



2016–17 ANNUAL REPORT

# Occupational Health & Safety in Ontario

Ministry of Labour







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# Message from the Chief Prevention Officer



**This annual report outlines some of the work done in 2016–17 to deliver on the vision, goals and priorities articulated in *Healthy and Safe Ontario Workplaces – A Strategy for Transforming Occupational Health and Safety*. Development of this strategy was led by former Chief Prevention Officer, George Gritziotis, who is now pursuing a new opportunity. His leadership significantly contributed to the achievements outlined in this report, and to the strong Occupational Health and Safety (OHS) system in Ontario that will help us meet future challenges.**

With our transformational strategy as a guide, system partners are undertaking innovative approaches on prevention awareness, training and enforcement activities. Those in the OHS system must be innovators because programs and services must keep pace with workplaces where technology is advancing, employment arrangements are changing, businesses are forming, new workers are being hired and research is uncovering new understandings of workplace harms and solutions. System partners are driven by a continuing commitment to make working in Ontario safe for all workers – while being flexible in exploring new approaches, tools and partnerships.

Changes in the economy, society and workplaces mean we are challenged to reach a wider and more diverse audience than ever before with prevention messages, and safety skills training. Yet, it's important to remember that we also have more communication channels than ever before. Occupational health and safety organizations are leveraging unprecedented opportunities to speak directly to workers, employers and all Ontarians about the importance of health and safety at work, and to deliver training in ways that are easier to access. In fact, in this report you'll read about programs and competitions that leverage the creativity and credibility of young

people in telling their own compelling stories about why safety matters to them. Mobile technology helps put safety training and information, literally, into the hands of workers and employers, when and where they need it.

It's not only in getting a message out that we have new opportunities. Access to new and better sources of data is also helping to identify solutions to longstanding challenges, and to understand emerging challenges.

This annual report also describes progress in implementing legislation, regulations and strategies that advance occupational health and safety. This includes new and continuing initiatives under the Construction Health and Safety Action Plan and the Occupational Disease Action Plan.

This report identifies strategic priorities and specific areas of focus. In each of these priorities, a combination of activities include enforcement, awareness, research and training. In many of these activities, various partners inside and outside the system are collaborating to achieve the best possible results. In the OHS system, activities are intersecting, interacting and complementing each other. Enforcement blitzes, for example, ensure the law is followed and that compliance is promoted. At the same time, others in the system use that valuable data to

see where more awareness and training may be needed. Others, in turn, look at how that training can be made more accessible. Yet more partners may consider how to evaluate the effectiveness of that training to support further improvement and additional gains in worker safety. Communicators use the online space to raise public awareness of all these resources. Those conducting research not only produce knowledge, they often engage workers and employers in gathering data, which also supports awareness. The valuable work undertaken by each of Ontario's health and safety associations drives progress in the sector they represent, and it can also pioneer new practices that the other system partners can apply in their sector.

In short, these incremental and complementary efforts create a whole that is greater than the sum of its parts. It's contributing to a growing culture of workplace occupational health and safety in Ontario. In the years ahead, we must build on the collaborative spirit and cultural approach that's been established to continue progress – so that Ontario is a place where health and safety at work is everyone's responsibility, and everyone is safe at work.

Sincerely,

**Marcelle Crouse**

*Interim Chief Prevention Officer*

# Executive Summary



**All Ontarians should be safe at work, and Ontario is making consistent progress in improving occupational health and safety. The commitment, expertise, skill and collaborative approach of Ontario's Occupational Health and Safety system (the system) ensures that research, prevention awareness and training programs reach workers and employers in a variety of ways. Their work is directed by the requirements of the Occupational Health and Safety Act (OHSA) and its associated regulations. To facilitate collaboration and deliver on the legislated mandate, *Healthy and Safe Ontario Workplaces – A Strategy for Transforming Occupational Health and Safety* identifies shared priorities and specific strategic objectives for each of those priorities.**

## Vulnerable Workers

Some workers are more vulnerable than others to injuries, illnesses and fatalities. A vulnerable worker may be a newcomer to Ontario, a temporary worker, a young person new to work or someone re-entering the workforce after many years. Factors that can make workers vulnerable in the workplace include limited language ability, informal arrangements in the “underground economy”, and precarious work. Vulnerable workers have a greater exposure to occupational hazards and limited ability to mitigate these hazards due to job and workplace factors. They may not be aware of their rights and responsibilities, have access to adequate occupational health and safety policies and procedures or feel disempowered to participate in injury prevention.

**Key statistic:** Young workers accounted for 12.7 per cent of all allowed lost-time injury claims from Schedule 1 and 2 employers.<sup>1</sup>

**Activities:** Ministry inspectors conducted 1,144 visits to 905 workplaces, and issued 3,113 orders under the OHS Act and its regulations, with a focus on new and young workers. Workplace violence and harassment accounted for 14.5 per cent (451 orders) of the orders issued. Results indicate that new and young workers continue to be exposed to hazards.

A student video contest is helping high school students learn and talk about health and safety on the job. Another competition, for postsecondary students, was won by a student who is developing a gaming application for health and safety training programs.<sup>2</sup> Other digital and social media initiatives were aimed at targeting the parents and support networks of young workers, including a dedicated health and safety website for adult influencers and a newsletter for teachers.

