

Ministry of Labour

# Occupational Health & Safety in Ontario

**2014 – 15 ANNUAL REPORT**



# Contents

**02// SECTION 1**  
**Introduction: Focusing Efforts for a Greater Impact**

**04// SECTION 2**  
**Occupational Health and Safety in Ontario:  
System Capacity and Current State**

- 2.1 Employment
- 2.2 Occupational Injuries, Illnesses and Fatalities
- 2.3 Training, Clinical Services, Enforcement and Prosecution
- 2.4 Private Health and Safety Consultants

**12// SECTION 3**  
**Measuring System Performance: Healthy and Safe  
Ontario Workplaces**

- 3.1 Assist the Most Vulnerable Workers
- 3.2 Support Occupational Health and Safety Improvements  
in Small Businesses
- 3.3 Address the Highest Hazards
- 3.4 Integrate Service Delivery and Systemwide Planning
- 3.5 Building Collaborative Partnerships
- 3.6 Promote a Culture of Occupational Health and Safety

**32// SECTION 4**  
**System Finances**

**36// SECTION 5**  
**Looking Ahead**

**37// SECTION 6**  
**Appendix A: Statistical Charts**

**45// SECTION 7**  
**Appendix B: Glossary of Terms**

**48// SECTION 8**  
**References**

# Letter to the Minister



George Gritziotis  
**Chief Prevention Officer**

**The Honourable Kevin Flynn**  
**Minister of Labour, Ontario**

Dear Minister Flynn,

I am pleased to submit the Occupational Health and Safety in Ontario: 2014-15 Annual Report. In this annual report, you will read about the current state of occupational health and safety in Ontario for 2014-15 and our accomplishments as an occupational health and safety system since releasing my first report last year.

With system transformation well underway, 2014-15 provided an opportunity to focus our efforts on the most frequent and severe causes of workplace injuries, illnesses and fatalities. As a system invested in workplace health and safety, we need to continuously work together to break the cycle of tragic and preventable events. While available data points to an overall decline in reported injury rates, the critical injuries and fatalities resulting from workplace incidents and occupational diseases have remained persistently flat over the past ten years.

In 2014-15, a number of new initiatives and legislative changes were introduced to improve occupational health and safety in

the province. Those activities are outlined in this report along with a preview of what is next for the system. To have an impact on critical injuries and fatality rates, we need to focus and sustain our prevention efforts on addressing incidents in sectors where rates are persistently high. In addition to addressing workplace critical injuries and fatalities, we need to respond to increasingly important health and safety issues such as violence and mental health in the workplace. It's imperative that we continually challenge ourselves to find innovative ways to prevent workplace injuries and fatalities.

In submitting this annual report, I want to acknowledge the commitment and support of the entire occupational health and safety system as well as the many partners we collaborate with on a daily basis. I look forward to continuing to advance toward our shared goal – a future in which every worker comes home healthy and safe.

George Gritziotis  
**Chief Prevention Officer**  
**Ontario Ministry of Labour**



# Introduction: Focusing Efforts for a Greater Impact

**2014-15 marked a year of significant progress for Ontario's occupational health and safety system. Led by the occupational health and safety system partners – the Ministry of Labour, the Workplace Safety and Insurance Board and Ontario's health and safety associations – the system is advancing Healthy and Safe Ontario Workplaces, A Strategy for Transforming Occupational Health and Safety. Launched in December 2013, the integrated strategy outlines six priorities that will help the system achieve its vision of healthy and safe Ontario workplaces.**

To focus on achieving the goals of the integrated strategy, the system partners held joint planning sessions resulting in coordinated action for each strategic priority. The system explored opportunities for expanding or collaborating on existing initiatives as well as developing new initiatives based on service delivery gaps. To optimize impact, a collection of data and research was incorporated into decision making, including:

- injury, illness and fatality data to identify highest hazard sectors and work activities
- stakeholder feedback collected during consultations and engagements including the strategy development and Safe At Work Ontario consultations research including literature reviews and the results of ministry funded research projects

- a review of occupational health and safety programs and practices from around the world.

Some highlights of system partner initiatives for 2014-15 included:

- launch of the Working at Heights Training Program and Provider Standards to reduce fatalities associated with falls from heights
- expanding the Occupational Health and Safety Act to include certain unpaid students, learners and trainees
- the completion of a Mining, Health, Safety and Prevention Review
- early implementation of the mining review recommendations including a best practice guideline on high visibility apparel for workers

- a multi-stakeholder summit that developed a set of prevention strategies for addressing traumatic mental stress
- initiatives to build awareness such as mandatory awareness training for all workers in Ontario, a student video contest, and a social awareness campaign to prevent falls from heights.

In addition to these achievements, there was continued focus on cultivating a more responsive and robust occupational health and safety system by:

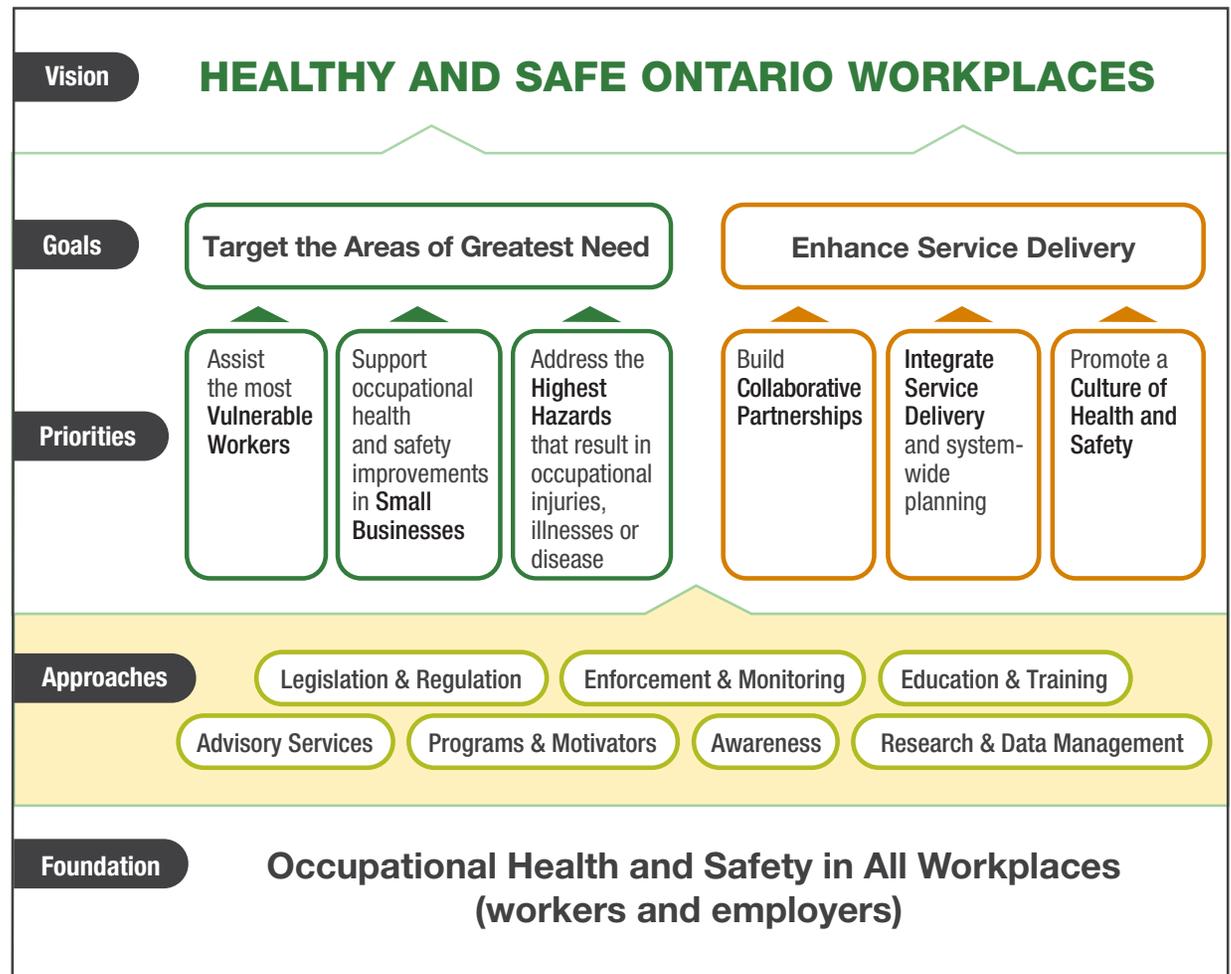
- strengthening connections between research and system planning to utilize the latest evidence in occupational health and safety
- collecting and analyzing reliable data and information for conducting risk assessments to identify the highest risks
- engaging stakeholders and enhancing collaboration and partnerships within and beyond the occupational health and safety system
- refining performance measures to determine the effectiveness of interventions and track progress in achieving the goals of the integrated strategy.

## About this Report

This report highlights a selection of 2014-15 activities that support the goals of the integrated strategy. It incorporates performance data, where available, to measure

progress in achieving the vision of healthy and safe Ontario workplaces.

Definitions of key terms are provided in the glossary (see Appendix B).



# Occupational Health and Safety in Ontario: System Capacity and Current State

**Ontario's occupational health and safety system partners – each with its unique role – work together to prevent workplace injuries, illnesses and fatalities.**

The broader occupational health and safety system includes:

- Section 21 Committees which advise the minister on occupational health and safety matters
- private health and safety consultants
- research centres
- the Offices of the Worker Adviser and the Employer Adviser
- health and safety representatives and joint health and safety committees within workplaces
- employer and worker organizations and associations.

In addition, a multi-stakeholder Prevention Council advises the Minister of Labour and the Chief Prevention Officer on system planning and initiatives.

## PREVENTION COUNCIL

### **Labour representatives**

- Patrick Dillon, Provincial Building and Construction Trades Council of Ontario
- Colin Grieve, Hamilton Professional Firefighters Association Local 288 IAFF
- Nancy Hutchison, Ontario Federation of Labour
- Derek Johnstone, United Food and Commercial Workers of Canada

### **Non-union worker representative**

- Linda Vannucci, Toronto Workers' Health and Safety Legal Clinic

### **Employer representatives**

- Michael Oxley, DuPont Canada
- Dawn Tattle, Anchor Shoring and Caissons Ltd.
- Roy Slack, Cementation Canada Inc.

### **Workplace Safety and Insurance Board Representative**

- Susanna Zagar

### **Occupational health and safety expert**

- Graeme Norval, Department of Chemical Engineering, University of Toronto

**OCCUPATIONAL HEALTH AND SAFETY SYSTEM**



## Workplace Safety and Insurance Board serving Ontario for 100 Years



In 2014, the Workplace Safety and Insurance Board marked its 100<sup>th</sup> year of providing no-fault insurance to workers and employers. The Workplace Safety and Insurance Board has become one of the largest insurance organizations in North America, providing workplace injury insurance to 300,000 businesses and 5.1 million workers. The board also delivers health and safety programs to help employers build healthy and safe workplaces<sup>1</sup>.

## 25 Years of Occupational Health Clinics for Ontario Workers



In 2014, Occupational Health Clinics for Ontario Workers celebrated 25 years of identifying and preventing work-related illnesses. The first clinics, founded in Hamilton and Toronto in 1989, have since expanded across Ontario to Windsor, Sudbury, Sarnia and Thunder Bay. Since its inception, Occupational Health Clinics for Ontario Workers has seen 31,000 patient cases, developed or collaborated on 11,500 workplace interventions and 500 occupational health-based prevention tools and resources, held approximately 10,500 education sessions and responded to more than 100,000 work-related inquiries<sup>2</sup>.

# 2.1

## Employment

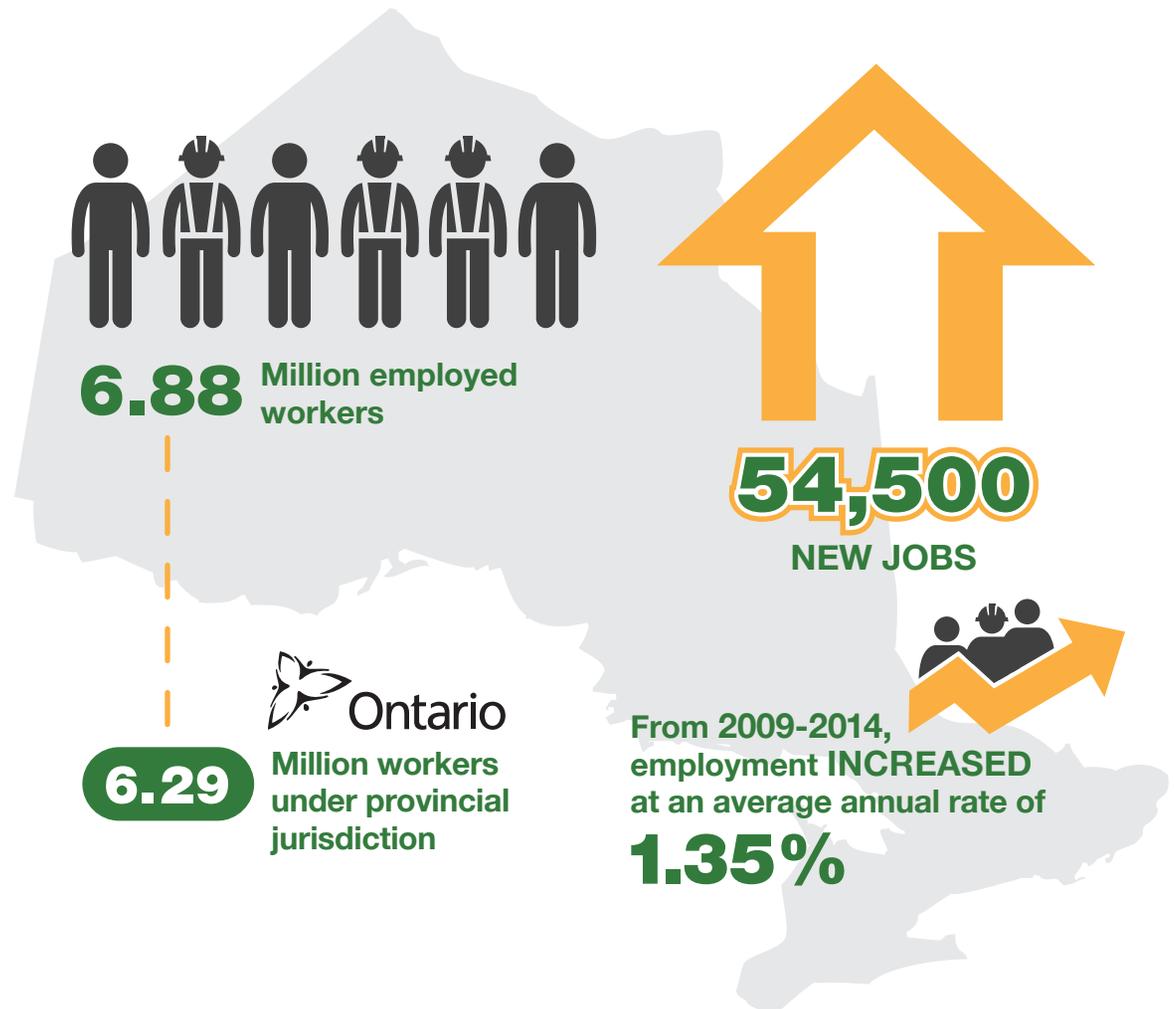
### In 2014<sup>3</sup>:

- Workers aged 55 to 64 comprised 15.5 percent of the labour force and experienced the largest employment increase of 42,100 jobs.
- Workers aged 25 to 54 comprised 65.4 percent of the labour force losing 28,100 jobs.
- Workers aged 15 to 24 comprised 15.1 percent of the labour force gaining 14,000 jobs.
- Workers aged 65+ comprised 4.0 percent of the labour force gaining 26,400 jobs.
- Self-employment accounted for 15.3 percent of total employment.
- 45.2 percent of workers under 25 years of age were involved in nonstandard\* work.

\* Nonstandard work includes temporary employment, part time work that is involuntary, self-employment without paid help, and multiple job holders where main job pays less than the economy-wide median wage.

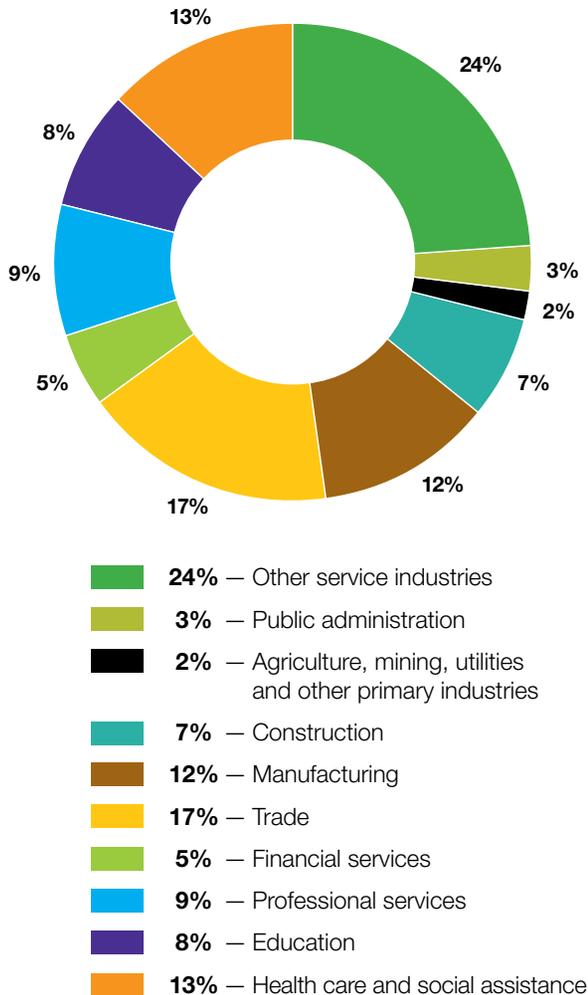
**From 2005 to 2014<sup>4</sup>:**

- Employment in the manufacturing sector declined by 29.6 percent, the most significant decline of any industry sector.
- Employment in a number of sectors increased, including health care and social assistance (28.2 percent), transportation and warehousing (21.8 percent), and construction (17.4 percent).

