operations department, is the only work area that has claims for presumptive occupational cancers. A portion of WSIB costs from this department are related to legacy illness claims dating back to 1960. Two claims were reported in 2024 for presumptive occupational cancers.

Mental Stress Injuries

First responders are at a higher risk of experiencing Mental Stress Injuries (MSI) due to routine exposure to traumatic events in the course of their work. Presumptive legislation recognizing PTSD in first responders was introduced in 2016, while additional mental health illnesses (chronic and traumatic stress) were added in 2018. Claim costs for Mental Stress Injuries represent more than half of the annual provincial WSIB costs despite representing approximately 20% of the compensable injuries. This is a trend experienced by emergency services across the province and supported by the WSIB data. Workers who have lost time for MSI remain off work for longer durations and have a much lower rate of success in returning to work in their pre-injury occupation.

MSI's decreased in 2024 which aligns with the introduction of dedicated psychological support services for SNEMS and TBFR. The first year of the contract, awarded in 2023, was a developmental year that involved assessing the needs of each service and their respective employees to develop strategies to reduce stigma, creating relationships and encouraging employees to seek out and connect to care when needed. Through 2024, NWO Psychology, the dedicated service provider, began implementing their programming, which includes:

- Critical incident debriefing,
- Timely access to one-on-one support,
- Peer support program development,
- Resiliency training, and

- Data driven/best practice recommendations for programming.

The preliminary results and anecdotal feedback from staff is very encouraging in predicting ongoing success, however additional time and data is required to make firm conclusions.

Figure 4 below summarizes the MSI by Year.

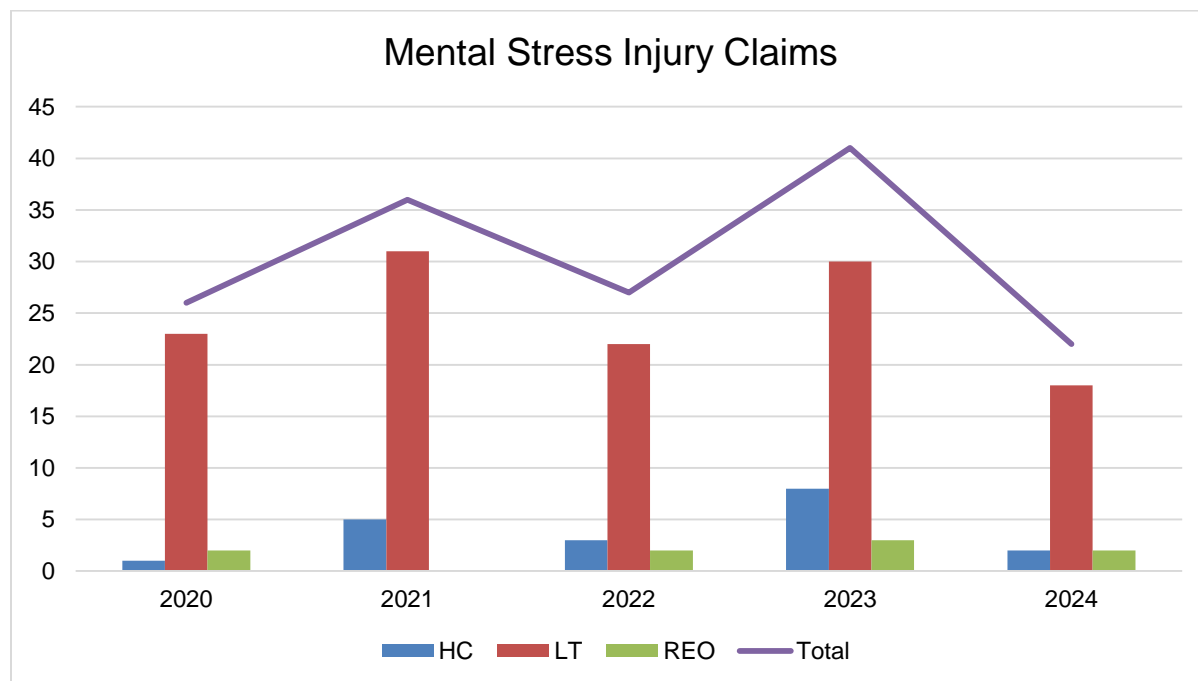


Figure 4: The number of mental stress claims per year by incident type (HC – Health Care, LT – Lost Time, REO – Reoccurring Injury).