To reach newcomers and temporary foreign workers, the ministry has partnered with federal departments and consular officials to raise awareness of health safety rights and responsibilities in Ontario. The ministry also conducted inspections in the agriculture sector, sometimes accompanied by consular officials to help facilitate communication and prevention awareness.

## Small Business

Small businesses face unique challenges in developing effective workplace health and safety practices. They often lack the resources or knowledge to meet occupational health and safety requirements. Developing clear, accessible and low-cost resources, programs and services for small businesses will make a meaningful difference in reducing workplace injuries and fatalities.

## Address the Highest Hazards

Highest hazards are the types of work that have a greater frequency or severity of work-related injuries, illnesses or fatalities, which then become a focus of system-wide planning and action.

**Key statistic:** Small businesses employed about 29 per cent of Ontario workers but they accounted for 62 per cent of all fatalities in 2016.<sup>3</sup> Among Schedule 1 small business employers, the number of lost-time injury claims was 13,610 in 2016.<sup>4</sup>

**Activities:** Reaching small business means going into the community with messages and supports that promote and enable improved workplace safety. For example, one system partner set up a booth at 15 Home Depot locations in summer 2016 to educate small businesses about their health and safety obligations and the resources that are available to them. The Ministry of Labour sent summer students to 6,168 workplaces, distributing 4,461 kits, and receiving 3,683 completed surveys. Recognition programs are highlighting small business leadership and evaluation tools are being developed for mobile applications. To help small businesses meet the requirement to have a health and safety training representative, the system has established a working group to develop training guidelines and programs, and support will roll out in 2017–18.

**Key statistic:** In 2016, 208 people died from a work-related injury or illness in Ontario. This number includes 72 traumatic fatalities and 136 occupational disease fatalities. Over the 10-year period from 2007 to 2016, the industry sectors that accounted for the highest occupational disease fatality percentages were construction (29 per cent), manufacturing (20 per cent) and primary metals (12 per cent); the diseases with the highest occupational disease fatality percentages were mesothelioma (34 per cent) and lung cancer (29 per cent).

**Activities:** To support the Construction Health and Safety Action Plan, three blitzes were conducted. They targeted falls, mobile cranes and material hoisting, and electrical



## Address the Highest Hazards

*(continued)*

hazards. The three blitzes included 4,165 field visits. A web tool and mobile application is also providing plain-language summaries, in both official languages, on 50 key topics to help small- and medium-sized construction employers and workers understand legislative and regulatory requirements. In 2016–17, several important regulatory amendments that were suggested in the action plan regarding the use of suspended access equipment were implemented and supported with new training programs.

To improve health and safety in the mining sector, three mining sector blitzes were aimed at reducing fall hazards, promoting safe material tramming in mines and following safe work processes at mine plants. The three blitzes included 170 field visits. Regulation 854 (Mines and Mining Plants) came into effect, with requirements to identify, assess and manage the risks of workplace hazards, including water management, traffic management and the recording of seismic events. Mine rescue teams were invited to share best practices and system partners collaborated on the world's first computer simulation tool for underground mine rescue training. A new mining exposure data base contains 120,000 measurements of potentially hazardous substances in Ontario mines.

To prevent occupational disease, partners began implementing Ontario's first Occupational Disease Action Plan. An Occupational Disease Response Team has been created to improve coordination of system resources. Regulation 833 (Control of Exposure to Biological or Chemical Agents) was extended to apply to workers on construction projects to protect against hazardous exposures in their workplace. New guidelines were developed to support compliance with requirements in the Noise Regulation (O. Reg. 381/15). Regulation 860 (Workplace Hazardous Materials Information System) now incorporates international standards for workplace chemicals in Ontario.

To improve safety for workers at heights, 197,550 workers received working at heights training, an increase of 86 per cent from the previous year. The effort was supported by a radio campaign that contributed to a 335 per cent increase in visits to the Working at Heights training registration page. Inspectors visited construction, industrial and mining workplaces — with a focus on those known to have a high frequency of injuries involving falls, those where complaints have been received, those where previous incidents have occurred and those where there was a history of non-compliance. This included 3,961 field visits to 3,343 workplaces.

## Integrate Service Delivery and System-Wide Planning

When Ontario workers and employers need information and services to improve workplace health and safety, it should be easy to find, regardless of which system partner they first contact. Integrated service delivery is about ensuring that all workplaces receive accessible, affordable, consistent programs and services that meet their needs.

**Activities:** Implementing the Occupational Disease Action Plan requires a variety of partners, from both inside and outside the system, to work together. For example, partners collaborated on campaigns to raise awareness of the hazards of noise in the workplace and strategies to prevent it. A Health and Safety Index will track yearly change in Ontario's overall workplace health and safety, and will be updated annually. In addition, hundreds of instructors and worker advocates gathered at a conference focused on adult education.

## Build Collaborative Partnerships

Ontario's economy, population and workplaces are changing. This means the occupational health and safety system must continually seek new partnerships to understand the challenges, reach more workers and employers and keep pace with a changing province.