**EMPLOYMENT IN 2014**

Source: Statistics Canada's Labour Force Survey

## ONTARIO EMPLOYMENT UNDER PROVINCIAL JURISDICTION IN 2014



Source: Ministry of Labour based on Statistics Canada's Labour Force Survey

# 2.2

## Occupational Injuries, Illnesses and Fatalities

From 2005 to 2014, the lost time injury rate declined at an average annual rate of 7.1 percent for Schedule 1 employers and 3.6 percent for Schedule 2 employers. Over the same period, the no lost time injury rate declined at an average annual rate of 5.3 percent for Schedule 1 employers and 3.5 percent for Schedule 2 employers (see Figures 1.1 and 1.2 in Appendix A)<sup>5,6</sup>. Ontario continues to have the lowest allowed lost time injury rate in the country since 2008 (see Figure 1.3 in Appendix A)<sup>7</sup>.

From 2005 to 2014, there was no substantial increase or decrease in fatality rates\* and critical injuries:

- the workplace-related traumatic fatality rate ranged between 12.76 and 17.29 (see Figure 1.7 in Appendix A)
- the occupational disease fatality rate ranged between 22.61 and 29.26<sup>8</sup>
- allowed occupational disease fatalities claims accounted for the majority of allowed total workplace fatalities claims
- an average of 1,147 critical injuries a year were reported to the Ministry of Labour (see Figures 1.6 in Appendix A)<sup>9</sup>.

\* Fatality rates are calculated by the Ministry of Labour based on Day of Mourning reported traumatic and occupational disease fatalities divided by the number of people under provincial jurisdiction.

## OCCUPATIONAL FATALITIES IN 2014

Source: Workplace Safety and Insurance Board Day of Mourning Fatalities Report; 2005 to 2014

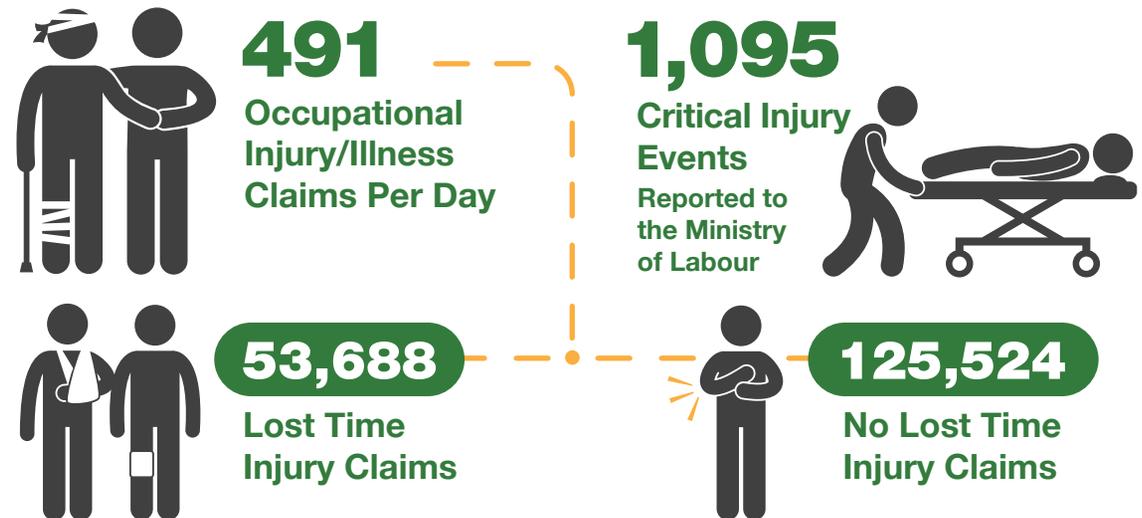
\* Traumatic fatalities are based on combined Ministry of Labour and Workplace Safety and Insurance Board reported traumatic fatalities and occupational disease fatalities are based on Workplace Safety and Insurance Board allowed fatality claims. Both reflect year death. See figures 1.4 and 1.5 in Appendix A.



## WORKPLACE INJURIES AND ILLNESSES IN 2014

Source: Workplace Safety and Insurance Board By the Numbers 2014 and Ministry of Labour Inspection, Compliance and Enforcement Database Quick Reference Guide, Quarter Four 2014-15.

The occupational injury and illness claims described in this info graphic represent occupational injury/illness claims (Schedule 1 and 2) that have been allowed by the Workplace Safety and Insurance Board.

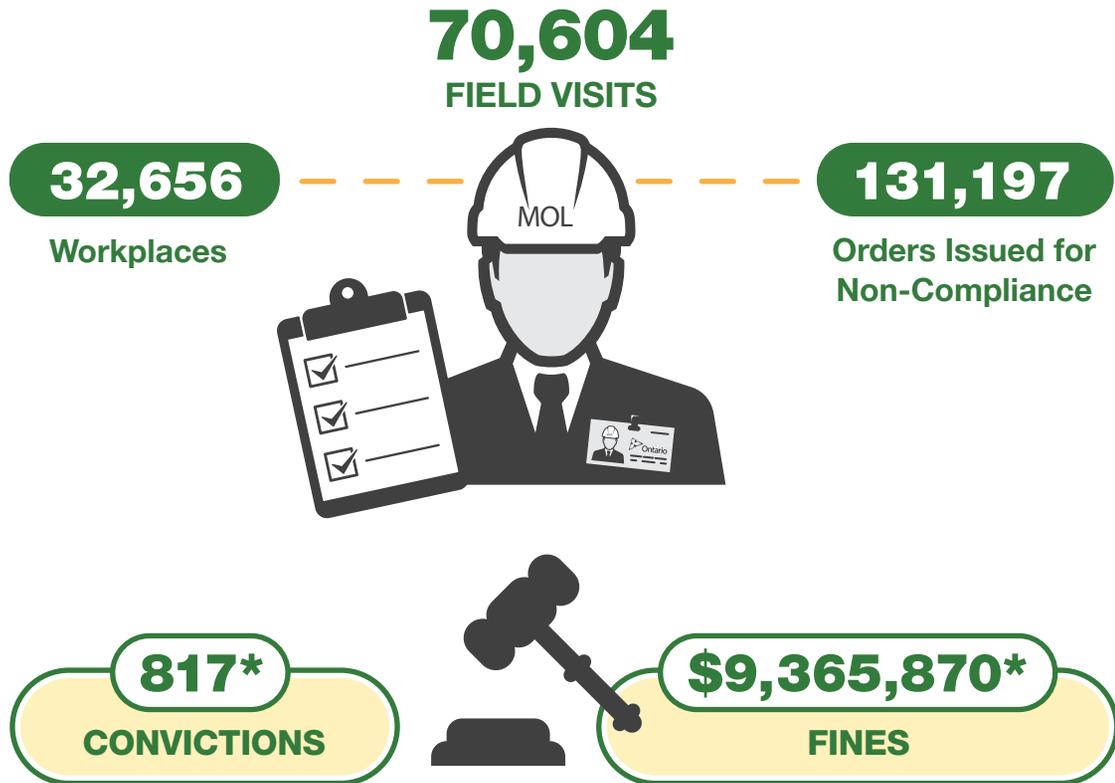


# 2.3

## ENFORCEMENT AND PROSECUTIONS IN 2014-15

### Training, Clinical Services, Enforcement and Prosecution

The Occupational Health and Safety Act requires that employers with more than five workers have a worker-selected health and safety representative and employers with more than 20 workers have a joint health and safety committee. According to a market assessment of occupational health and safety in Ontario<sup>§</sup>, almost all employers with 20 or more workers reported having a joint health and safety committee; however, only 74.5 percent of employers with 6 to 19 workers reported having a health and safety representative<sup>10</sup>.



Source: Ministry of Labour Inspection, Compliance and Enforcement Database Quick Reference Guide, Quarter Four 2014-15

Note: Regarding Ministry of Labour Field Visits, See Figure 1.8 in Appendix A.

\* 1. Prosecution statistics are based on fiscal year 2014-2015 and include convictions relating to Part III, Part I Summons and Part I Contested Ticket prosecutions. These statistics do not include uncontested Part I Tickets. 2. Fine amounts do not include the victim fine surcharge. 3. Prosecution statistics may be subject to minor variation following disposition of outstanding appeals.

§ In 2014-15, the Ministry of Labour commissioned a market assessment of occupational health and safety in Ontario to identify gaps in the use and delivery of occupational health and safety services. Surveys were administered to 1,508 employers from 12 industry groups, 1,502 workers, 134 Ministry of Labour Health and Safety inspectors, 71 private sector suppliers of prevention services, 42 trade unions and 29 industry associations. Findings from this study are included throughout this report.

**TRAINING AND CLINICAL SERVICES IN 2014-15****33,541\***Training  
Sessions**1,292,487\***Total Hours  
of Participant  
Training\***1,018\***Workers  
Received  
Clinical  
ServicesIndividuals Who Received  
**JOINT HEALTH & SAFETY COMMITTEE  
CERTIFICATION TRAINING****21,421**  
PART 1**14,168**  
PART 2  
(Fully Certified)**2.4****Private Health and  
Safety Consultants**

Private health and safety consultants provide occupational health and safety services to a significant number of workplace parties.

The breadth of occupational health and safety services offered by private health and safety consultants is similar to the types of services provided by health and safety associations. However, some offer a limited range of services or focus on a particular market segment, for example, 25 percent of surveyed consultants reported focusing primarily on employers with fewer than 20 workers<sup>10</sup>. 47 percent of consultants surveyed reported that they had used, published or distributed training products from a health and safety association over the past three years, while 52 percent reported that, over the past three years, they had referred a client to a health and safety association<sup>10</sup>.

Source: Ministry of Labour Health and Safety Association Year-End Reports 2014-15 and Joint Health and Safety Committee Certification Database Report 2014-15.

\* Provided by Health and Safety Associations.

# 3

## Measuring System Performance: Healthy and Safe Ontario Workplaces

The occupational health and safety strategy, Healthy and Safe Ontario Workplaces, includes a systemwide performance measurement framework. The purpose of the framework is to evaluate the system's progress in achieving the goals of the integrated strategy\*.



For 2014-15, the Ministry of Labour is presenting an initial set of data and results to measure systemwide accomplishments for each of the strategy's priorities. The data comes from sources that are available at this point in time and encompasses both system outputs (e.g. services to workers and employers) and outcomes (e.g. injury, illness and fatality statistics).

---

\* Healthy and Safe Ontario Workplaces – A Strategy for Transforming Occupational Health and Safety including a full description of the priorities and goals referenced in this report can be found on the Ministry of Labour's web pages.

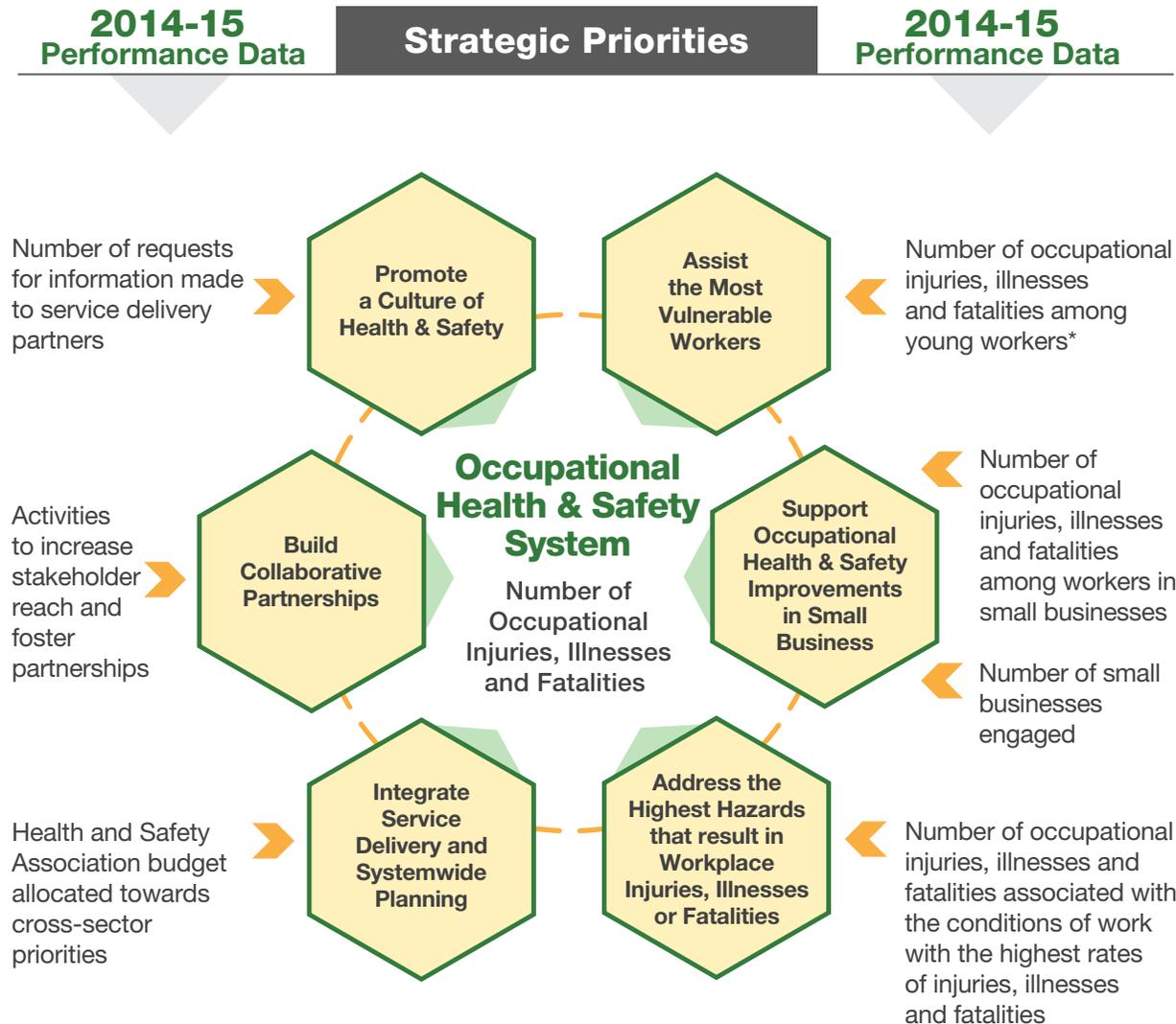
## PERFORMANCE MEASURES

# 3.1

## Assist the Most Vulnerable Workers

While there is no one commonly accepted definition of vulnerable workers, the integrated strategy describes vulnerability as a mix of individual and workplace factors that interact in complex ways to increase the risk of occupational injuries, illnesses and fatalities. Essentially, some workers are at greater risk of occupational injury, illness and fatality than others. For example, a worker may face inherent hazards on the job combined with a lack of awareness of occupational health and safety rights and responsibilities.

By examining the intersection of factors that affect vulnerability, the occupational health and safety system has been able to focus its efforts on supporting those at greater risk. In 2014-15, a number of new initiatives, products and services were created to assist these workers.



\* Young workers are those aged 15 to 24.

- In 2013, there were 39,526 temporary foreign workers in Ontario who possessed work permits<sup>11</sup>.
- In 2014, there were 193,300 recent immigrant workers (fewer than five years in Canada) in Ontario<sup>12</sup>.
- Based on a ministry commissioned occupational health and safety market assessment, casual or contract employees are 46.7 per cent less likely to receive formal, structured health and safety training than their colleagues who hold permanent positions<sup>10</sup>.

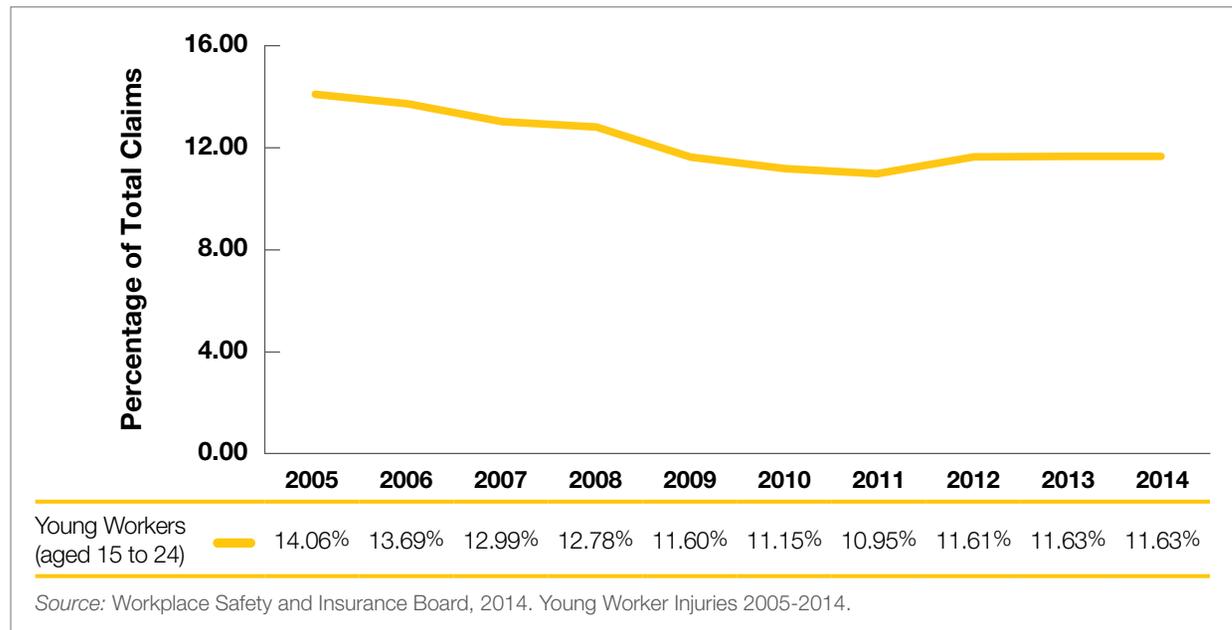
**PERFORMANCE DATA**

**In 2014, 11.6 percent of all allowed lost time claims from Schedule 1 and 2 employers occurred among young workers between the ages of 15 and 24<sup>5,6</sup>.**

**This group also experienced:**

- Eight allowed traumatic fatality claims<sup>5,6</sup>
- No allowed occupational disease fatality claims<sup>5,6</sup>
- 6,242 allowed lost time claims which decreased at an average annual rate of 7.2 percent since 2005<sup>5,6</sup>
- 19,688 allowed no lost time claims which have decreased at an average annual rate of 5.8 percent since 2005<sup>5,6</sup>.