Workplace Violence

Incidents of violence directed at front-line CTB staff that result in injury or a near miss through the normal course of their work, are reported and tracked through the Parklane Online Incident Report (OLIR) system.

Table 3 below summarizes the number of violent incidents reported through the OLIR system from 2020 to 2024 and includes both reportable injuries resulting in a WSIB claim and near miss/first aid incidents.

Table 3: Incidents of Violence Reported Through Parklane OLIR

Department/Section	2020	2021	2022	2023	2024
EMS (District)	2	3	3	6	7
Transit	10	11	9	10	14
EMS (City)	34	49	61	56	51
Pioneer Ridge	26	45	21	30	24

Administrative Areas (Finance, Couriers, Water Billing, Parking Authority)	4	2	2	2	1
Recreation (Junior Inclusion Services, Children's Programming, Aquatics)		2	3	10	9
Operational Areas (Roads, S&W, Waste Collection, Arenas)	1	1	3	1	5
TBFR		1	1	1	
Total	77	114	103	116	111

Note: some occurrences did not result in an incident but were classified as a near miss – a punch thrown that did not connect with an employee would fall into this classification.

The CTB promotes the importance of reporting workplace violence, and recognizes that many occurrences of a threatening, harassing or violent nature towards staff go unreported. In addition to reporting on SNEMS, Transit, and Pioneer Ridge, the table above has been expanded this year to provide numbers from frontline and operational areas in a generalized manner. Some atypical incidents involving members of the public have been serious enough that police intervention is required. Other incidents, such as those experienced by Junior Inclusion Services (JIS), are often a result of the services offered.

Unique strategies and violence prevention efforts specific to each area are considered as part of the Job Based Hazard Assessment. Specialized, appropriate training, along with administrative or physical controls, specific to the area are considered. Reported incidents are assessed to determine if current prevention strategies are effective or if more controls are needed.

The Employee Safety Task Force (ESTF) was established in early 2023 with a mission to address, through prevention and supports, increasing levels of violence, vicarious trauma, and moral injury experienced by staff in the course of their work. The ESTF membership includes management and front-line staff from Transit, SNEMS, TBFR, Parks and Licensing and Enforcement. While the focus of the ESTF are those frontline groups, strategies and actions that are recommended are considered for other areas of the corporation that may have similar experiences but not the same frequency.

An action planning session was held in March 2023 with front line staff and management from the target areas to establish actions that would accomplish the ESTF's mission. The actions included recommendations for operational improvements but also identified community supports needed. Many of the items that could be actioned or lobbied for have been completed or are underway.

2024 Accomplishments include:

- Internal trainers certified to conduct STEP De-escalation Training.
- Transit and frontline staff from across the Corporation participation in de-escalation training.
- Funding for SNEMS STAR program introduced.

- Province increased funding for withdrawal management services, increasing the total number of beds.
- Improved recruitment strategies to increase SNEMS staffing.
- Resources for community supports developed and distributed to front line staff.

Outstanding items identified in the 2023 Action Plan include:

- A media campaign, aligned with a provincial initiative, for making the appropriate call for emergency service. The expected completion is by the end of Q2 2025.
- Exploring a social support option at City Hall with the desired outcome of reducing emergency calls and appropriate supports being provided.

FINANCIAL IMPLICATION

There are no direct financial implications associated with this report. The details of WSIB costs are provided in the Attachment to this report.

CONCLUSION

It is concluded that the information in this report appropriately describes the events and activities associated with the Safety & Wellness Section.

BACKGROUND

Each year the Safety & Wellness Section reports to Council outlining the status of the safety program in the previous year.

REFERENCE MATERIAL ATTACHED

Appendix A: City of Thunder Bay Corporate WSIB Costs (Less Police)

REPORT PREPARED BY

Kerri Bernardi, Manager – Safety & Wellness

REPORT SIGNED AND VERIFIED BY

John Collin, City Manager

04/17/2025