**Activities:** A distracted driving pavilion at the Partners in Prevention trade show used an interactive 400-foot driving course to show how easily drivers can become distracted by focusing on things other than the road. Regionalized fire health and safety training used existing fire department training sites across Ontario to provide accurate, consistent, certification-based training for high-hazard rescue operations in a safe, localized environment. Resource guides were designed to help primary and secondary school teachers bring health and safety education into their classrooms by identifying learning expectations in Ontario's Kindergarten to Grade 8, and Grades 9 to 12 curriculums. Regional offices of the Ministry of Labour collaborated with system partners and stakeholders to increase the impact of enforcement activities. Continued promotion of a National Day of Mourning, and the organizing of worker memorials in Ontario communities ensure remembrance of workers who have been killed, injured or suffered illness by work-related incidents.

## Promote a Culture of Occupational Health and Safety

Every Ontarian can play a role in preventing workplace injury and health impacts. An occupational health and safety culture is one where workers, employers, family members, mentors and OHS system partners share values, beliefs and attitudes. Strong internal responsibility systems (IRS) are essential to this effort.

**Key statistic:** In 2016–17, health and safety associations responded to 78,003 requests for information by phone or email – 8.9 per cent decrease from 2015–16.<sup>5</sup>

**Activities:** A pilot Climate Assessment and Audit Tool is helping workplaces to develop a full picture of organizational health and safety. The CEO Health + Safety Leadership Network developed white papers offering insight on job mindfulness, workplace mental health, and integrating health and safety into the board agenda. Rural volunteers are being trained as Stop Think Act ambassadors, a simple, effective message that was shared with thousands of farmers. A joint health and safety committee assessment tool is now being used to evaluate the effectiveness of joint health and safety committees in hospitals.

## Key Accomplishments

- In 2016, approximately 200,000 workers received the Working at Heights training in 21,420 classes offered by the approved training providers, an increase of 86 per cent from the previous year.
- Amendments to the Ontario Regulation 213/91 (Construction Projects) requirements related to the operation of suspended access equipment came into effect on January 1, 2017.
- Various amendments to Regulation 854 (Mines and Mining Plants) under the *Occupational Health and Safety Act* came into effect on July 1, 2016 and January 1, 2017. Many of these amendments implement key recommendations from the Mining Health, Safety and Prevention Review Final Report.
- The Legislature passed Bill 132, the Sexual Violence and Harassment Action Plan Act (Supporting Survivors and Challenging Sexual Violence and Harassment). The Bill made changes to the *Occupational Health and Safety Act* that came into effect on September 8, 2016.
- Effective July 1, 2016, amendments to the *Occupational Health and Safety Act* (OHSA) and Regulation 860 (Workplace Hazardous Materials Information System) came into force. These amendments incorporate international standards for workplace chemicals in Ontario set out in the Globally Harmonized System of Classification and Labelling of Chemicals (GHS).  
  
Furthermore, from April 1, 2016 to March 31, 2017, the Ministry and its system partners undertook important work which led to the following key accomplishments:
- The development of the Construction Health and Safety Action Plan scheduled for release in May 2017, which contains 16 recommendations to create a more knowledgeable, skilled sector and to increase the sector's compliance with occupational health and safety laws.
- A progress report summarizing the findings from phase one of the Workplace Violence Prevention in Health Care Leadership Table. The Leadership Table endorsed 23 recommendations as well as 13 tools and resources that hospitals can use to implement effective workplace violence prevention programs.
- Worked towards passing legislation to include amendments to the *Workplace Safety and Insurance Act, 1997*. The legislation expands the entitlement for injured workers by allowing compensation for work-related chronic mental stress.
- Ontario's health and safety system partners joined together in preparation for the first ever International Noise Awareness Day, which was held in late-April 2017.



## About this report

This report highlights April 2016 – March 2017 fiscal year activities that support the goals of the integrated strategy. It incorporates available performance data to measure progress in achieving the vision of healthy and safe workplaces. It also includes statistics for both proactive and reactive enforcement initiatives. Appendix A provides statistical charts. Appendix B provides a glossary of terms.





# 1

## A Snapshot of Occupational Health and Safety in Ontario



Snapshot: 2016

**6.99 million**

Number of workers employed in Ontario<sup>6</sup>

**6.41 million**

Number of workers employed in workplaces under provincial jurisdiction<sup>7</sup>