**Workplace Safety and Insurance Board Allowed Lost Time Claims for Young Workers as a Share of Total Claims (Schedule 1 and 2)**



**2014-15 Activity Highlights by Strategic Goal:**

**STRATEGY GOAL: Understand all the factors that make workers vulnerable and how to provide support**

- A Vulnerable Worker Task Group, made up of worker and employer representatives, developed recommendations to help the system increase occupational health and safety outreach and awareness to employers and vulnerable workers.

**STRATEGY GOAL: Improve awareness of occupational health and safety rights and responsibilities among vulnerable workers**

- Workplace Safety and Prevention Services administered 382 health and safety awareness presentations to over 10,838 students in 142 schools<sup>14</sup>.
- The Ministry of Labour’s annual “It’s Your Job: Prevention Starts Here” video contest received 46 entries from 28 participating

The system is using an **evidence-based framework developed by the Institute for Work and Health** to assess the extent to which workers may be vulnerable to occupational health and safety risks at work. The framework assesses vulnerability in four areas: exposure to hazards in the workplace, inadequate workplace policies and procedures, low health and safety awareness of occupational hazards and rights and responsibilities and a workplace culture that discourages worker participation in injury prevention (i.e. lack of worker empowerment). Using this framework, some groups are vulnerable in all four areas, while other groups are more vulnerable in some areas than others<sup>13</sup>.

schools. For the second straight year, an entry from Ontario won the national video competition<sup>15</sup>.

- Through funding from Ministry of Labour Prevention Grants:
  - MySafeWork held close to 140 events to educate young people about workplace safety. Over 170,000 students, parents, and adults participated<sup>16</sup>.



- Threads of Life, the Association for Workplace Tragedy Family Support, helped more than 2,000 family members of people who experienced workplace tragedy<sup>17</sup>.
- Minerva Canada Safety Management Education Inc., provided the James Ham Safe Design Award to a student team from McMaster University for introducing a device to prevent forklift collisions with workers<sup>18</sup>.
- Workplace Safety and Prevention Services hosted a First Nations Community Workshop that brought together 72 leaders from 21 First Nations across Ontario to share ideas on raising awareness of health and safety in the workplace<sup>19</sup>.

***“The First Nations Community Workshop heightened my understanding of the need for First Nations to embrace health and safety and make it our own. For this reason, we’ve committed to helping member communities create their own culturally appropriate First Nations health and safety culture through the ‘G’minoomaadozimin’ – ‘We are Living Well’ Initiative. We believe safe workplaces will result in safer families and overall safer communities.”***



**Audrey Gilbeau**  
Executive Director, Nookiiwin  
Tribal Council Inc.

**STRATEGY GOAL: Improve programs and services for vulnerable workers**



Infrastructure Health and Safety Association Working at Heights Training in Russian.

- The Occupational Health Clinics for Ontario Workers held regional clinics, where they assessed 102 migrant farm workers and conducted health and safety workshops in multiple languages for 215 migrant farm workers<sup>20</sup>.
- The Infrastructure Health and Safety Association translated Working at Heights training into 10 languages other than English and French<sup>21</sup>.
- Workplace Safety North launched the first online learning tool for young tree-planters, Safeplanting.com, providing interactive pre-employment training on the hazards and necessary controls.

**STRATEGY GOAL: Improve occupational health and safety outcomes among industries with high proportions of vulnerable workers**

- The Ministry of Labour conducted an inspection blitz targeting workplaces that employ a high proportion of new and young workers. Inspectors visited 2,003 workplaces and issued 7,941 orders including 156 stop work orders<sup>9</sup>.
- Amendments to the Occupational Health and Safety Act expanded the definition of “worker” to include: unpaid secondary school students participating in a work experience program authorized by the school board, unpaid learners participating in a program approved by a post-secondary institution and certain other unpaid persons receiving training from an employer. These unpaid students, learners and certain trainees now have the same rights (and duties) under the Occupational Health and Safety Act as paid workers, including the right to refuse unsafe work.

**3.2**

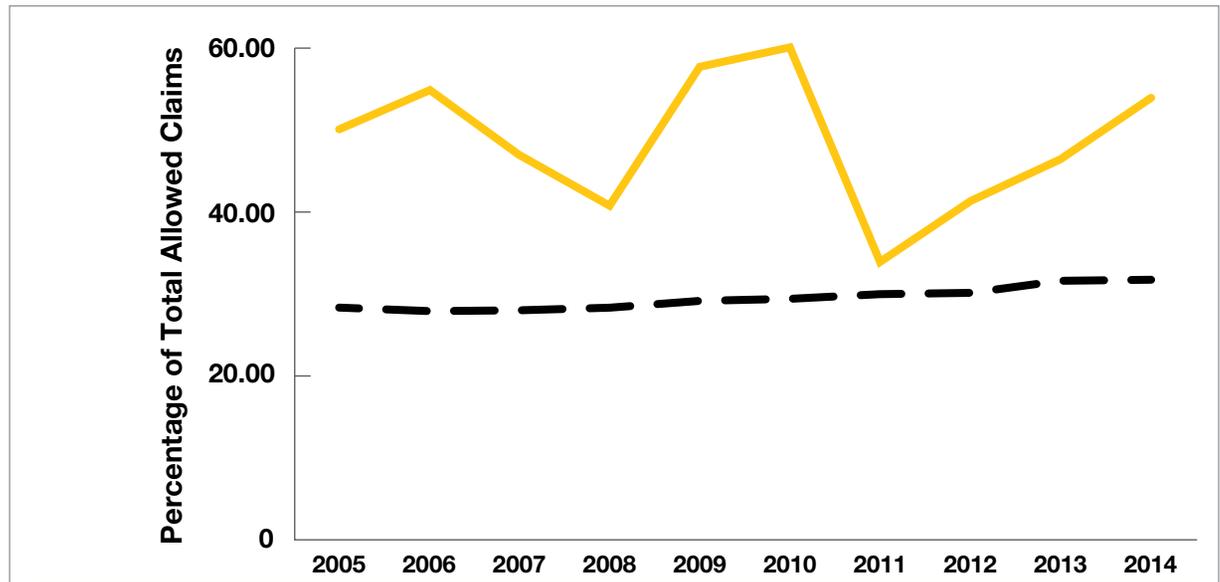
**Support Occupational Health and Safety Improvements in Small Businesses**

**Small businesses – defined as those with 50 or fewer workers – may face unique challenges to developing formal health and safety policies and programs due to factors such as limited time, finances or dedicated health and safety staff. In 2014, small businesses, which employed nearly one third of Ontario workers, accounted for 54 percent of traumatic fatalities<sup>22, 23</sup>. The occupational health and safety system partners aim to increase support to small businesses by developing clear, accessible and low cost resources, programs and services.**

**PERFORMANCE DATA**

- In 2014, for Schedule 1 employers:
  - small businesses had 12,763 allowed lost time claims and 23,494 allowed no lost time claims – both down an average of five percent per year since 2005<sup>25,26</sup>
- Collectively, Workplace Safety North, Infrastructure Health and Safety Association, Occupational Health Clinics for Ontario Workers and Public Services Health and Safety Association engaged over 7,500 small businesses through programs and services tailored to small businesses<sup>27</sup>.

**Workplace Safety and Insurance Board Traumatic Fatalities and Allowed Lost Time Claims for Small Businesses as a Share of All Allowed Claims (Schedule 1)**



Workplace Safety and Insurance Board allowed Traumatic Fatalities (Year of Incident)	50.00%	54.79%	46.91%	40.68%	57.63%	60.00%	33.82%	41.27%	46.34%	53.85%
Workplace Safety and Insurance Board allowed Lost Time Claims (Year of Injury/Illness)	28.25%	27.82%	27.92%	28.24%	29.07%	29.32%	29.89%	30.05%	31.52%	31.65%

Source: Workplace Safety and Insurance Board, 2014. Small Business Fatalities 2005-2014

- According to a market assessment commissioned by the Ministry of Labour:
  - 26.9 percent of businesses with fewer than five workers and 54.7 percent of businesses with 6 to 19 workers reported using occupational health and safety resources in the past three years – compared to 85.4 percent of businesses with 300 or more workers<sup>10</sup>.
  - 32.4 percent of workers in businesses that employ 1 to 19 workers reported that they received health and safety training when first hired – compared to 63.5 percent of workers in businesses that employ 100+ workers<sup>10</sup>.
- In 2014, the top two industry sectors employing workers in small businesses were:
  - Construction: 63 percent of workers were from small businesses
  - Accommodation and Food Service: 47 percent of workers were from small businesses<sup>23 \*</sup>.

- In 2014, of the 406,369 small businesses in Ontario:
  - 59 percent employed between 1 and 4 workers
  - 32 percent employed between 5 and 19 workers
  - 9 percent employed between 20 and 49 workers<sup>24</sup>.

### 2014-15 Activity Highlights by Strategic Goal:

#### **STRATEGY GOAL: Understand the health and safety needs of small businesses**

- A Small Business Task Group, made up of worker and employer representatives, developed recommendations to help the system increase occupational health and safety outreach and awareness to small businesses.

- Ministry of Labour summer students visited 2,675 small businesses, distributing 2,196 information kits and administering 1,376 surveys. According to the survey findings, businesses that had more contact with the ministry and/or made more use of occupational health and safety resources reported improvements in their occupational health and safety knowledge<sup>28</sup>.

#### **STRATEGY GOAL: Improve awareness of occupational health and safety requirements within small businesses**

- The Ministry of Labour launched a dedicated webpage for small businesses, providing easy access to important workplace health and safety resources tailored specifically to their needs.
- The Ministry of Labour's western region initiated a program to deliver occupational health and safety seminars to small manufacturing businesses.
- The Workplace Safety and Insurance Board piloted eight free health and safety information sessions for 410 small businesses in seven locations throughout the province<sup>29</sup>.

---

\* Data was unavailable for forestry and mining industries.

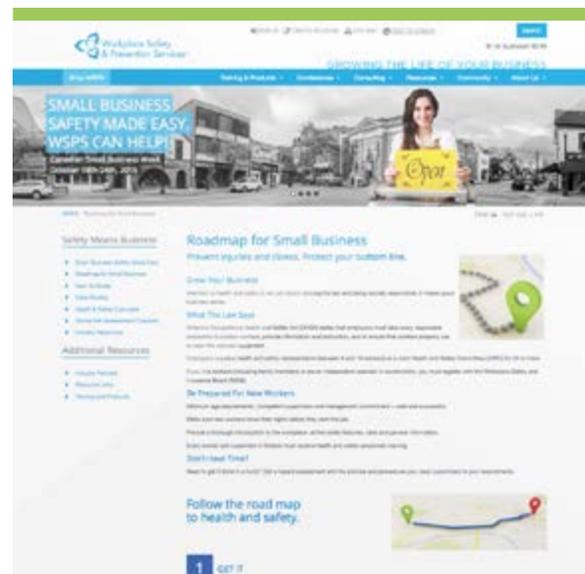
**STRATEGY GOAL: Increase small businesses' understanding of the business case for occupational health and safety**

- The Workplace Safety and Insurance Board's Small Business Health and Safety Programs provided rebates to 821 small businesses that completed program requirements, which included developing a health and safety action plan for their organization<sup>30</sup>. According to a market assessment commissioned by the Ministry of Labour, the proportion of employers who reported conducting monthly health and safety inspections was higher among participants in the Small Business Health and Safety Programs<sup>10</sup>.

**STRATEGY GOAL: Improve programs and services to meet the needs of small businesses**

- Workplace Safety and Prevention Services launched the free Small Business Roadmap to help small businesses prevent injuries and illnesses in the workplace. Tools available through the Roadmap were downloaded 4,367 times<sup>31</sup>.

- Workers Health and Safety Centre offered a new two-day program to help health and safety representatives in small businesses develop the skills necessary to establish, maintain and review an effective health and safety program.
- The Public Services Health and Safety Association provided free, targeted and on-demand support to small businesses through its eConsulting program.



***“Health and Safety is an important component in running a family business. We are lucky to have such dedicated employees who understand the importance of health and safety in the workplace. We ask that every employee here – whether owner, supervisor, worker – be mindful of putting safety first.”***



**Sherry Archer**  
Small Business Owner

## A Systemwide Plan to Support Small Businesses



According to a market assessment, only 2.9 percent of businesses with five or fewer workers reported that they had used a health and safety association resource in the past three years. Furthermore, only 12.5 percent of businesses with 6 to 19 workers and 16.5 percent of businesses with 20 to 49 workers reported using a health and safety association resource in the past three years. These findings confirm that, while the system has reached larger employers, it must continue to focus on joint planning to improve access to and quality of occupational health and safety resources for small businesses<sup>10</sup>.

In 2014-15, the occupational health and safety system partners collaborated on a plan to enhance support to small businesses in Ontario. New initiatives that will be implemented over the next four years include:

- a small business self-serve kit containing simple, clear and accessible tools to make small businesses aware of some key requirements under the Occupational Health and Safety Act
- a risk assessment to prioritize and guide programs and services for small businesses
- improved access for small businesses to tailored products and services
- increased partnerships with private occupational health and safety service providers
- a multi-year, multi-channel social awareness plan to raise the awareness of occupational health and safety with small businesses
- an inspection initiative to visit small businesses that have not been previously inspected by the Ministry of Labour.

The collaboration has also helped increase information and knowledge sharing across the system.

## ▶ 3.3

### Address the Highest Hazards

**High hazard work involves tasks or exposures to work conditions that can lead to more frequent or severe work-related injuries, illnesses and/or fatalities. In response to the need for immediate action on the highest hazards, the Ministry of Labour and system partners used Workplace Safety and Insurance Board and Ministry of Labour injury and fatality data to identify the leading causes of injuries, illnesses and fatalities in Ontario. These leading causes then became the focus of systemwide planning and action. For example, the system initiated activities to reduce the high number of fatalities in the construction sector and address the dangers of working at heights. The system also continued to enhance data collection and analysis to ensure that, as work evolves and causes of work-related injuries, illnesses and fatalities change, it is able to focus efforts on addressing them.**

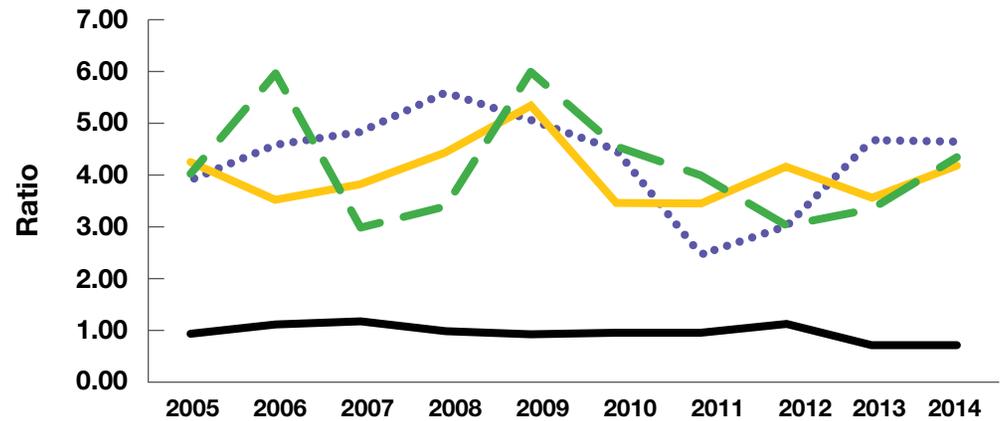
**PERFORMANCE DATA**

**In 2014:**

- The traumatic fatality rate\* was 62.74 for the construction sector and 66.96 for the transportation sector<sup>5</sup>
- The occupational disease fatality rate\* was 156.84 for the construction sector and 26.79 for the manufacturing sector<sup>5</sup>
- There were 19 traumatic fatalities associated with motor vehicle incidents and eight traumatic fatalities associated with falls from heights<sup>32</sup>.

- From 2005 to 2014 for Schedule 1 employers:
  - 28.3 percent of traumatic fatalities and 28.0 percent of occupational disease fatalities occurred in the construction sector<sup>5</sup>. In 2014, the construction sector accounted for 7.0 percent of total employment under provincial jurisdiction<sup>4</sup>.
  - 24.1 percent of traumatic fatalities occurred in the transportation sector<sup>5</sup>.
  - 54.6 percent of traumatic fatalities were caused by motor vehicle incidents and falls<sup>5</sup>.
  - Occupational disease fatalities accounted for 63.0 percent of total fatalities<sup>8</sup>.

**Fatality Rates for Top Two Sectors as a Ratio of the All-Sector Rate (Schedule 1)**



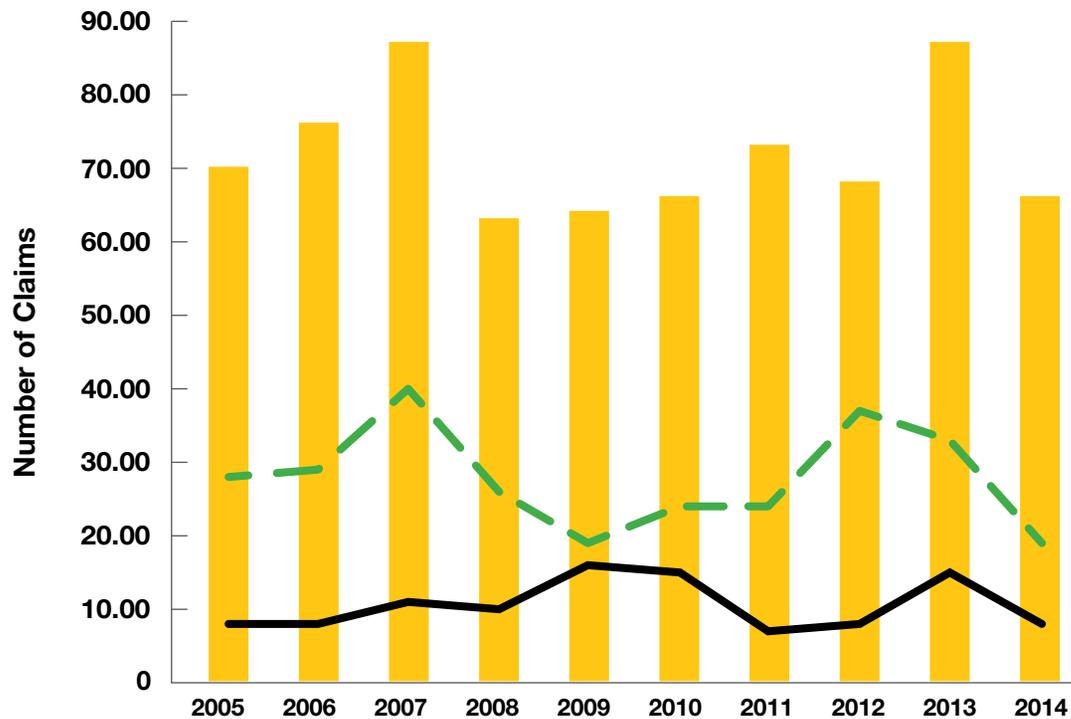
Construction Occupational Disease Fatalities (Year of Entitlement)	4.23	3.50	3.80	4.41	5.32	3.44	3.43	4.14	3.54	4.16
Manufacturing Occupational Disease Fatalities (Year of Entitlement)	0.93	1.11	1.17	0.98	0.92	0.95	0.95	1.12	0.71	0.71
Construction Traumatic Fatalities (Year of Death)	4.02	5.96	2.98	3.39	5.09	4.55	3.99	3.02	3.34	4.34
Transportation Traumatic Fatalities (Year of Death)	3.90	4.58	4.83	5.59	5.06	4.48	2.46	3.01	4.67	4.64

Source: Workplace Safety and Insurance Board, By the Numbers, 2014

Notes: • Fatality rates are calculated based on the number of Workplace Safety and Insurance Board allowed fatalities divided by Workplace Safety and Insurance Board covered employment by industry sectors.  
 • Fatality rates for top two traumatic fatality and occupational disease fatality sectors shown as a ratio of all-sector fatality rates for occupational disease and traumatic fatalities. For example, in 2014, the traumatic fatality rate in construction was 4.34 times the all-sector rate.