**76,400**

Number of Net New Jobs Created this Year<sup>8</sup>

# Fatalities: 2016

**72**  
TRAUMATIC  
FATALITIES<sup>9</sup>



**11.23**

TRAUMATIC FATALITY RATE  
(MOL & WSIB)  
(PER 1 MILLION WORKERS)<sup>12</sup>

**136**  
OCCUPATIONAL  
DISEASE FATALITIES<sup>10</sup>



**21.2**

OCCUPATIONAL DISEASE  
FATALITY RATE  
(PER 1 MILLION WORKERS)<sup>13</sup>

**208**  
TOTAL WORKPLACE  
FATALITIES<sup>11</sup>





# Injuries: 2016



**LOST-TIME INJURY CLAIMS<sup>14</sup>**

**57,368**

**LOST-TIME INJURY RATE**

(Schedule 1 Employers, per 100 workers)<sup>15</sup>

**0.94**

**LOST-TIME INJURY RATE**

(Schedule 2 Employers, per 100 workers)<sup>16</sup>

**1.96**

**ALLOWED NO LOST-TIME  
INJURY CLAIMS<sup>17</sup>**

**121,505**

**NO LOST-TIME INJURY RATE**

(Schedule 1 Employers, per 100 workers)<sup>18</sup>

**2.31**

**NO LOST-TIME INJURY RATE**

(Schedule 2 Employers, per 100 workers)<sup>19</sup>

**2.05**

**CRITICAL INJURY EVENTS  
REPORTED TO THE MINISTRY<sup>20</sup>**

**938**

**CRITICAL INJURY RATE**

(per 100,000 workers)<sup>21</sup>

**14.62**

## Ontario's Occupational Health and Safety System

To protect workers and make workplaces healthier and safer, the occupational health and safety system and its partners are working to train more workplace parties and provide clinical services for workers who have been injured or become ill.

Ontario's workers and employers require a robust system to support them in creating healthy and safe workplaces. Ontario's occupational health and safety system consists of a network of key partners – each with a unique role. The partners work together to prevent workplace injuries, illnesses and fatalities with support from other important players in the occupational health and safety system.



## Members of the Prevention Council

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

- **Patrick Dillon**  
Provincial Building and Construction  
Trades Council of Ontario  
[Labour representative]
- **Derek Johnstone**  
United Food and Commercial  
Workers Canada  
[Labour representative]
- **Daniel Bonnar**  
Ontario Professional  
Firefighters Association  
[Labour representative]
- **Dr. Andréane Chénier**  
Canadian Union of Public Employees  
[Labour representative]
- **Linda Vannucci**  
Workers' Health and Safety Legal Clinic  
[Non-union worker representative]
- **Michael Dauncey**  
Mattamy Homes  
[Employer representative]
- **Frank Saunders**  
Bruce Power  
[Employer representative]
- **Dawn Tattle**  
Employer Representative
- **Camille Quenneville**  
Canadian Mental Health Association -  
Ontario Division  
[Employer representative]
- **Erin Oliver**  
Modern Niagara Group Inc.  
[Employer representative]
- **Susana Zagar**  
Workplace Safety and Insurance Board  
[Workplace Safety and Insurance  
Board representative]
- **Dr. Graeme Norval**  
Department of Chemical Engineering,  
University of Toronto  
[Occupational health and safety expert]

# Enforcement and Prosecution



## ENFORCEMENT

	2015–16	2016–17	Change from Last Year
Number of field visits	74,795	79,849	▲ 6%
Number of workplaces visited	34,284	34,756	▲ 1%
Number of orders issued for non-compliance	127,088	118,179	▼ 7%
Number of health and safety complaints received by the Ministry of Labour	13,674	16,122	▲ 18%
Number of OHSa convictions	980	922	▼ 4%
OHSa convictions fine amounts	\$9.6M	\$10M	▲ 4%

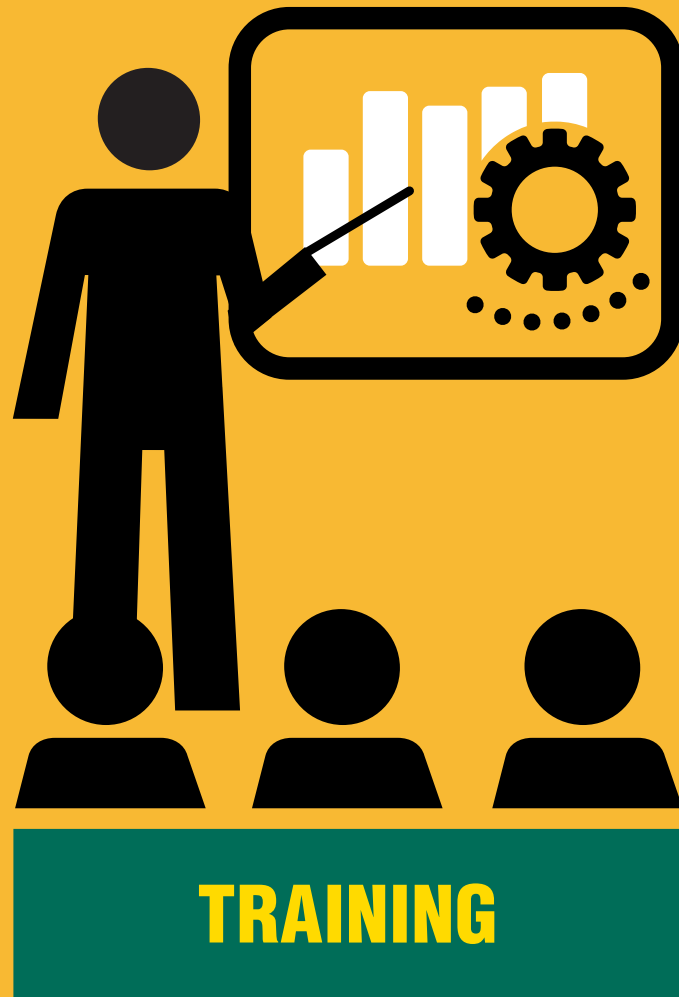
Source: Ministry of Labour Data Systems. (Accessed December 2017).