\* Fatality rates are calculated based on the number of Workplace Safety and Insurance Board allowed fatalities divided by Workplace Safety and Insurance Board covered employment by industry sectors.

**Workplace Safety and Insurance Board Allowed Traumatic Fatalities for Top Two Events and All Events** (Schedule 1 and 2, Year of Incident)



Motor Vehicle Incidents	28	29	40	26	19	24	24	37	33	19
Falls from Heights	8	8	11	10	16	15	7	8	15	8
All Events	70	76	87	63	64	66	73	68	87	66

Source: Workplace Safety and Insurance Board, 2014. Traumatic Fatality Events 2005-2014.  
 Note: Data is provided based on allowed traumatic fatality claims by year of incident.

**2014-15 Activity Highlights by Strategic Goal:**

**STRATEGY GOAL: Improve use of data and information and research to identify activities with the greatest risks**

- The construction sector has grown by 17.4 percent in the past 10 years and has the highest percentage of traumatic and occupational disease fatalities of any industry sector<sup>4,5</sup>. As part of the development of a Ministry of Labour Construction Health and Safety Action Plan, consultations were held with 54 construction employer and worker representatives to identify priority action items to improve occupational health and safety in the construction sector<sup>33</sup>.
- The Ministry of Labour, assisted by system partners and subject matter experts from both employer and worker groups, conducted a sector-wide risk assessment of hazards in underground mining and ranked over 260 risk events to help the system determine priorities<sup>34</sup>.

**STRATEGY GOAL: Develop additional rigorous training standards for specific high hazard work**

- The Ministry of Labour released the Working at Heights Training Program and Provider Standards.

- Regulatory requirements in O.Reg.297/13 made it mandatory for certain workers on construction projects to complete approved working at heights training program delivered by an approved training provider.

***“As a Ministry of Labour Inspector, I am proud of the work we do. I truly feel lucky to be in a role where I can say with certainty that I’ve made a difference. With the combined efforts of our health and safety system partners and colleagues, progress is being made in making Ontario a healthy and safe place to work.”***



**Allen Mendoza**  
Ministry of Labour Inspector

**STRATEGY GOAL: Co-ordinate and focus resources on conditions of work with the highest rates of injury, illness and/or fatalities**

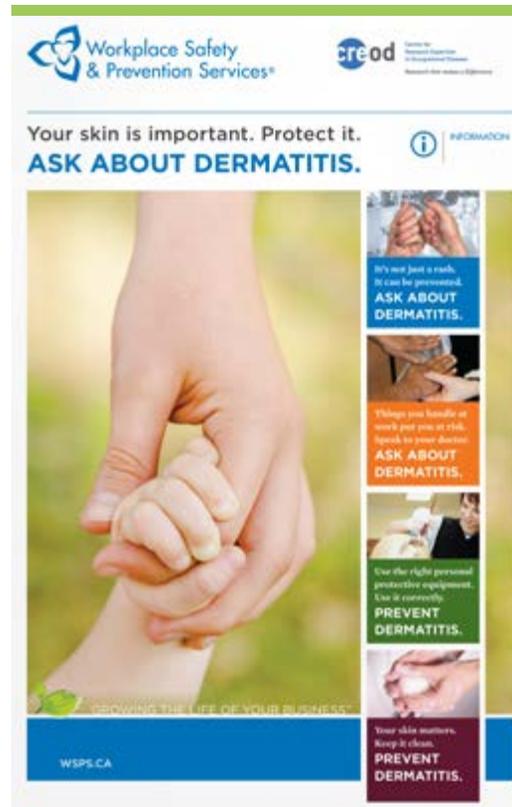
- New products were launched to address high risk activities and workplaces. For example:
  - The Workers Health and Safety Centre developed new programs on legislative requirements and safe work practices for operating chainsaws, industrial cranes, hoists and rigging and propane torches and heaters. They also updated courses on skid steers, elevating work platforms and mini-excavators.
  - The Infrastructure Health and Safety Association developed an Introduction to Hazard and Risk Management course and sample policy to help employers protect workers from distractions arising from mobile devices on worksites.
- The Ministry of Labour released proposals for regulatory changes, including extending noise protection requirements to workplaces not currently covered and amending the construction regulation with respect to suspended access equipment and drill rigs.

## Safe At Work Ontario

Through Safe At Work Ontario, the ministry's enforcement strategy for the Occupational Health and Safety Act, the ministry identifies and inspects workplaces according to a variety of factors, such as compliance history, hazards inherent to the work and the presence of vulnerable workers. The development of annual sector-specific plans that focus on hazards and health and safety issues specific to workplaces in different sectors, explain what inspectors will be focusing on in each sector during an inspection.

In 2014-15, the Ministry of Labour's inspection blitzes resulted in 7,106 workplaces visits and 27,700 orders of which 1,272 were stop work orders. Blitzes included sector-specific high hazards in the construction, health care, mining and industrial sectors. For example, from November to December 2014, an enforcement blitz was conducted at industrial workplaces focusing on hazards involving unguarded machines and improper lockout of machines and equipment (lockout ensures they do not start unexpectedly). During the blitz inspectors conducted 821 visits to 676 workplaces and issued 3,669 orders including 112 stop work orders<sup>9</sup>.

- System partners developed a coordinated multi-year plan to prevent ergonomics related injuries, including activities to build awareness such as a learning day for ergonomists and an Ergonomics Month.
- The Workplace Safety and Insurance Board provided \$2.5 million in rebates to the Northern Ontario Safety Group based on its 2013 performance. In 2013, the group showed a 16 percent reduction in the frequency of lost time injuries and a 24 percent reduction in the severity of those lost time injuries<sup>35</sup>.
- The Ministry of Labour began a new three year inspection initiative targeting the five most serious hazards in health care. Inspectors visited 164 workplaces and issued 562 orders including four stop work orders<sup>9</sup>.
- Organizations that received prevention and/or research grant funding from the Ministry of Labour developed a range of products, services and events. For example:
  - The Centre for Research Expertise for the Prevention of Musculoskeletal Disorders held three major stakeholder conferences. Over 300 stakeholders attended<sup>38</sup>.



- The Centre for Research Expertise in Occupational Disease collaborated with Workplace Safety and Prevention Services to develop a poster to raise awareness of occupational skin disease in the workplace; 9,600 posters were downloaded<sup>37</sup>.
- The Radiation Safety Institute's website included a new e-learning portal with free courses on radiation safety and had over 48,000 visitors (a 30 percent increase from the previous year)<sup>36</sup>.

## Improving Safety for Workers who Work at Heights

# STOP FALLS!

In 2014, there were 3,408 work-related injuries as a result of falls from heights<sup>\*5,6</sup>. Falls are the number one cause of critical injuries and deaths of workers at construction sites in Ontario. To address these preventable injuries and fatalities, system partners developed a collaborative action plan to focus efforts to prevent falls. In 2014-15, system partners delivered several key initiatives:

- Training that meets the Working at Heights Training Program Standard became mandatory on April 1, 2015 for workers on construction projects who may use certain methods of fall protection. The training standard covers: rights and responsibilities related to working at heights, hazard identification, ladder safety and proper use of personal protective equipment.

\* "Fall from heights" described as "Fall to a lower level" in Workplace Safety and Insurance Board statistics.

- A Working at Heights Training Provider Standard was released. As of March 31, 2015, seven organizations were approved by the Chief Prevention Officer to deliver working at heights training, with over 200 instructors delivering programs and more than 600 sessions scheduled across Ontario<sup>39</sup>.
- A systemwide “Stop Falls” message was created and is now displayed on communications materials and key events across the province.
- An after-hours workplace inspection project targeting the residential roofing industry resulted in 502 orders and 85 prosecutions<sup>9</sup>.
- The Ministry of Labour conducted an inspection blitz on falls hazards at construction sites. During the blitz, inspectors visited 1,670 workplaces and issued 6,458 orders, including 584 stop work orders.



## ▶ 3.4

# Integrate Service Delivery and Systemwide Planning

**The occupational health and safety system partners are working to make it easier for employers and workers to access the system and understand occupational health and safety legislative and regulatory requirements. In 2014-15, system partners reviewed the many products and services available along the continuum from awareness and education through to compliance and enforcement, focusing on the priorities outlined in the integrated occupational health and safety strategy. The review identified opportunities to integrate, streamline or expand a number of programs and services. Systemwide planning will help maximize resources and focus efforts while**

**maintaining each organization’s unique focus and offerings. By building a more integrated model of service delivery, the occupational health and safety system is improving access to and quality of services for all workplace parties.**

### PERFORMANCE DATA

- In 2014-15, the Health and Safety Associations spent a total of \$37,214,595 on integrated strategic priorities<sup>27\*</sup>:
  - Vulnerable Workers: \$7,334,429
  - Small Business: \$15,936,455
  - Highest Hazard: \$14,806,102

### 2014-15 Activity Highlights by Strategic Goal:

**STRATEGY GOAL: Clarify roles of system partners and the services they provide**

- A system partner forum was attended by over 100 managers from across the system to share information and discuss opportunities for collaboration and systemwide messaging<sup>40</sup>.

\* The amount spent on integrated priorities includes data from 5 out of 6 health and safety associations. Remaining spending includes other areas such as clinical services, general support for workplace parties and corporate services.

**STRATEGY GOAL: Strengthen system partners' capacity to track their performance and be accountable**

- The system partners completed an analysis to improve the consistency and quality of systemwide performance indicators. In future years, they will implement the results to measure system impact.
- The inaugural systemwide annual report – Occupational Health and Safety in Ontario: 2013-14 Annual Report was released.

**STRATEGY GOAL: Improve client experience and access to services**

- In collaboration with the health and safety associations, the Ministry of Labour held its seventh annual Safe At Work Ontario Consultations to seek advice from stakeholders on ways to continuously improve health and safety enforcement efforts. 375 individuals attended<sup>41</sup>.

**STRATEGY GOAL: Increase integrated planning among all system partners**

- System partners conducted joint planning to:
  - provide advice on developing metrics that describe the system's reach
  - facilitate the implementation of activities to address hazards related to musculoskeletal disorders and working at heights
  - provide occupational health and safety strategic communications advice and support.

**A System Presence at the 2014 Canadian National Exhibition**

In August 2014, the system partners delivered occupational health and safety information to nearly 12,000 Ontarians at Canada's largest annual community event: the Canadian National Exhibition. By hosting a booth at the event, the system partners – Infrastructure Health and Safety Association, Public Services Health and Safety Association, Workplace Safety and Prevention Services, Workplace Safety North, Workplace Safety and Insurance Board and the Ministry of Labour – collaborated to promote the importance of working safely at heights.

To attract visitors to the booth and remind them of the importance of occupational health and safety within society and falls prevention in particular, free products and services were offered such as souvenir photos, children's t-shirts and temporary "proud kid of a safe worker" tattoos. Over the six days:

- 11,606 fairgoers posed for 3,782 photos in front of a guardrail against a Toronto Skyline backdrop holding signs with messages such as "Stop Falls"
- 3,700 children received free harness t-shirts with the message "I'm wearing my fall protection. Are you?"

- 10,000 trifold cards, with information for people who work at heights or hire others to work at heights (e.g., homeowners), were distributed
- 31,419 people were reached through Twitter and Instagram<sup>42</sup>.



## ▶ 3.5

# Building Collaborative Partnerships

**The occupational health and safety system cannot make change alone. To be effective, the system must partner with the many associations and networks that workers and employers connect with daily. Stakeholders' advice and support is essential to develop and implement relevant, sustainable and practical policies and programs. In 2014-15, the system partners enhanced reach and engaged stakeholders in new and stronger partnerships that can help the system build capacity and have a significant impact on workplace health and safety in Ontario.**

### 2014-15 Activity Highlights by Strategic Goal:

**STRATEGY GOAL:** Use existing and new partnerships to reach a wider audience and promote system resources



- The Occupational Health Clinics for Ontario Workers, with help from the Canadian Centre for Occupational Health and Safety, launched a Measuring Workplace Stress smartphone application which was downloaded more than 1,000 times in the first six months<sup>43</sup>. Part of this success was attributed to the Workers Health and Safety Centre incorporating the application into their training materials and promoting the application through their network.
- To commemorate Ontario's annual Day of Mourning, the Workers Health and Safety Centre supported workers, unions, labour councils and community partners in events in more than 40 communities across Ontario<sup>44</sup>.

- The Public Services Health and Safety Association's Affiliate Program, which provides organizations with their health and safety resources at no cost, gained six new organizational partners resulting in over 2,000 web page visits<sup>45</sup>.
- In response to mental health concerns among first responders, the Public Services Health and Safety Association in partnership with Tema Conter Memorial Trust and the Ontario Psychological Association launched the "You Are Not Alone" campaign.



**STRATEGY GOAL: Increase engagement with partners within and outside the system**

- The Ministry of Labour launched a new Occupational Health and Safety Prevention and Innovation Program to support workplace-focused innovation projects and collaborative partnerships that have the potential to improve occupational health and safety.
- The Ministry of Labour launched an Engagement Framework that outlines its plans to strengthen the stakeholder engagement experience, expand the reach of stakeholder engagement and be more responsive to stakeholder input.
- The Public Services Health and Safety Association lead a consultative effort that brought together 55 stakeholders, including ministries, worker and employer representatives and associations to develop a model and toolkit to help workplaces sustainably reduce incidents of aggression and other adverse behaviours<sup>46</sup>.
- Health and safety associations held highly successful occupational health and safety conferences. For example, 300 delegates attended Workplace Safety North's annual Mining Health and Safety Conference and 4,128 people participated in Workplace Safety and Prevention Services' annual Partners in Prevention Conference<sup>47,48</sup>.

**Collaborating to Improve Health and Safety in Ontario Mines**



From 2012 to 2014, the Workplace Safety and Insurance Board reported 40 traumatic and occupational disease fatality claims among Schedule 1 mining employers<sup>4</sup>.

The Mining Health, Safety and Prevention review, launched in January 2014 at the request of the Minister of Labour, sought advice on how to improve mine safety from

an advisory group of worker, employer, and health and safety representatives, six expert working groups and 12 public consultations held in six Ontario communities<sup>34</sup>.

The review culminated in March 2015 with the release of the final report, which recommended concrete actions the system partners should take to ensure a stronger, safer underground mining sector. The 18 recommendations focused on six key areas for mining health and safety: health and safety hazards; the impact of new technology and management of change; emergency preparedness and mine rescue; training, skills and labour supply issues; the capacity of the occupational health and safety system; and the Internal Responsibility System<sup>34</sup>.

The ministry is currently working on implementing the recommendations, including considering proposals for potential regulation amendments addressing topics such as risk assessment, water management, traffic management and ground control. Furthermore, a best practice guideline on high visibility safety apparel was released in the fall of 2014 and stronger regulatory requirements for high visibility safety apparel were recently made and will come into effect in 2016.

*“These recommendations are a huge step forward towards ensuring the safety of the men and women working in the mining industry. Although my participation was because of the loss of my son in a tragic mining accident, I am honoured to have been a part of such a dedicated committee of individuals with the shared mission of bringing workers in the industry home safely.”*



Wendy Fram

*Chairperson, Mining Inquiry Needs Everyone's Support (MINES) Committee*

**STRATEGY GOAL:** Partner with other ministries and levels of government to share intelligence and enhance enforcement efforts

- The Ministry of Labour partnered with the Infrastructure Health and Safety Association, the Technical Standards and Safety Authority, the Ontario Cast-in-Place Concrete Development Council and the International Union of Operating Engineers Local 793 to find ways to improve complex construction equipment (e.g. tower cranes) safety.
- As part of systemwide efforts to protect vulnerable workers, the Ministry of Labour, the Infrastructure Health and Safety Association, Workplace Safety and Prevention Services, the Technical Standards and Safety Authority and the Electrical Safety Authority conducted joint workplace visits to amusement parks – a sector that hires many young and temporary workers.

## ▶ 3.6

### Promote a Culture of Occupational Health and Safety

**An occupational health and safety culture is shaped by the attitudes, values and beliefs towards occupational health and safety in both the workplace and society. In 2014-15, to promote a culture of occupational health and safety, the Ministry of Labour made basic occupational health and safety awareness training mandatory for workers and supervisors in Ontario. This awareness training is a significant step forward in ensuring all workplace parties, regardless of their role, know their occupational health and safety rights and responsibilities. System partners also studied best practices from around the world and completed an in-depth review of Ontario's prevention programs to identify effective ways to encourage workplaces to develop strong health and safety cultures and performance.**

**PERFORMANCE DATA**

- Health and Safety Associations responded to nearly 40,000 requests for information by phone or email<sup>27\*</sup>.
- The Ministry of Labour responded to 89,587 enquiries from the public through the contact centre and online feedback forms – a 24 percent increase from 2013-14<sup>52</sup>.