Notes:

1. Prosecution statistics are based on fiscal year 2016–2017 and include convictions relating to Part III, Part I Summons and Part I Contested Tickets prosecutions.
2. Fine amounts do not include the victim fine surcharge of 25 per cent.
3. Prosecution statistics may be subject to minor variation following disposition of outstanding appeals.



# Training and Clinical Services



	2015	2016	Change from Last Year
HSA training sessions <sup>22</sup>	34,096	137,337	▲ <b>303%</b>
Workers received clinical services	1,058	1,305	▲ <b>23%</b>
Number of workers received Working at Heights training from CPO approved training providers	106,026	197,550	▲ <b>86%</b>
Joint Health and Safety Committee part 1: Number of Learner Records	25,363	13,444	▼ <b>47%</b>
Joint Health and Safety Committee part 2: Number of Learner Records	17,209	10,113	▼ <b>41%</b>

Source: Ministry of Labour Data Systems. (Accessed December 2017)

## Research and Innovation

The Occupational Health, Safety, Prevention and Innovation Program (OHSPIP) supports workplace-focused innovation projects and collaborative partnerships. Launched in 2014, the ministry has invested over \$3 million in 24 projects. Projects target the ministry's strategic priorities by building awareness, promoting education and offering occupational health and safety tools to workplaces and communities. In 2016–17, the OHSPIP supported projects that address mental health, high hazards, and youth and young workers. The projects covered safety issues related to driving, working in nail salons, agriculture and challenges faced by young newcomers. Investing in innovative approaches to health and safety helps ensure that resources are focused on the realities of today's changing workforce, and on priorities that save lives and prevent injury.

The Research Opportunities Program (ROP) has produced evidence and solutions that are now being used in Ontario workplaces to improve occupational health and safety. Since 2013, over \$8 million has been invested in 39 projects. In 2016–17, ROP investments

addressed various strategic priorities, including the highest hazards, promoting a culture of health and safety, and preventing occupational disease. Issues studied included mining safety, the effectiveness of joint health and safety committees, protecting workers from reprisals and occupational cancer prevention. The program shares knowledge to make it more widely available, which also encourages collaboration among workplace parties and OHS organizations. Looking to the future, the program also builds research capacity by providing opportunities to students and young researchers.

# 2

## **Healthy and Safe Ontario Workplaces: Measuring Progress**









## Assist the Most Vulnerable Workers

Some workers are more vulnerable than others to injuries, illnesses and fatalities. A vulnerable worker may be a newcomer to Ontario, a temporary worker, a young person new to work or someone re-entering the workforce after many years. Factors that can make workers vulnerable in the workplace include limited language ability, informal arrangements in the “underground economy”, and precarious work. Vulnerable workers have a greater exposure to occupational hazards and limited ability to mitigate these hazards due to job and workplace factors. They may not be aware of their rights and responsibilities, have access to adequate occupational health and safety policies and procedures or feel disempowered to participate in injury prevention.

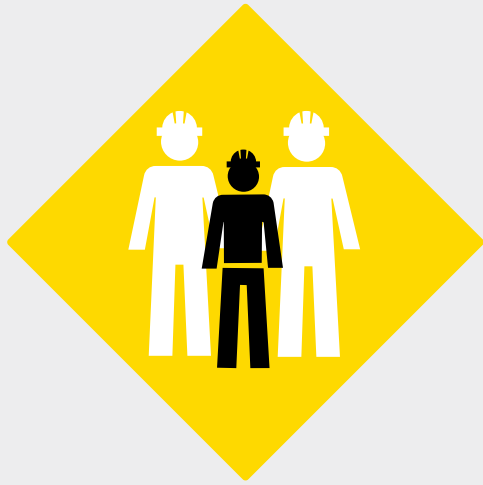
Young workers (those aged 15–24) and new workers (any age but on a job for less than six months) are a special concern. Workers who are new to a job are three times more likely to be injured during the first month on the job than more experienced workers.<sup>29</sup> With changes taking place in the population, in the economy, in technology and in business models, it is essential to protect new and young workers. The future of work and work arrangements are changing. Ontario will

always be accepting newcomers to its workforce.

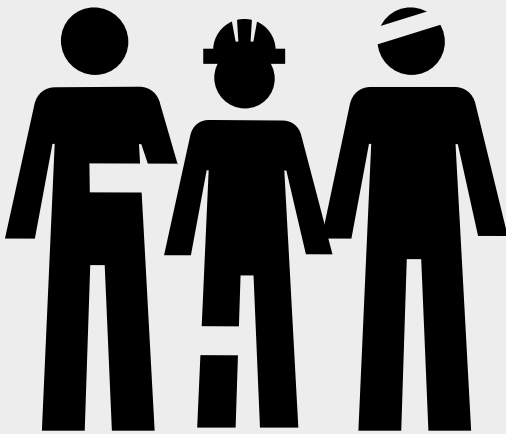
To be able to target enforcement activities and prevention programs to employers in sectors with the greatest number of vulnerable workers, the system partners must make better use of evidence and available tools. The system also continually explores new approaches to reach vulnerable workers and provide them with appropriate information and supports.

### Strategic Goals

- **Understanding.** What factors are making workers vulnerable and how can they be reached with support?
- **Action.** Strengthen programs, services and enforcement for vulnerable workers.
- **Awareness.** Ensure more vulnerable workers know their occupational health and safety rights and responsibilities.
- **Target.** Achieve better occupational health and safety outcomes in industries with high proportions of vulnerable workers.



## Performance Data Young Workers in 2016

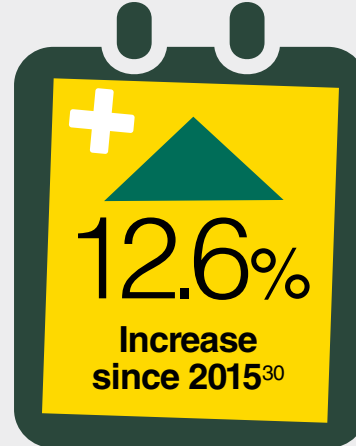
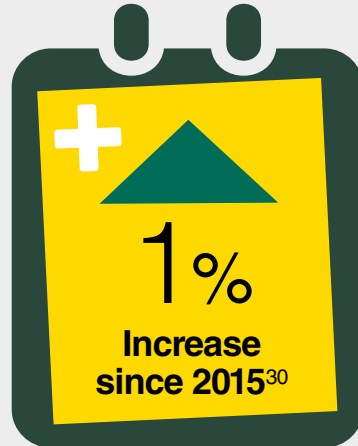


**YOUNG WORKERS  
AGES 15-24**

IN 2016

**20,450**  
NO LOST-TIME  
INJURY CLAIMS

**7,294**  
LOST-TIME  
INJURY CLAIMS



Young Workers  
accounted for

**12.7%**  
**OF ALL ALLOWED  
LOST-TIME  
INJURY CLAIMS**

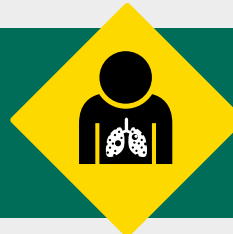
from Schedule 1 & 2  
employers<sup>31</sup>

**2016**



**4**

**TRAUMATIC FATALITIES**  
by year of death<sup>32</sup>



**0**

**OCCUPATIONAL DISEASE  
FATALITY CLAIMS**  
by year of entitlement<sup>32</sup>

## FOCUS

## Protect Young Workers

### New and young workers enforcement blitz

#### Action | Understanding

From July 18 to September 2, 2016, ministry inspectors conducted 1,144 visits to 905 workplaces and issued 3,113 orders under the OHS Act and its regulations, with a focus on new and young workers. Results included 44 stop-work orders. Workplace violence and harassment accounted for 14.5 per cent (451 orders) of the orders issued.<sup>33</sup> The blitz found that workplaces in the retail, restaurant, tourism, hospitality and recreational services sectors had the most orders of any sectors visited: 1,860 orders or 60 per cent of total orders. The blitz results indicate that new and young workers continue to be exposed to hazards. The ministry will continue to focus on the protection of new and young workers at workplaces across Ontario.

### Reaching young Indigenous workers to build skills and safety knowledge

#### Action | Awareness

IHSA partnered with Gezhtoojig Employment and Training to offer the Line Crew Ground Support program, which is based out of Cambrian College. By the end of 2016, this program has prepared approximately 75

young Indigenous workers for careers in the powerline and construction industries. About 80 per cent of the graduates are working in the field, and many have progressed into powerline apprenticeships with their employers. Students learn essential skills such as high-voltage safety, and knowing “limits of approach.”

### Engaging students early with safety knowledge

#### Awareness

The Ministry of Labour’s It’s Your Job student video contest helps high school students learn and talk about safety on the job. Students submit original, two-minute videos about the importance of working safely on the job. The videos are shared on social media. The most recent contest saw 295 young people taking part and submitting 145 videos from across the province. Funded by the Ministry of Labour and the Workplace Safety and Insurance Board, the winning entry was “Speak Out”. “Sometimes, it requires us to do things out of our comfort zone in order to bring awareness to those around us”, said Nicole Nseir, co-producer. “Harassment is not an easy subject to tackle. But, we have decided to make it the center of our video to bring awareness and be a source of help to those who may suffer from this matter. We do not always realize that ‘there is always help around!’”

## **Leveraging the skills of young people to reach new audiences**

Action | Awareness

The PSHSA launched the OHS for Young Workers Student Challenge. The competition invites Ontario's post-secondary students to submit creative solutions, resources or services that could improve health and safety training. The 2016 winner is currently developing her idea as an intern at PSHSA – a gaming application that has the potential to be integrated into health and safety training programs.<sup>34</sup>

## **Reaching out to young workers through their family, friends and teachers**

Awareness

Bring Safety Home is an internet platform launched in June 2016 to target the parents, friends, relatives and support networks of young workers who are new to the workforce. The website received 20,000 page views and 3,500 unique visits. The ministry's Live Safe! Work Smart! teacher newsletter and website provides health and safety resources for Ontario teachers. The Live Safe! Work Smart! website was visited 30,296 times in 2016–17.