**2014-15 Activity Highlights by Strategic Goal:****STRATEGY GOAL: Understand society's attitudes, beliefs and behaviours related to occupational health and safety and how they have changed over time**

- In an in-depth research study, the Institute for Work and Health identified a common factor in improving workplace health and safety performance: a health and safety champion who brings occupational health and safety knowledge into the organization, helps incorporate that knowledge and helps promote collaboration and empower workers<sup>49</sup>.

**STRATEGY GOAL: Nurture health and safety leaders and champions in the community and workplaces**

- Workplace Safety and Prevention Services developed a Chief Executive Officer Health and Safety Leadership Network with membership from 33 organizations. Among other activities to promote health and safety at work, the network launched Canada's Best Health and Safety Culture Award: 12 organizations were celebrated in 2014 for a culture that not only permeates the workplace, but extends into their community, networks and areas of influence to make health and safety a priority for all<sup>50</sup>.
- The Ministry of Labour's Summit on Work-Related Traumatic Mental Stress in Toronto brought together 150 workers, employers and experts from a range of sectors to identify strategies for preventing traumatic mental stress. Over 95 percent of participants who completed the evaluation survey said the summit met their expectations<sup>51</sup>.

**STRATEGY GOAL: Ensure health and safety programs foster a culture of openness and inclusiveness – rather than blame and reprisals – in the reporting of hazards**

- The Office of the Worker Adviser received 1,137 new service requests in relation to occupational health and safety reprisals, which was a 27 percent increase from the previous year. As a result of these requests:
  - 836 workers received summary advice, information or referrals
  - 247 workers received in-depth consultations with a licensed lawyer or paralegal
  - In 81 of 90 reprisal complaints to the Ontario Labour Relations Board that were resolved, workers received monetary compensation and/or other benefits from employers – a 21 percent increase from the previous year<sup>53</sup>.
- The Office of the Employer Adviser assisted 75 employers with Occupational Health and Safety Act reprisal matters; 32 of these employers received representation from the Office of the Employer Adviser at the Ontario Labour Relations Board<sup>54</sup>.

\* The number of requests for information includes data from 5 out of 6 health and safety associations.

**STRATEGY GOAL: Foster social awareness of the importance of occupational health and safety and the Internal Responsibility System**

- The Infrastructure Health and Safety Association created a poster highlighting common activities that can lead to distracted driving and distributed approximately 2000 copies to workplaces<sup>21</sup>.
- Workplace Safety North's YouTube Channel features 45 free awareness videos on high hazards, which were viewed 104,114 times<sup>55</sup>.
- The Occupational Health Clinics for Ontario Workers' annual Repetitive Strain Injury Plus Awareness Day was attended either in-person or online by 492 professionals and lay people from 20 different countries<sup>56</sup>.
- The Ministry of Labour's monthly newsletter, "What's New", had over 26,000 subscribers as of March 2015, an increase of more than 6,000 subscribers from the previous year<sup>57</sup>.

## Health and Safety Awareness Training for Workers and Supervisors

As of July 1, 2014, Basic Occupational Health and Safety Awareness Training became mandatory in Ontario for all workers and supervisors covered by the Occupational Health and Safety Act. The training is designed to help prevent workplace incidents and injuries by making workers and supervisors aware of their roles, rights and responsibilities in the workplace. This awareness training will lay the foundation for a strong occupational health and safety culture in Ontario.

According to O. Reg. 297/13, health and safety awareness training for workers and supervisors must include information on: the rights and duties of workers, the duties of supervisors and employers under the Occupational Health and Safety Act, the role of joint health and safety committees and health and safety representatives and common workplace hazards and occupational illnesses.

Free online e-learning Worker and Supervisor training modules, Prevention Starts Here poster, Worker Health and Safety Awareness/Supervisor Health and Safety Awareness Workbooks and corresponding guides are available

in multiple formats and languages through the Ministry of Labour and Service Ontario. Resources to help employers comply with the regulation and ensure that all their workers and supervisors complete the training program are also available.

In 2014-15, 99,226 workbooks, 36,850 employer guides and 37,725 workplace posters in various languages were downloaded from the ministry's website<sup>58</sup>.

As of March 31, 2015, 150 organizations across Ontario, employing close to one million workers, have either been granted permission to copy the awareness modules to their learning management systems or – if their systems were incompatible – have accessed the modules online<sup>58</sup>.



# System Finances

The Ministry of Labour and system partners continue to reach an increasing number of workplace parties during a time of fiscal restraint. In 2014-15, the system continued to invest around \$300 million in occupational health and safety and directed that funding to high priority areas to support implementation of the integrated strategy.

## Occupational Health and Safety System Investments (\$ millions)

	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Transfers to Health and Safety Associations	85.6	85.7	81.4	90.3	92.9	91.6	87.8	91.5	93.4	93.1
Health and Safety Associations Self-generated Revenue	22.9	26.0	30.6	29.3	23.7	21.8	21.3	22.4	24.5	24.4
Enforcement	73.8	80.7	88.9	92.3	91.8	92.2	91.9	92.5	95.3	95.6
Legislation / Regulation Development	1.7	1.6	1.8	2.2	2.2	2.5	2.4	2.1	2.3	2.2
Agencies	12.9	12.9	14.2	14.6	14.5	14.8	15.0	15.6	17.0	16.0
Ministry of Labour Prevention Organization	—	—	—	—	—	—	0.2	5.3	11.9	13.9
Workplace Health and Safety Services (formerly Workplace Safety and Insurance Board – Prevention Division)	9.0	14.7	10.1	12.6	16.6	7.4	9.3	6.5	3.7	3.4
Other Grants	1.7	1.4	1.7	2.1	1.8	1.4	1.6	1.5	1.7	1.6
Research	8.1	8.0	9.0	9.1	8.8	8.1	7.9	7.8	8.9	8.9
Small Business Health and Safety Programs (formerly Safe Communities Incentive Program) Rebates	1.3	0.7	1.5	1.5	1.3	1.2	1.0	0.9	1.2	0.9
Safety Group Program Rebates	20.0	20.0	45.2	32.7	32.2	39.0	44.9	43.6	44.4	39.3
<b>Total</b>	<b>237.0</b>	<b>251.7</b>	<b>284.4</b>	<b>286.7</b>	<b>285.8</b>	<b>280.0</b>	<b>283.3</b>	<b>289.7</b>	<b>304.3</b>	<b>299.3</b>

## Occupational Health and Safety System Investments (\$ millions)

### Sources:

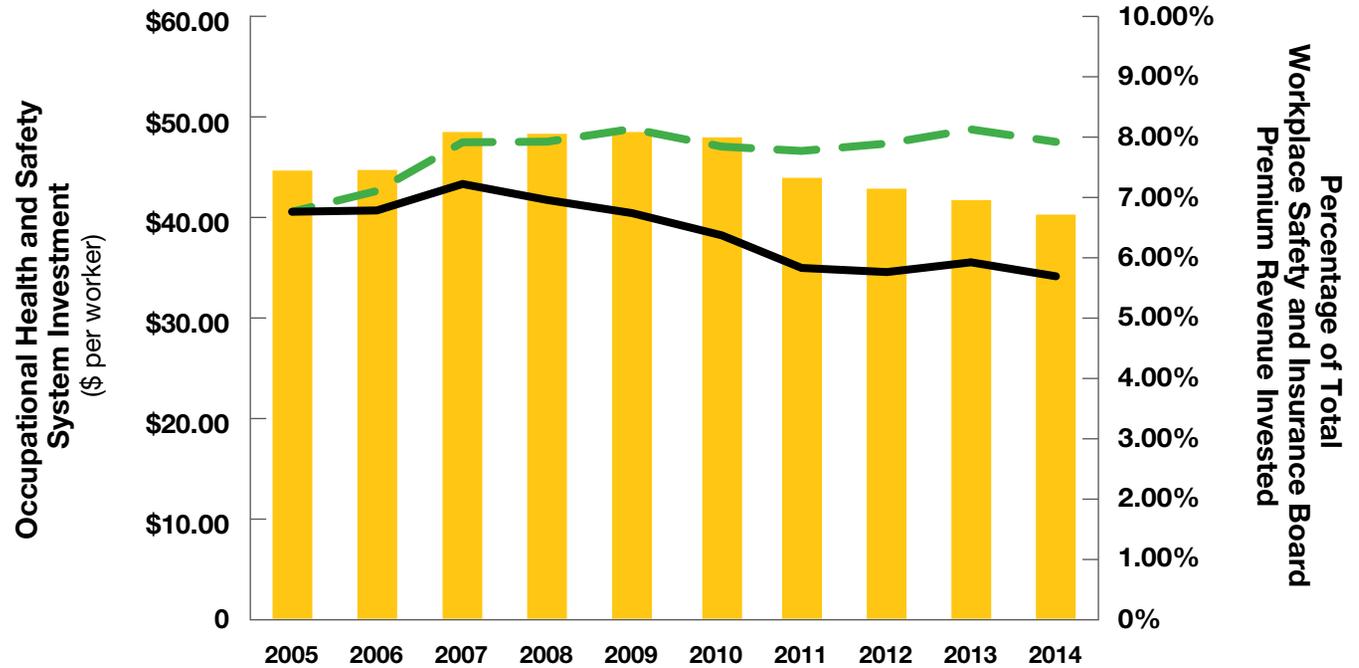
- Transfers to Health and Safety Associations: Workplace Safety and Insurance Board Prevention Program Statistics for 2005-2012; Ministry of Labour Transfer Payment Agreements with Health and Safety Associations for 2012-2014.
- Health and Safety Association Self-Generated Revenues: Health and Safety Association audited financial statements 2005-2014.
- Enforcement, Legislation / Regulation Development, Agencies, Ministry of Labour Prevention Organization: Government of Ontario IFIS Database 2005-2014.
- Other Grants: 2005-2012 figures are based on Ministry of Labour estimates according to unpublished Workplace Safety and Insurance Board financial information. Estimates are based on best available information at the time of preparation of annual report and are reviewed annually to reflect new information as it becomes available. From 2013 onwards, the figures are based on the Transfer Payment Agreements between the ministry and grant recipients.
- Research: Workplace Safety and Insurance Board – Research Advisory Council Budgeted Spend 2005-2013 and Research Grant Expense Costs to the Institute of Work and Health 2005-2012. Ministry of Labour – transfer payment agreements with research funding recipient 2012-2013. Cancer Care Ontario transfer payment agreements for research funding 2012-2013. Figures were also validated by the Institute for Work and Health and Centres for Research Expertise. From 2013 and onwards, the figures are based on the Transfer Payment Agreements between the ministry and grant recipients.
- Workplace Safety and Insurance Board Prevention Division: Workplace Safety and Insurance Board Prevention Program Statistics for 2005-2014.
- Small Business Health and Safety Program, Safety Group Program Rebates – Workplace Safety and Insurance Board Prevention Program Statistics for 2005-2014.

### Notes:

- Transfers to Health and Safety Associations, Other Grants and Research categories reflect calendar year investments (January 1 – December 31) from 2005-2012 and fiscal year investments (April 1 – March 31) for 2013 and 2014.
- Transfers to Health and Safety Associations from 2005-2011 reflect direct funding from the Workplace Safety and Insurance Board to Health and Safety Associations. The 2012 transfers reflect a combination of funding from the Workplace Safety and Insurance Board and the Ministry of Labour to the Health and Safety Associations as the mandate for Health and Safety Associations funding was transferred to the ministry in April 2012. From 2012 onwards, this funding occurred from the Workplace Safety and Insurance Board through the Ministry of Labour.
- For the year 2013, the Audited Financial Statements for Infrastructure Health and Safety Association and Workplace Safety and Prevention Services were reported on a calendar year ending December 31<sup>st</sup>. The other health and safety associations reported on a fiscal year ending March 31<sup>st</sup>. In 2014-15, all the health and safety associations reported on a fiscal year ending March 31<sup>st</sup>.
- Enforcement, legislation and regulation development, agencies, and prevention organization reflect fiscal year investments (April 1 – March 31) from 2005-2014.
- Research: Beginning in 2012, Research was transferred to the Ministry of Labour from the Workplace Safety and Insurance Board. The Ministry of Labour administers funding to Specialized Research Centres and the Research Opportunities Program.
- Other than legislation and regulation development and health and safety association self-generated revenue, all investments in occupational health and safety are funded by the Workplace Safety and Insurance Board through a portion of employer premiums.
- Agencies include investments associated with the Office of the Worker Adviser, Office of the Employer Adviser and the associated administration.
- The prevention organization did not exist at the Ministry of Labour prior to 2012. Investment in 2012 was minimal as the organization was being formed.

The system invested \$47.55 per worker under provincial jurisdiction in 2014-15, an increase of \$6.95 since 2005. However, with inflation, the amount invested per worker has decreased from \$40.60 per worker in 2005 to \$34.18 per worker in 2014. During this time the number of workers under provincial jurisdiction rose from 5.84 million to 6.29 million.

### System Investment Per Worker and as a Percentage of Workplace Safety and Insurance Board Premium Revenue

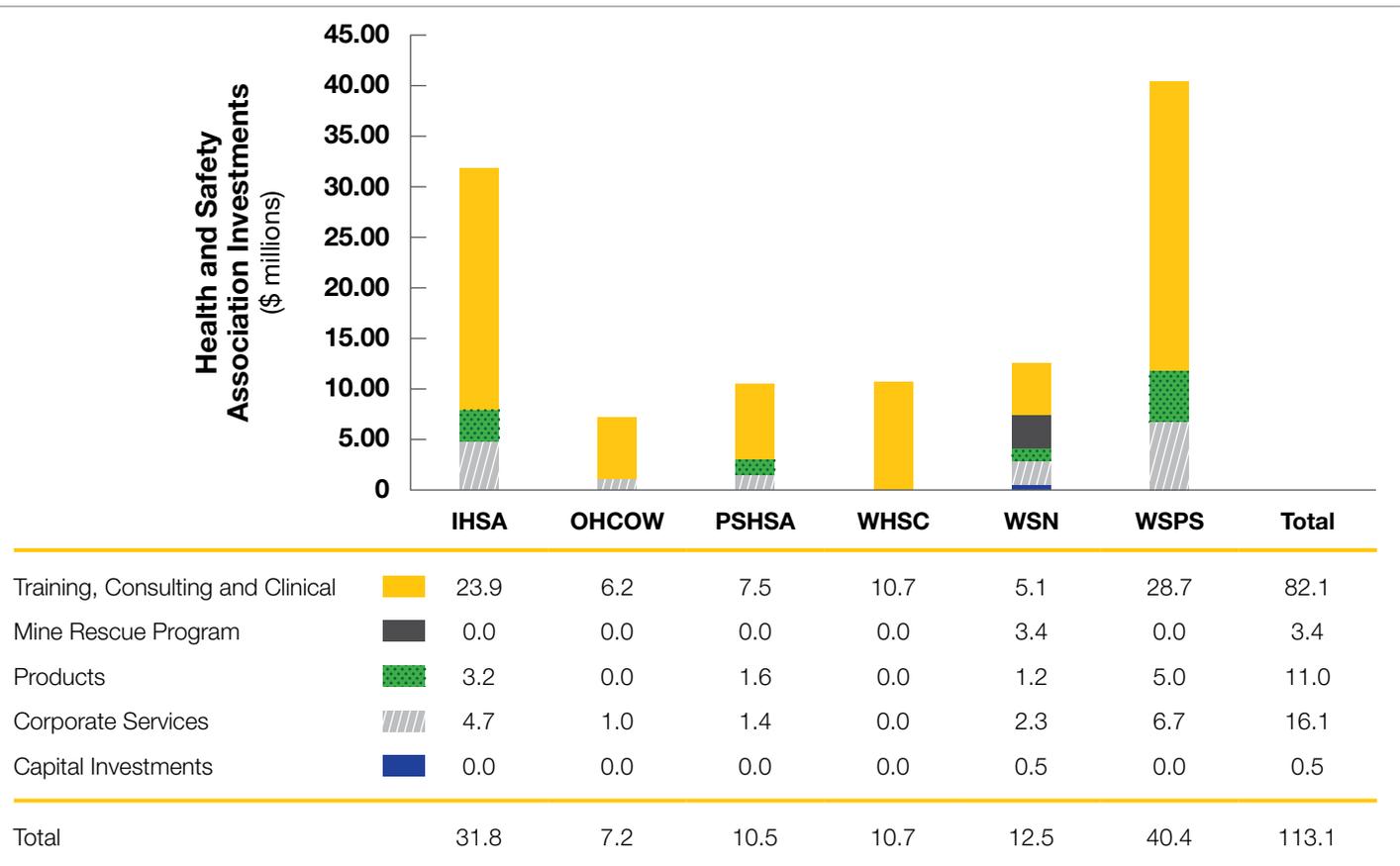


System investment per worker under provincial jurisdiction	—	\$40.60	\$42.67	\$47.51	\$47.57	\$48.84	\$47.08	\$46.65	\$47.38	\$48.79	\$47.55
System investment per worker under provincial jurisdiction, adjusted for rising costs due to inflation	—	\$40.60	\$40.73	\$43.36	\$41.77	\$40.46	\$38.25	\$35.01	\$34.60	\$35.57	\$34.18
System investment as a percentage of premium revenue	—	7.43%	7.44%	8.07%	8.04%	8.07%	7.98%	7.31%	7.13%	6.94%	6.70%

Sources: 2005-2014 Provincial Economic Accounts Deflator, Ministry of Labour calculation based on Statistics Canada Labour Force Survey 2005-2014, Workplace Safety and Insurance Board Annual reports: 2005-2014.

Investments by health and safety associations are composed of self-generated revenues and transfer payment funding from the Ministry of Labour. The chart illustrates the total actual spending by health and safety associations. Associations invest the majority of their ministry funding in training, consulting and clinical services. Any surplus amounts for the year are reinvested in 2015-16 activities. Health and safety associations also generate revenue through a variety of programs and services to workplace parties.

### Health and Safety Association Expenditures (2014-15)



**IHSA** – Infrastructure Health and Safety Association, **OHCOW** – Occupational Health Clinics for Ontario Workers, **PSHSA** – Public Services Health and Safety Association, **WHSC** – Workers Health and Safety Centre, **WSN** – Workplace Safety North, **WSPS** – Workplace Safety and Prevention Services  
 Source: Health and Safety Association's 2014-15 Audited Financial Reports to Ministry of Labour.