## **Partnering to promote safety and skilled trades**

Understanding | Awareness

The system partners support Skills Ontario, a not-for-profit organization that promotes skilled trades and technologies with a strong focus on working safely. In 2016, the WSIB was a Platinum Sponsor of Skills Ontario, and held a contest that involved students posting pictures to their own Instagram accounts on the theme of safe work and using the #PracticeSafeWork hashtag. IHSA was a Premier Sponsor of the Skills Ontario technological skills competition, which gave students the opportunity to demonstrate skills they had learned as part of their training.

## FOCUS

# Reaching Newcomers and Migrant Workers

## Preparing for work in Ontario

### Awareness

In collaboration with the Ministry of Citizenship and Immigration and the Ministry of International Trade, MOL provides live webinars through Global Experience Ontario, an information centre for internationally trained professionals.

## Working with federal and consular partners to reach temporary workers

### Understanding | Awareness

The ministry works with partners, such as Human Resources and Skills Development Canada, and the WSIB, to share information on workers' rights and responsibilities with liaison officers from the consulates of Jamaica, Mexico, Trinidad & Tobago, Barbados and representatives from the Eastern Caribbean. This builds on the ministry's collaborative outreach activity with health and safety partners to promote awareness and empowerment for farm and agricultural workers since 2013.

## Proactive inspections in farming

### Action | Target

The Ministry of Labour conducted proactive inspections over the 2017 farming season,

focusing on operations with temporary foreign workers. Ministry of Labour inspectors worked to ensure compliance with the OHSA. On some visits, to help facilitate awareness and understanding, inspectors were accompanied by consular officials from the country of origin of many of the workers.

## Engaging newcomers and migrant workers in knowing their workplace rights and responsibilities

### Understanding | Awareness | Target

In addition to providing important services and resources to Ontario migrant farm workers and their employers, OHCOW's Migrant Farmer Program also identifies opportunities to work with other vulnerable worker communities. For example, OHCOW developed a partnership with Immigrant Services Guelph-Wellington, a settlement organization that supports newly-arrived Syrian refugees. In a workshop attended by 45 Syrian refugees, participants received an introduction to the Occupational Health and Safety Act and learned about workplace rights and responsibilities, as well as what to expect from Ontario employers and supervisors.



## Address Workplace Violence and Harassment

Amendments to the Occupational Health and Safety Act (OHSA) came into effect on September 8, 2016. The amendments enhance employer responsibilities related to workplace harassment, including sexual harassment. To help employers comply with the law, a Code of Practice to Address Workplace Harassment was created for use at all workplaces to which the OHSA applies. The Ministry of Labour also developed three new fact sheets regarding workplace harassment, which are available online. The fact sheets are respectively targeted towards workers, employers and workplace investigators. They outline the rights, responsibilities and duties under the new workplace harassment provisions of the OHSA. The fact sheets also provide information about additional resources regarding workplace harassment.

- In 2016–17, the Ministry of Labour’s Health and Safety Contact Centre received 2,506 workplace harassment complaints – or 15.5 per cent of all complaints. The number of complaints has increased by 74 per cent since 2015–16 and at an average annual rate of 11 per cent since 2012–13.<sup>35</sup>
- In 2016–17, the Ministry of Labour issued 5,796 orders when responding to workplace violence and harassment related events. Overall, the ministry issued 9,596 orders related to workplace violence and harassment under OHSA 32.0.1 – 32.0.8 – or approximately 8.1 per cent of all orders issued to workplaces.<sup>36</sup>
- The Violence and Harassment Allowed LTI claims (Schedule 1) was 1,243 in 2016 – a 14 per cent increase since 2015.<sup>37</sup>

## Keeping Health Care Professionals Safe on the Job

In August 2015, Ontario established the Workplace Violence Prevention in Health Care Leadership Table. The Leadership Table released a progress report in May 2017 and endorsed 23 recommendations as well as 13 hazard-prevention products.

The collaboration of the PSHSA, the Ministry of Labour and the Ministry of Health and Long-Term Care has resulted in the launch of [www.workplace-violence.ca](http://www.workplace-violence.ca). It provides tools and information for reducing the number of incidents and the impact of aggression, violence and responsive behaviours. There are also resources for building an effective workplace violence program. PSHSA also provides the Violence Aggression & Responsive Behaviour toolkits.<sup>38</sup>

As part of the Ministry of Labour's compliance strategy, Safe At Work Ontario, further enforcement at health care work environments began in July 2014. Acute care hospitals, some long-term care homes and community-based health care services are being inspected over three years (ending in June 2017). The initiative addresses the five most serious hazards and contributors to lost-time injuries in health care, based on 2014 WSIB data. Workplace violence is one of these hazards and accounted for 11 per cent of lost-time injuries in 2014.

## Mental Health including PTSD

The ministry and its system partners are taking steps to bring the issue of mental health in the workplace to the forefront and expand tools for workplaces in protecting Ontario's workers. These steps include creating a presumption that post-traumatic stress disorder (PTSD) diagnosed in first responders is work related. This allows for faster access to WSIB benefits, resources and timely treatment (Supporting Ontario's First Responders Act, 2016).