Notes: • Totals include expenditures from self-generated revenue.

- Mine Rescue Program is established pursuant to the direction of the Minister of Labour under Section 17 of Mines and Mining Plants, Revised Regulations of Ontario 1990 - Regulation 854 under the Occupational Health and Safety Act.
- Actual expenditure breakdown between Workers Health and Safety Centre's Training and Corporate Services program is unavailable.
- In 2014-15, health and safety association actual expenditures were lower than total investments (health and safety association transfers and self-generated revenue).

# Looking Ahead

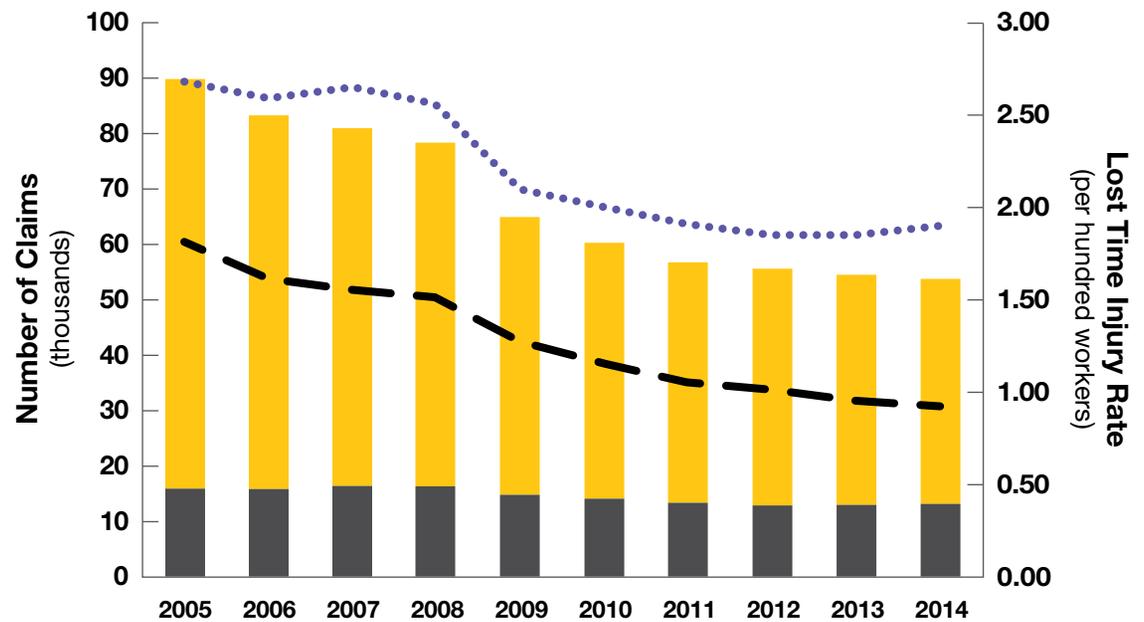
**As the occupational health and safety system moves forward in implementing the integrated strategy, it will continue to focus on the priority areas described in this report. Looking ahead, the system sees new emerging opportunities to improve the occupational health and safety of Ontario workers, including:**

- Continuing to address strategic focus areas such as falls from heights and support for small businesses through coordinated system planning and action.
- Drawing on the experience of labour organizations and employers who have introduced strong workplace mental health programs and working to expand employer-provided mental health services to Ontario workers.
- Developing an action plan to prevent injuries, illnesses and fatalities in the construction sector. To develop this plan, the system will engage stakeholder groups through consultation and seek advice on regulations and initiatives to improve occupational health and safety within the sector.
- Improving performance measurement by launching initiatives to collect data not available through current sources. The goal is a robust set of indicators that are more accurate, more easily available and of better statistical quality.
- Providing more publicly available information about Safe At Work Ontario, the ministry's enforcement strategy, leading to increased awareness and compliance with Ontario's Occupational Health and Safety Act and its regulations. An annual Safe At Work Ontario report will be produced and public consultations will continue on the development of the Safe At Work Ontario annual enforcement plans by sector.
- Establishing new training standards to strengthen the common, consistent and foundational training requirements for all certified members of joint health and safety committees.
- Developing new resources to help workplace parties understand their obligations under the Occupational Health and Safety Act, such as a checklist to help businesses with 20 or fewer workers evaluate how well they are complying with their duties to ensure their workplaces are healthy and safe.
- Partnering with the Ministry of Health and Long-Term Care to improve workplace violence prevention for health care workers in hospitals and the broader health care sector.



# Appendix A: Statistical Charts

**Figure 1.1: Workplace Safety and Insurance Board Allowed Lost Time Injury Claims/Rate (Year of Injury/Illness)**

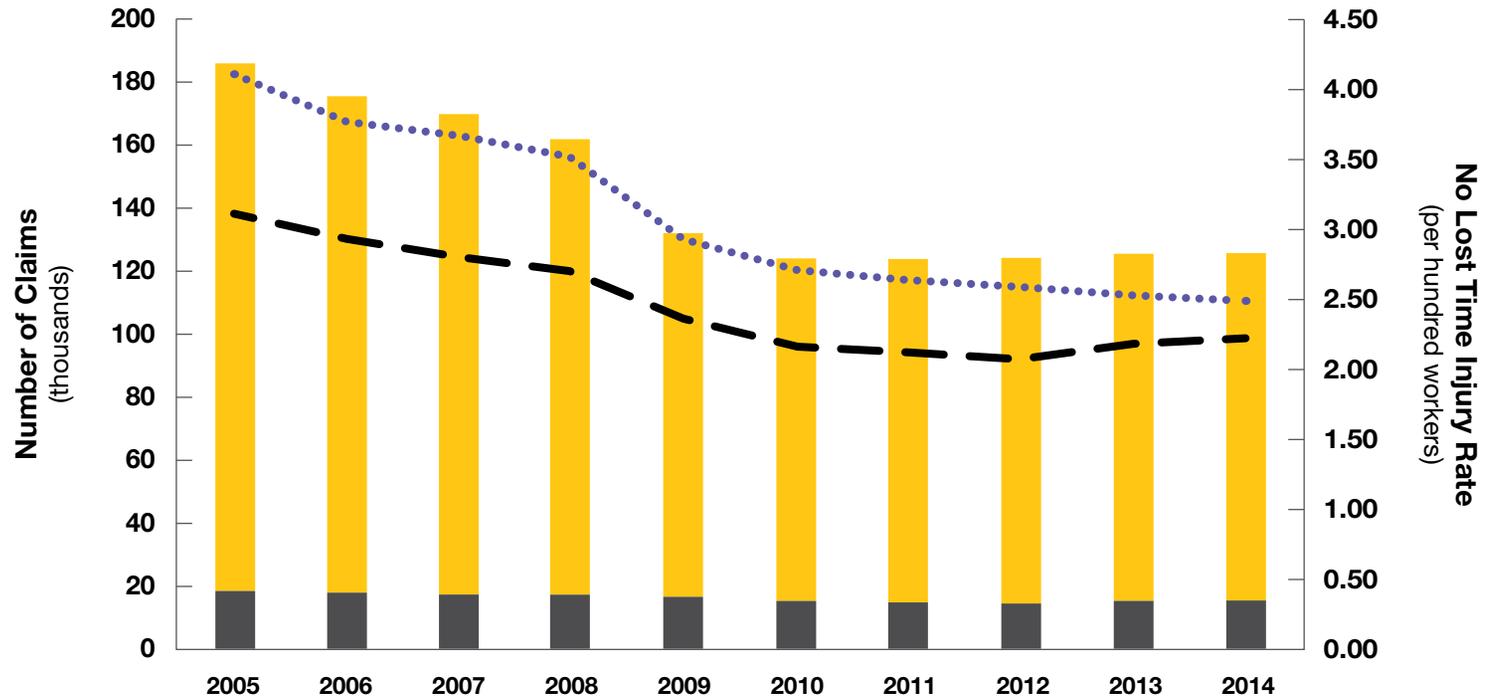


	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Schedule 1	73,888	67,406	64,531	61,992	50,104	46,160	43,371	42,702	41,508	40,585
Schedule 2	15,850	15,778	16,339	16,268	14,739	14,040	13,301	12,823	12,922	13,103
<b>Total</b>	<b>89,738</b>	<b>83,184</b>	<b>80,870</b>	<b>78,260</b>	<b>64,843</b>	<b>60,200</b>	<b>56,672</b>	<b>55,525</b>	<b>54,430</b>	<b>53,688</b>
Schedule 1 Rate	1.81	1.61	1.55	1.51	1.27	1.15	1.05	1.01	0.95	0.92
Schedule 2 Rate	2.68	2.59	2.65	2.56	2.10	2.00	1.91	1.85	1.85	1.90

Source: Workplace Safety and Insurance Board By the Numbers 2014, Schedule 1 and Schedule 2.

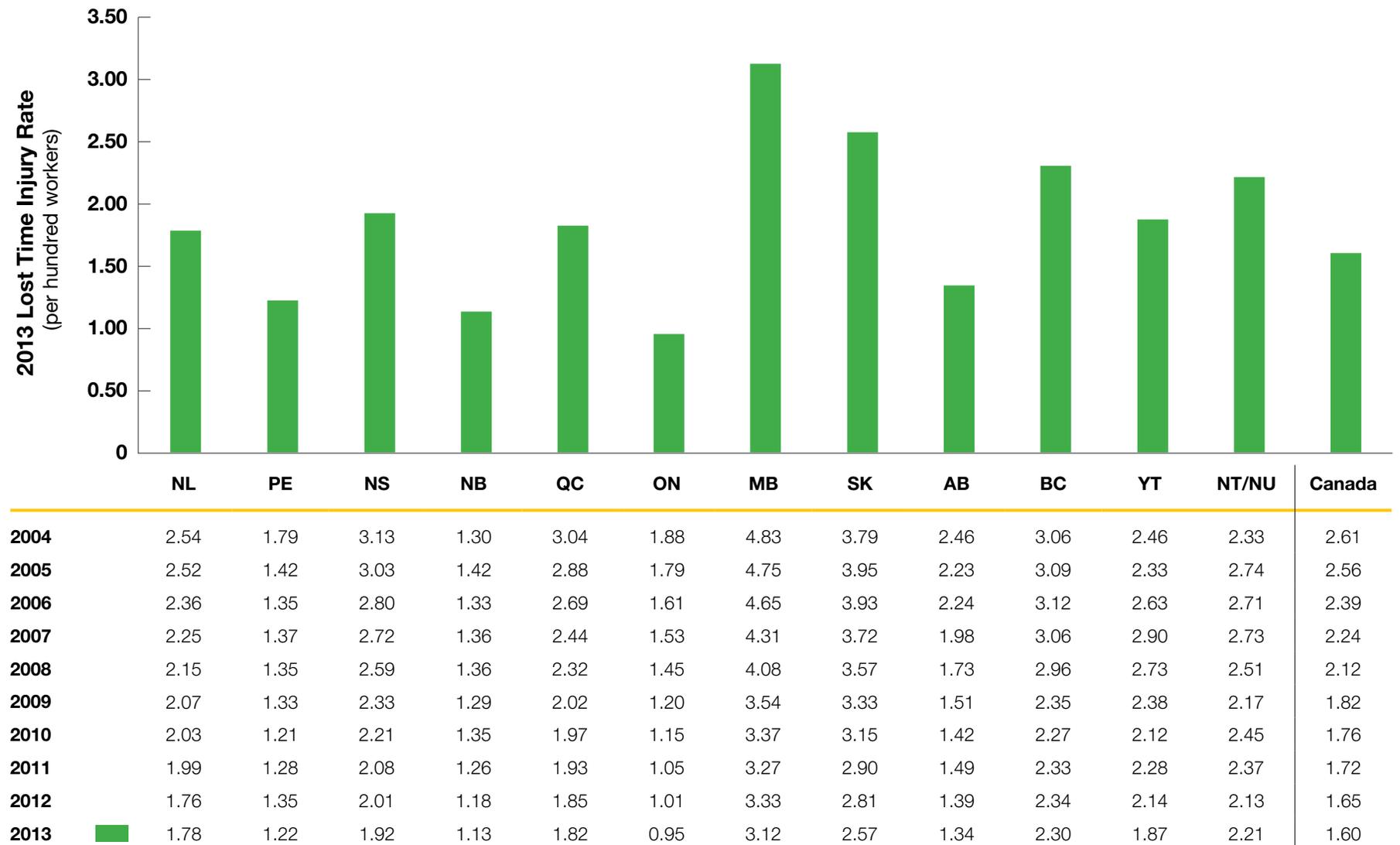


**Figure 1.2: Workplace Safety and Insurance Board Allowed No Lost Time Claims/Rate (Year of Injury/Illness)**



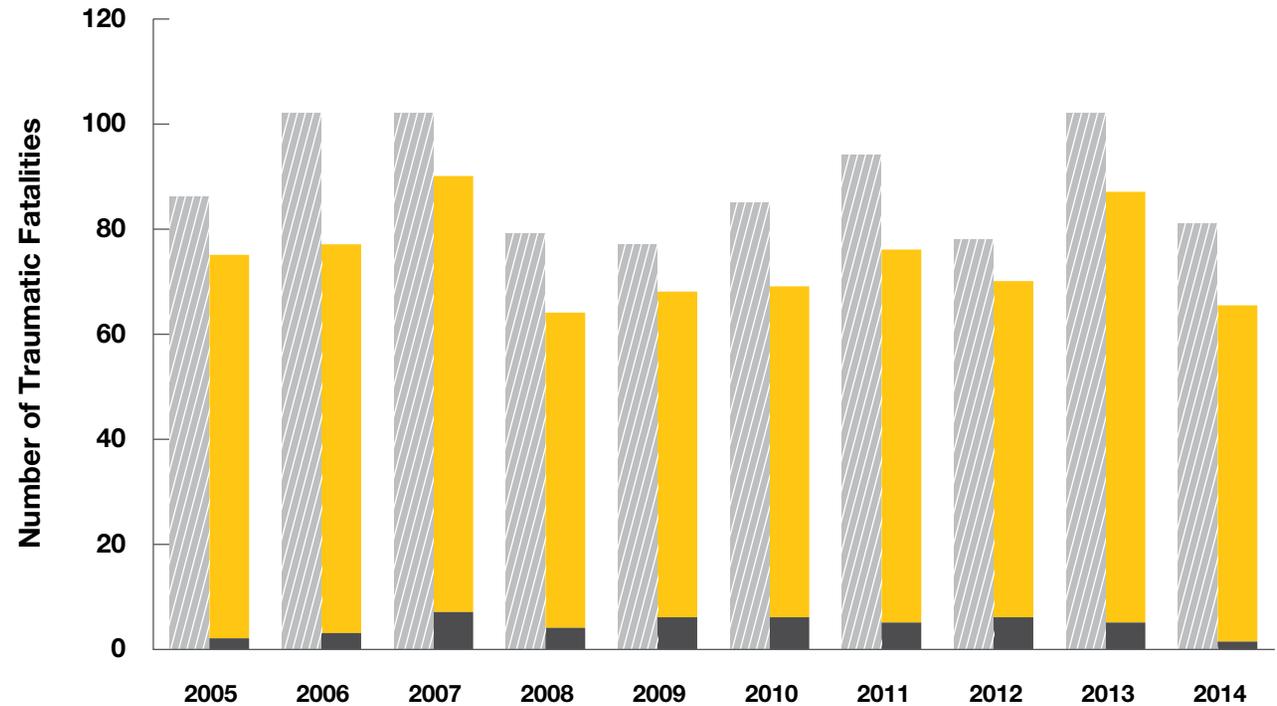
Schedule 1	<span style="color: yellow;">■</span>	167,382	157,487	152,418	144,489	115,340	108,660	108,954	109,648	110,120	110,196
Schedule 2	<span style="color: grey;">■</span>	18,355	17,816	17,220	17,182	16,503	15,192	14,721	14,371	15,208	15,328
<b>Total</b>		<b>185,737</b>	<b>175,303</b>	<b>169,638</b>	<b>161,671</b>	<b>131,843</b>	<b>123,852</b>	<b>123,675</b>	<b>124,019</b>	<b>125,328</b>	<b>125,524</b>
Schedule 1 Rate	<span style="color: black;">--</span>	4.11	3.77	3.67	3.52	2.93	2.71	2.64	2.59	2.53	2.49
Schedule 2 Rate	<span style="color: blue;">...</span>	3.11	2.93	2.80	2.70	2.36	2.16	2.12	2.07	2.18	2.22

Source: Workplace Safety and Insurance Board By the Numbers 2014, Schedule 1 and Schedule 2.

**Figure 1.3: Allowed Lost Time Injury Rate** (Provinces and Territories of Canada)

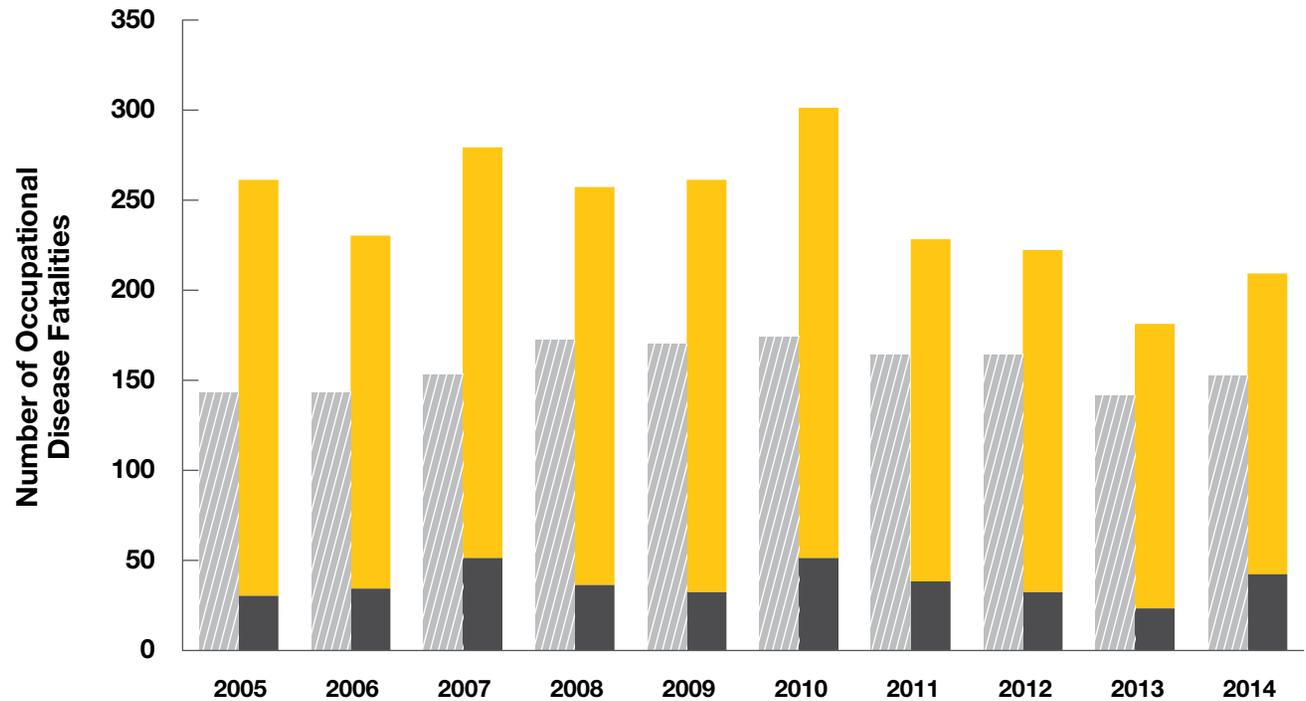
Source: Association of Workers Compensation Boards of Canada (AWCBC), accompanying notes available on AWCBC website.

**Figure 1.4: Traumatic Fatalities (Year of Death)**



Year	Schedule 1 (Year of Death)	Schedule 2 (Year of Death)	Total Workplace Safety and Insurance Board allowed Traumatic Fatalities (Year of Death)	Total Traumatic Fatalities for Ontario: Ministry of Labour & Workplace Safety and Insurance Board (Year of Death)
2005	73	2	75	86
2006	74	3	77	102
2007	83	7	90	102
2008	60	4	64	79
2009	62	6	68	77
2010	63	6	69	85
2011	71	5	76	94
2012	64	6	70	78
2013	82	5	87	102
2014	64	1	65	81

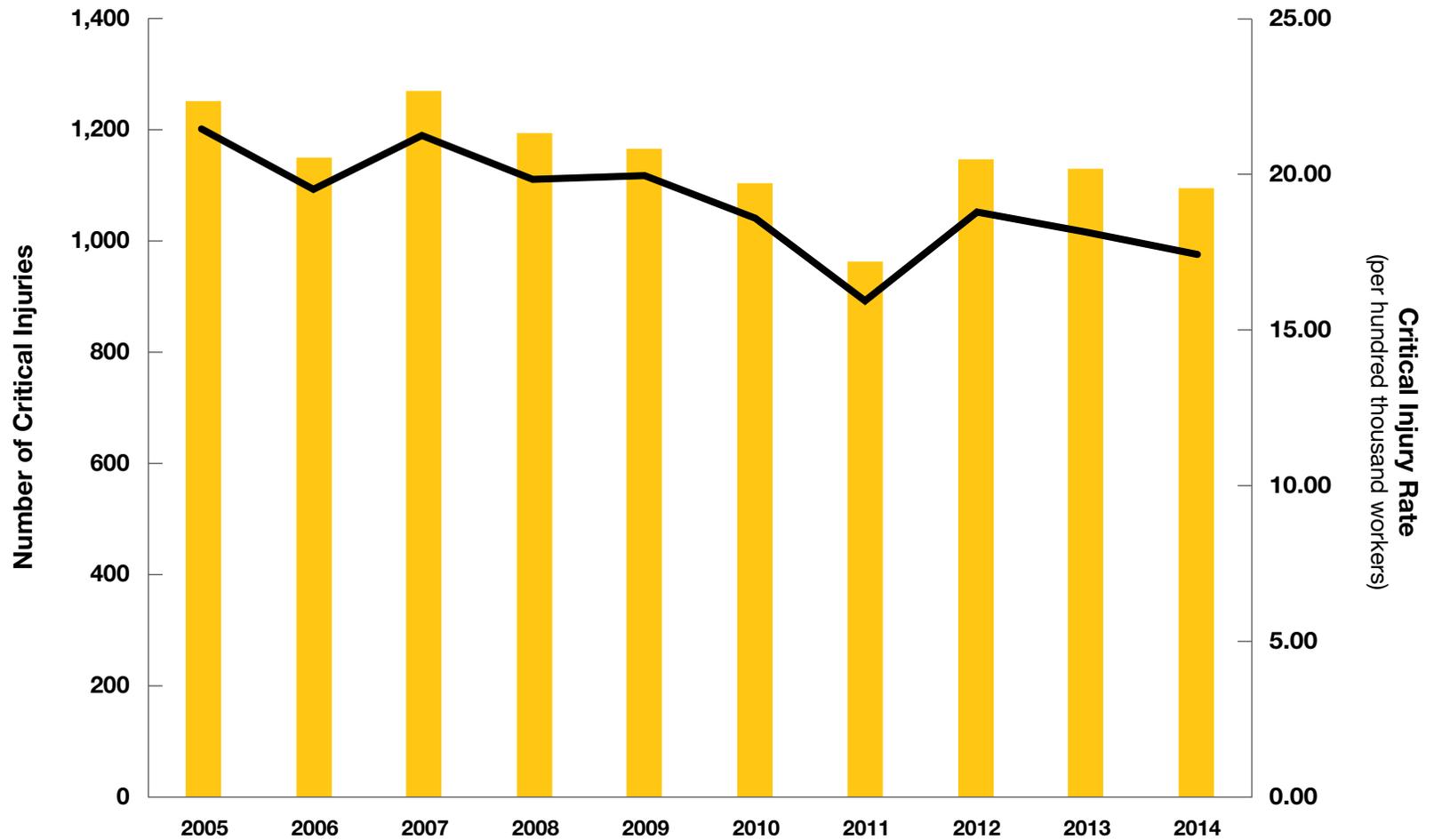
Source: Workplace Safety and Insurance Board By the Numbers 2014, Schedule 1 and Schedule 2 and Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2005-2014.

**Figure 1.5: Allowed Occupational Disease Fatalities**

Schedule 1 (Year of Entitlement)		231	196	228	221	229	250	190	190	158	167
Schedule 2 (Year of Entitlement)		30	34	51	36	32	51	38	32	23	42
Total Workplace Safety and Insurance Board Allowed Occupational Disease Fatalities (Year of Entitlement)	 + 	261	230	279	257	261	301	228	222	181	209
Total Workplace Safety and Insurance Board Allowed Occupational Disease Fatalities (Year of Death)		143	143	153	172	170	174	164	164	141	152

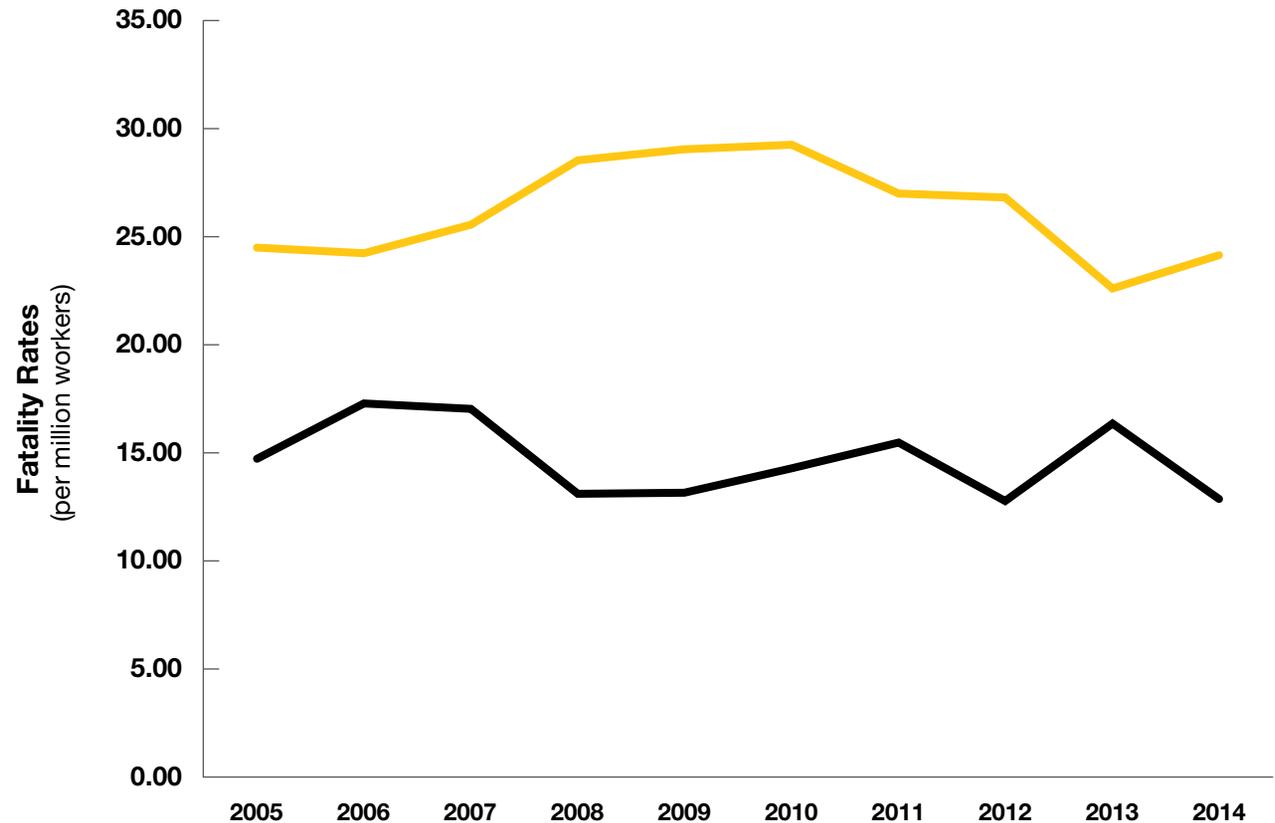
Sources: Workplace Safety and Insurance Board By the Numbers 2014, Schedule 1 and Schedule 2 and Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2005-2014.

**Figure 1.6: Ministry of Labour Reported Critical Injuries and Critical Injury Rate (Year of Injury)**



Critical injury rate		21.43	19.49	21.22	19.81	19.93	18.56	15.91	18.76	18.12	17.40
Total critical injuries		1,251	1,150	1,270	1,194	1,166	1,104	966	1,147	1,130	1,095

Source: Ministry of Labour Inspection, Compliance and Enforcement (ICE) Database: 2005-2014.

**Figure 1.7: Traumatic and Occupational Disease Fatality Rates (Year of Death)**

Traumatic Fatality Rates for Ontario: Ministry of Labour and Workplace Safety and Insurance Board (Year of Death)\*



14.73 17.29 17.04 13.11 13.16 14.29 15.48 12.76 16.36 12.87

Workplace Safety and Insurance Board Occupational Disease Fatality Rates (Year of Death)\*

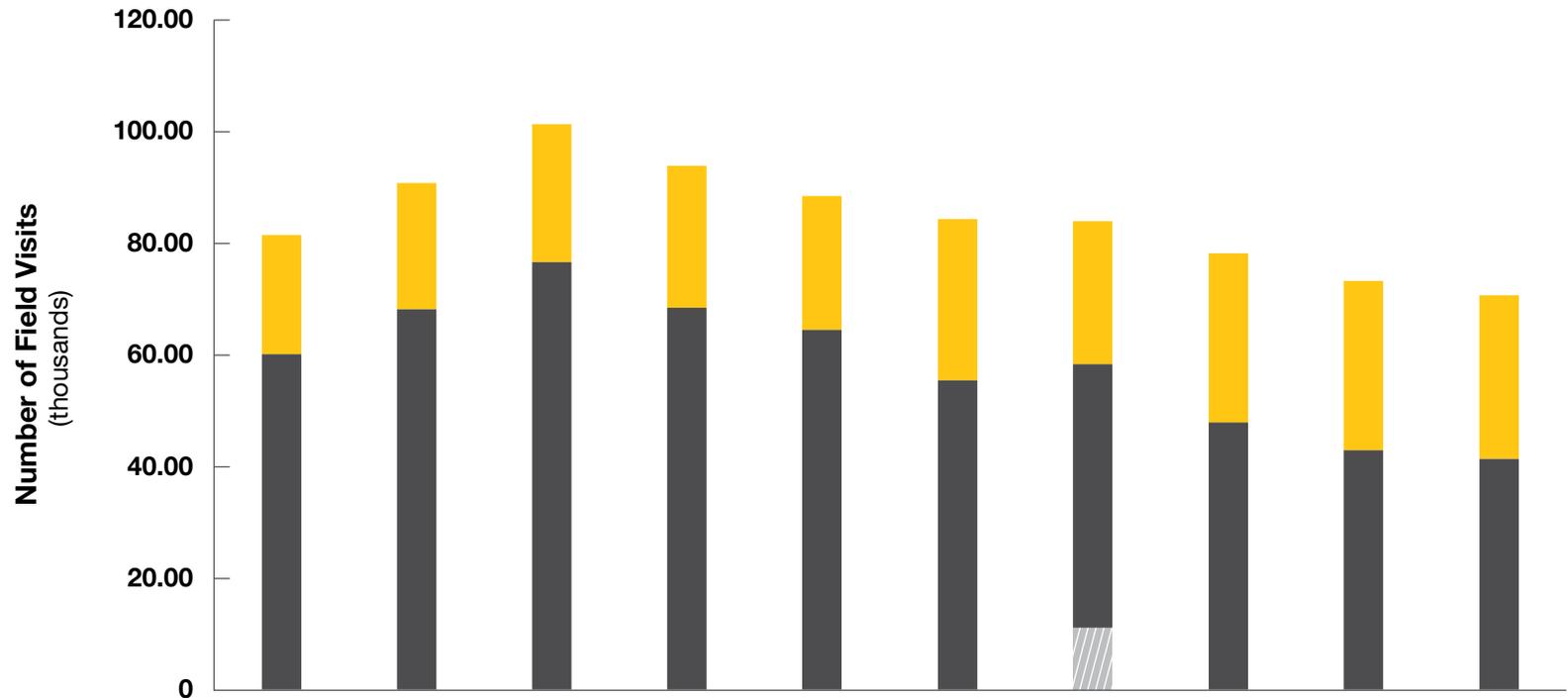


24.50 24.24 25.56 28.54 29.05 29.26 27.00 26.82 22.61 24.15

Source: Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2005 – 2014 and Ministry of Labour calculation based on Statistics Canada Labour Force Survey 2005-2014.

\* Fatality rates are calculated by the Ministry of Labour based on the number of reported fatalities divided by the number of people employed under provincial jurisdiction.

**Figure 1.8: Ministry of Labour Field Visits** (Enforcement Consultations, Inspections, Investigations)



Year		2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
Proactive	■	60,065	68,120	76,561	68,389	64,431	55,385	46,640	47,843	42,865	41,308
Reactive	■	21,346	22,609	24,714	25,430	23,979	28,881	25,613	30,521	30,339	29,296
Data not available on a proactive / reactive basis	▨	-	-	-	-	-	-	11,036	-	-	-
<b>Total</b>		<b>81,411</b>	<b>90,729</b>	<b>101,275</b>	<b>93,819</b>	<b>88,410</b>	<b>84,266</b>	<b>83,289</b>	<b>78,364</b>	<b>73,204</b>	<b>70,604</b>

Source: Ministry of Labour Data Systems, 2005-2015

## Appendix B: Glossary of Terms

**Allowed Claims** – Claims that have been accepted by the Workplace Safety and Insurance Board. Allowed claims are different than registered claims.

- **Allowed Lost Time Claim** – A lost time claim is created when a worker suffers a work-related injury/disease which results in: being off work past the day of accident, loss of wages/earnings or a permanent disability/impairment.
- **Lost Time Injury Rate** – The number of allowed lost time injury and illness claims per 100 full-time equivalent workers for the injury year specified.
- **Allowed No Lost Time Claim** – A no lost time claim results from a work-related injury where no time is lost from work other than on the day of accident, but where health care is required. The health care costs resulting from the injury are paid by the Workplace Safety and Insurance Board.
- **No Lost Time Injury Rate** – The number of allowed no lost time injury and illness claims per 100 full-time equivalent workers for the injury year specified.

**Average Annual Rate of Change** – The average of the annual percentage change each year over the period specified.

**Allowed Occupational Disease Fatality Claim** – An allowed claim for a worker who died of a work-related disease or condition.

**Allowed Traumatic Fatality Claim** – Allowed claims for workers who died of a work-related traumatic injury.

**Critical Injury** – An injury of a serious nature that places life in jeopardy, produces unconsciousness, results in substantial loss of blood, involves the fracture of a leg or arm but not a finger or toe, involves the amputation of a leg, arm, hand or foot but not a finger or toe, consists of burns to a major portion of the body or causes the loss of sight in an eye (R.R.O. 1990, Reg. 834). Critical injuries must be reported immediately to the Ministry of Labour and are tracked separately from Workplace Safety and Insurance Board lost time and no lost time injuries. Critical injury statistics are based on reports to the ministry's contact centre, which does not differentiate between provincial and federal jurisdiction. Therefore numbers may include injuries that do not meet the definition of critical injury under the Occupational Health and Safety Act.

**Critical Injury Rate** – The number of critical injuries reported to the Ministry of Labour per 100,000 full-time equivalent workers for the injury year specified.

**Employment under Provincial**

**Jurisdiction** – Ontario employment in activities covered by the Occupational Health and Safety Act. Estimates by the Ministry of Labour based on Statistics Canada Labour Force Survey. These estimates are not on a full-time equivalent basis.

**Enforcement Consultations** – Ministry of Labour inspectors advise workplace parties of their rights, duties and responsibilities under the Act, and of the policies and procedures of the ministry.

**Event** – Describes the type of incident resulting in the injury, illness or fatality.

**Fatality Rate** – The number of allowed fatality claims for traumatic and occupational diseases per one million full-time equivalent workers (based on employment under provincial jurisdiction reported to Statistics Canada). This rate is calculated by the Ministry of Labour.

**Health and Safety Association Self-Generated Revenue** – Revenue generated by the health and safety associations through the sale of occupational health and safety products and services, bank interest income and investments of future benefits funds. These revenues are reinvested into the health and safety system.

**Ministry of Labour Fatalities** – Although both the Ministry of Labour and the Workplace Safety and Insurance Board track workplace

fatalities in Ontario, each organization has a unique mandate and legislative obligations. Worker fatalities captured by the ministry are those covered under the Occupational Health and Safety Act, and then reported to and investigated by the ministry. A fatality recorded by the ministry includes an incident resulting in the death of a worker.

These fatalities exclude:

- death from natural causes
- death of a non-worker at a workplace
- suicides
- death under the jurisdiction of the Criminal Code, Highway Traffic Act and Canada Labour Code and
- death from occupational exposures that occurred many years ago.

Fatality figures captured by the ministry represent reported data and may not signify what actually occurred at the workplace.

**Occupational Disease** – An occupational disease is a health problem caused by exposure to a workplace health hazard.

**Prevention Grants** – Funding for activities that address the province's key occupational health and safety priorities. Prevention Grants allow the ministry to fund smaller unique programs

and initiatives not supported through other sources, thereby facilitating the delivery of targeted prevention programs in priority areas.

**Proactive Visits** – Inspections conducted by the ministry to monitor compliance with occupational health and safety legislation and promote the internal responsibility system.

**Reactive Visits** – Inspections conducted by the ministry typically for the purpose of investigating a fatality, critical injury, work refusal, complaint, occupational disease or other health and safety related event in the workplace.

**Registered Claims** – Registered claims for injuries, illnesses or fatalities reported to the Workplace Safety and Insurance Board in the year they occurred (as some claims are registered with the Workplace Safety and Insurance Board after the year in which the injury, illness or fatality occurred) includes all allowed, denied, abandoned and pending claims. A registered claim is different from an allowed claim.

**Small Business Health and Safety Programs (formerly Safe Communities Incentive Program-SCIP)** – The Small Business Health and Safety Programs are; Building Health and Safety Awareness for new employers and Building Your Health and Safety Program for more health and safety

sophisticated small businesses. The Building Health and Safety Awareness program provides basic health and safety education for new small businesses to create awareness of risks in the workplace and an understanding of a small business's legal requirements under the Workplace Safety and Insurance Act, 1997 and Occupational Health and Safety Act. Firms that meet the program requirements – participation in two half day in class training sessions and the creation of a health and safety action plan – are eligible to receive a five per cent rebate on their Workplace Safety and Insurance Board premiums. The Building Your Health and Safety Program further enhances health and safety awareness and helps small businesses develop an effective and successful health and safety program. Firms can receive an additional five per cent rebate after they participate in three in-class sessions and submit both a health and safety policy and a self-evaluation checklist.

**Safety Groups Program** – The Safety Groups Program recognizes employers that make it a priority to eliminate workplace injuries and illnesses. Employers who volunteer to join a safety group learn from each other's experience in implementing injury and illness prevention programs. Workplaces participating in this incentive program may receive rebates of up to six per cent of their

Workplace Safety and Insurance Board premium; four percent for meeting program requirements by successfully implementing five health and safety initiatives, one percent for reducing their injury severity rate by more than seven percent from the previous year and one percent for reducing their injury frequency rate by more than seven percent from the previous year.

**Schedule 1** – Schedule 1 employers are employers for whom the Workplace Safety and Insurance Board pays benefit compensation for workers' claims. Schedule 1 employers are required by legislation to pay premiums to the Board and are protected by a system of collective liability. Since the Board pays benefits to injured workers out of money pooled in the insurance fund, Schedule 1 employers are relieved of individual responsibility for actual accident costs.

**Schedule 2** – Schedule 2 employers are employers that self-insure the provision of benefits under the Workplace Safety and Insurance Act, 1997. Schedule 2 employers pay all benefit compensation and administration costs for their workers' claims. The Workplace Safety and Insurance Board administers the payment of the benefits for workers of Schedule 2 employers and recovers the cost of these benefits plus administration fees from the employers.

**Workplace Safety and Insurance Board Fatality** – Although both the Ministry of Labour and the Workplace Safety and Insurance Board track workplace fatalities in Ontario, each organization has a unique mandate and legislative obligations. Worker fatalities captured by the Board represent fatalities experienced by employers with coverage under the Workplace Safety and Insurance Act, 1997 and that are allowed by the Board.

**WorkWell** – The Workplace Safety and Insurance Board's WorkWell Program performs on-site health and safety performance reviews of firms when their injury experience indicates that there is a higher risk of injury at their workplace compared to other firms doing similar work. These reviews and health and safety gap analysis help workplaces identify weaknesses in their health and safety management systems.

**Year of Incident** – The year in which the workplace accident took place that led to injury or death.

**Year of Death** – The year in which a death related to a workplace incident occurred.

**Year of Entitlement** – The year in which a decision was made on a claim.



## References

1. Workplace Safety and Insurance Board, 2014. *WSIB 100<sup>th</sup> Anniversary: Helping Workers for 100 years*. Toronto: Workplace Safety and Insurance Board.
2. Occupational Health Clinics for Ontario Workers, 2015. *Annual Report 2014-2015: Celebrating 25 years of Occupational Health*. [online] Available at <<http://www.ohcow.on.ca/uploads/AboutUs/PDFs/OHCOW%20Annual%20Report%202014%20-%202015%20WWW.pdf>> [Accessed August 2015].
3. Ministry of Finance, Office of Economic Policy, 2015. *2014 Ontario Job Performance*. Toronto: Ministry of Finance.
4. Statistics Canada, 2014. *Labour force survey estimates (LFS), by sex and detailed age group, Cansim Table 282-0008*. [online] Available at: <<http://www5.statcan.gc.ca/cansim/a26?lang=eng&id=2820008>> [Accessed September 2015]
5. Workplace Safety and Insurance Board, 2014. *By the Numbers: 2014 Workplace Safety and Insurance Board Statistical Report Schedule 1*. [online] Available at: <[http://www.wsibstatistics.ca/wp-content/uploads/2015/05/WSIB\\_BTN\\_SCHED1.pdf](http://www.wsibstatistics.ca/wp-content/uploads/2015/05/WSIB_BTN_SCHED1.pdf)> [Accessed August 2015].
6. Workplace Safety and Insurance Board, 2014. *By the Numbers: 2014 Workplace Safety and Insurance Board Statistical Report Schedule 2*. [online] Available at: <[http://www.wsibstatistics.ca/wp-content/uploads/2015/05/WSIB\\_BTN\\_SCHED2.pdf](http://www.wsibstatistics.ca/wp-content/uploads/2015/05/WSIB_BTN_SCHED2.pdf)> [Accessed August 2015].
7. Association of Workers Compensation Boards of Canada, 2014. *Association of Workers Compensation Boards of Canada Online Community, KSM Report 21: Injury Frequency (per 100 assessable employers) 2004-2013, all Canadian Jurisdictions*. [online] Available at: <<https://aoc.awcbc.org/KsmReporting/ReportDataConfig/0?tempdatakey=3129bb57-d175-4957-8e29-18f92b51debf>> [Accessed August 2015].
8. Workplace Safety and Insurance Board, 2014. *Day of Mourning Fatalities Report: 2005-2014*. Toronto: Workplace Safety and Insurance Board.
9. Ministry of Labour, 2014. *Inspection, Compliance and Enforcement Database Quick Reference Guide, Quarter Four 2014-15*. Toronto: Ministry of Labour.
10. Report to the Prevention Office, Ministry of Labour, 2015. *Market Assessment of Occupational Health and Safety in Ontario*. Prepared by Prism Economics and Analysis.

11. Citizenship and Immigration Canada, 2013. *Facts and Figures 2013 – Immigration Overview: Temporary Foreign Workers, Table 3.6*. [online] Available at <[www.cic.gc.ca/english/resources/statistics/facts2013/temporary/index.asp](http://www.cic.gc.ca/english/resources/statistics/facts2013/temporary/index.asp)> [Accessed August 2015].
12. Statistics Canada, 2014. *Labour force survey estimates , by immigrant status, age group, Canada, regions, provinces and Montreal, Toronto, Vancouver census metropolitan areas, CANSIM Table 282-0102*. [online] Available at <<http://www5.statcan.gc.ca/cansim/a26?lang=eng&retrLang=eng&id=2820102&paSer=&pattern=&stByal=1&p1=1&p2=37&tabMode=dataTable&csid>> [Accessed September 2015].
13. Institute for Work and Health, 2015. *At Work, Issue 80, IWH research on vulnerable workers leads to tool for measuring risk factors*. [online] Available at <<http://www.iwh.on.ca/at-work/80/what-makes-workers-vulnerable>> [Accessed August 2015].
14. Workplace Safety & Prevention Services, 2014. *Health & Safety Awareness Sessions, Workplace Safety & Prevention Services FMS Reports*. Mississauga: Workplace Safety & Prevention Services.
15. Ministry of Labour, 2015. 2014-15 “It’s Your Job: Prevention Starts Here” video contest. [online] Available at <<http://www.labour.gov.on.ca/english/contest/winners2015.php>> [Accessed September 2015].
16. Ministry of Labour, 2015. *Our Youth at Work Association 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
17. Ministry of Labour, 2015. *Association for Workplace Tragedy Family (Threads of Life) 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
18. Ministry of Labour, 2015. *Minerva Canada Safety Management Education Inc. 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
19. Workplace Safety & Prevention Services, 2015. *First Nations Community Workshop, Workplace Safety & Prevention Services FMS Reports*. Mississauga: Workplace Safety & Prevention Services.
20. Occupational Health Clinics for Ontario Workers, 2015. *Annual Report 2014–2015: Celebrating 25 years of Occupational Health*. [online] Available at <<http://www.ohcow.on.ca/uploads/AboutUs/PDFs/OHCOW%20Annual%20Report%202014%20-%202015%20WWW.pdf>> [Accessed August 2015].
21. Infrastructure Health and Safety Association, 2015. *2014 Annual Report*. [online] Available at <[http://www.ihsa.ca/pdfs/annual\\_report/2014/ihsa-ar2014.pdf](http://www.ihsa.ca/pdfs/annual_report/2014/ihsa-ar2014.pdf)> [Accessed September 2014].
22. Statistics Canada, 2014. *Survey of Employment, Payrolls and Hours, employment for all employees, by enterprise size and North American Industry Classification System annual (persons) Canada, CANSIM Table: 281-0042*. [online] Available at <<http://www5.statcan.gc.ca/cansim/a26?lang=eng&retrLang=eng&id=2810042&pattern=&stByVal=1&p1=1&p2=37&tabMode=dataTable&csid=>>> [Accessed September 2015].
23. Workplace Safety and Insurance Board, 2014. *Small Business Traumatic Fatalities 2014*. Toronto: Workplace Safety and Insurance Board
24. Statistics Canada, 2014. *Canadian business patterns, location counts, employment size and North American Industry Classification System , national industries, by Canada and provinces, June 2014, CANSIM Table 551-0006*. [online] Available at <<http://www5.statcan.gc.ca/cansim/a26?lang=eng&id=5510006>> [Accessed September 2015].
25. Workplace Safety and Insurance Board, 2014. *Small Business Injuries in 2014*. Toronto: Workplace Safety and Insurance Board.
26. Workplace Safety and Insurance Board, 2014. *Small Business Injuries from 2005-2014*. Toronto: Workplace Safety and Insurance Board.

27. Ministry of Labour, 2015. *Health and Safety Association Year-end Reports to the Ministry of Labour 2014-15*. Toronto: Ministry of Labour
28. Ministry of Labour, 2014. *SEP Small Business Outreach Program Presentation*. Toronto: Ministry of Labour.
29. Workplace Safety and Insurance Board, 2014. *Small Business Health and Safety Information Sessions*. Toronto. Workplace Safety and Insurance Board
30. Workplace Safety and Insurance Board, 2014. *Workplace Safety and Insurance Board Program Statistics*. Toronto: Workplace Safety and Insurance Board.
31. Workplace Safety & Prevention Services, 2015. *2014-15 Workplace Safety & Prevention Services Website Reports*. Mississauga: Workplace Safety & Prevention Services.
32. Workplace Safety and Insurance Board, 2014. *2014 Traumatic Fatality Events*. Toronto: Workplace Safety and Insurance Board.
33. Ministry of Labour, 2014. *Construction Health and Safety Action Plan Consultations Report*. Toronto: Ministry of Labour.
34. Ministry of Labour, 2015. *Final Report (vol. 1) Mining Health, Safety and Prevention Review*. [online] Available at <[http://www.labour.gov.on.ca/english/hs/pdf/mining\\_final\\_report.pdf](http://www.labour.gov.on.ca/english/hs/pdf/mining_final_report.pdf)> [Accessed September 2015]
35. Workplace Safety North, 2014. *Northern Ontario Safety Group Shares in \$2.1 Million Rebate*. [online] Available at <[https://www.workplacesafetynorth.ca/news/news-post/northern-ontario-safety-group-shares-21-million-rebate?utm\\_source=Every+Worker+Dec+2014+What+clients+are+saying+about+Workplace+Safety+North&utm\\_campaign=12-2014+WSN+Every+Worker&utm\\_medium=email](https://www.workplacesafetynorth.ca/news/news-post/northern-ontario-safety-group-shares-21-million-rebate?utm_source=Every+Worker+Dec+2014+What+clients+are+saying+about+Workplace+Safety+North&utm_campaign=12-2014+WSN+Every+Worker&utm_medium=email)> [Accessed September 2015].
36. Ministry of Labour, 2015. *Radiation Safety Institute of Canada 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
37. Ministry of Labour, 2015. *Centre for Research Expertise in Occupational Disease 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
38. Ministry of Labour, 2015. *Centre for Research Expertise for the Prevention of Musculoskeletal Disorders 2014-15 Final Report to the Ministry of Labour*. Toronto: Ministry of Labour.
39. Ministry of Labour, 2015. *Working at Heights Training Provider Standard, Program Statistics*. Toronto: Ministry of Labour.
40. Ministry of Labour, 2014. *Report on the Ministry of Labour System Partner Forum*. Toronto: Ministry of Labour.
41. Ministry of Labour, 2015. *Safe At Work Ontario Consultation Report 2014-15*. Toronto: Ministry of Labour.
42. Ministry of Labour, 2014. *Report on the System Partners Canadian National Exhibition Booth, 2014*. Toronto: Ministry of Labour.
43. Occupational Health Clinics for Ontario Workers, 2015. *OHCOW CRM Database*. Toronto: Occupational Health Clinics for Ontario Workers.
44. Workers Health and Safety Centre, 2015. *2014/15 Ready to Train, Prepared for Prevention: Annual Report*. [online] Available at <<https://www.whsc.on.ca/Files/Annual-Reports/WHSC-Annual-Report-2014-2015.aspx>> [Accessed September 2015].
45. Public Services Health and Safety Association, 2015. *Public Health and Safety Association Internal Web Analytics System*. Toronto: Public Services Health and Safety Association.

46. Public Services Health and Safety Association, 2015. *Public Health and Safety Association Internal Records*. Toronto: Public Services Health and Safety Association.
47. Workplace Safety North, 2014. *2014 Mining Health and Safety Conference*. North Bay: Workplace Safety North.
48. Workplace Safety & Prevention Services, 2014-15. *Partners in Prevention Conference, Workplace Safety & Prevention Services FMS Reports*. Mississauga: Workplace Safety & Prevention Services.
49. Institute for Work and Health, 2014. *At Work, Issue 76, OHS champion has pivotal role in breakthrough change study*. [online] Available at <<http://www.iwh.on.ca/at-work/76/ohs-champion-has-pivotal-role-in-breakthrough-change-study>> [Accessed September 2015].
50. Workplace Safety & Prevention Services, 2014/2015. *Designing the Criteria for the New Canada's Best Health & Safety Culture Award Session, Workplace Safety & Prevention Services FMS Reports*. Mississauga: Workplace Safety & Prevention Services.
51. Ministry of Labour, 2015. *Summit on Work-Related Traumatic Mental Stress: Summary Report*. [online] Available at <[http://www.labour.gov.on.ca/english/hs/pdf/tms\\_summit.pdf](http://www.labour.gov.on.ca/english/hs/pdf/tms_summit.pdf)> [Accessed September 2015].
52. Ministry of Labour, 2015. *2014-15 Record of Public Inquiries made through Call Centre, WebOHS, and Prevention Box*. Toronto: Ministry of Labour.
53. Office of the Worker Adviser, 2014. *Occupational Health and Safety Act Reprisal Program SharePoint Library*. Toronto: Office of the Worker Adviser.
54. Office of the Employer Adviser, 2014. *Reprisal Assistance Statistics*. Toronto: Office of the Worker Adviser.
55. Workplace Safety North, 2014. *WSN YouTube Analytics*. North Bay: Workplace Safety North.
56. Occupational Health Clinics for Ontario Workers, 2013. *Repetitive Strain Injury Day PLUS 2014 Summary*. [online] Available at: <[www.ohcow.on.ca/uploads/SudburyClinic/RSI%20Day%202014%20summary.pdf](http://www.ohcow.on.ca/uploads/SudburyClinic/RSI%20Day%202014%20summary.pdf)> [Accessed July 2014].
57. Ministry of Labour, 2015. *What's New mailing List*. Toronto: Ministry of Labour.
58. Ministry of Labour, 2015. *Health and Safety Awareness Training for Workers and Supervisors, Program Statistics*. Toronto: Ministry of Labour.

## Data limitations in this report

### The occupational health and safety data in this report is limited:

- Some statistics, such as injuries and fatalities stated by the Workplace Safety and Insurance Board and critical injuries stated by the Ministry of Labour, may be underestimated due to underreporting or misclassified due to human or reporting error.
- Statistics recorded by the Ministry of Labour and the Workplace Safety and Insurance Board are not directly comparable. Each organization tracks incidents based on its organizational mandate and legislative obligations. For example, a fatality or injury that is reported to the Ministry of Labour may not be reported to the Workplace Safety and Insurance Board, creating differences in the number of incidents recorded.
- Some statistics may exclude certain individuals not covered under the Workplace Safety and Insurance Act, 1997.
- Statistics may be affected by a lag between the date of the incident and the assessment of whether it was work-related.
- Many factors influence workplace safety, such as societal, workforce and workplace trends. Therefore improvements in rates of occupational illness, injury and fatality cannot be attributed solely to the activities in this report.



Occupational Health & Safety in Ontario  
**2014–15 Annual Report**