To support this, PSHSA developed a free online toolkit, #firstrespondersfirst. It provides resources to help understand the various stages of developing a comprehensive PTSD prevention program. The digital content has reached over 200 first responder organizations and the web page received more than 35,000 homepage views in its first year. For this effort, PSHSA was awarded the 2017 National Award for Special Projects from the Canadian Society of Safety Engineers.

On October 25, 2016, the Minister of Labour hosted a PTSD Summit, *Making Progress on Prevention*, which brought together more than 150 participants from a wide range of sectors – such as policing, fire services, emergency medical services, transit, the social services sector, corrections and health care.

Workplace Safety North introduced a new Mental Health First Aid training program, which provides a general overview of mental health. Participants learn about signs and symptoms of common problems, effective interventions and treatments, and accessing professional help. Participants receive a poster-certificate to promote wellness in their workplace.

## Support Improvements in Small Businesses

Small businesses – those with fewer than 50 workers – face unique challenges in developing effective workplace health and safety practices. It is a challenge that must be addressed. Small businesses employed about 29 per cent of Ontario workers<sup>39</sup> but they accounted for 62 per cent of all fatalities in 2016.<sup>40</sup>

A commitment to health, safety and fairness also makes good business sense.<sup>41</sup> Yet, some businesses lack the resources, knowledge or willingness to meet occupational health and safety requirements. Clear, accessible, low-cost resources, programs and services for small businesses will make a meaningful difference in reducing workplace injuries and fatalities. System partners are collaborating on various initiatives to engage and support small businesses in building their own culture of workplace safety. At the same time, the full force of enforcement is used to ensure unwilling workplaces comply with the law.

## Strategic Goals

- **Understanding.** Identify the unique workplace health and safety needs of small businesses.
- **Innovate.** Improve programs and services to meet the distinct needs of small businesses.
- **Enable.** Ensure small businesses know about occupational health and safety requirements and how to access resources.
- **Advocate.** Make the business case for occupational health and safety.



## Performance Data Small Businesses

Small businesses employed

about

**29%** of Ontario workers<sup>42</sup>

**BUT ACCOUNTED FOR —**

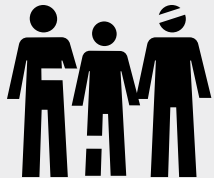
**62%** of all fatalities in 2016



**From 2007 to 2016**

Small businesses accounted for

**63%** of all traumatic fatalities<sup>43</sup>



Among **Schedule 1** small business employers, the number of **lost-time injury claims** was

**13,600 in 2016**<sup>44</sup>



Workplace Safety North, Infrastructure Health and Safety Association, Workplace Safety and Prevention Services, Occupational Health Clinics for Ontario Workers and Public Services Health and Safety Association collectively **engaged over 10,100 small businesses in their programs and services – down by 15 per cent from the previous year**<sup>45</sup>

**687** businesses successfully completed the **WSIB's Small Business Building Your Health and Safety Program.**

**wsib  
cspa**  
ONTARIO



provided a total of

**\$948,573**

**in rebates** to small businesses that made occupational health and safety improvements in their workplaces

## Engaging small business owners in the community

Understand | Innovate

The IHSA set up a booth at 15 Home Depot locations during the summer of 2016 to educate small businesses about their health and safety obligations and the resources that are available to them. They connected with 671 individuals in the general contracting, carpentry, drywall, electric, and landscaping industries. IHSA also ran radio campaigns aimed at small businesses. The campaign was supplemented by a new web page and campaigns on Kijiji to drive traffic to online occupational health and safety resources for small businesses.

## Reaching out to small businesses

Understand | Enable

During the Small Business Outreach project in the summer of 2016, Ministry of Labour summer students visited 6,168 workplaces. They distributed 4,461 kits containing ministry posters and information to help employers comply with health and safety legislation. During the visits, small business owners and managers completed 3,683 surveys, which assessed their familiarity with three key issues: awareness training, workplace harassment

requirements and dealing with ergonomics in the workplace. Results will help in improved communications on OHS to small businesses.

## Awarding excellence in safety

Advocate

The WSIB introduced a new recognition program called the Small Business Health and Safety Leadership Awards. Small businesses registered with the WSIB are invited to self-nominate to win a financial award based on their leadership and commitment in health and safety.

## Mobile Workwell evaluations

Innovate | Enable

The WSIB's Workwell Evaluation tool helps business assess their health and safety management system including return-to-work practices and procedures. Workwell's on-site collaborative model encourages companies to make necessary improvements to their Health and Safety Management System including Return to Work programs, which can significantly improve prevention of injuries, illnesses and fatalities. Now, they are developing a mobile version of the evaluation that will be available to all employers, not just those engaged in the Workwell program. This will allow any business to be self-

sufficient in evaluating their health and safety management systems and their return to work programs.

## Training health and safety representatives

Enable

The OHSA requires workplaces with 6–19 workers to have a health and safety representative (HSR). However, there are no specific training requirements for HSRs. In December 2016, the Ministry of Labour established a Working Group in collaboration with the HSAs and WSIB to develop and implement HSR training guidelines and programs. These supports will roll out in 2017–18 to enable the training of health and safety representatives in small businesses.

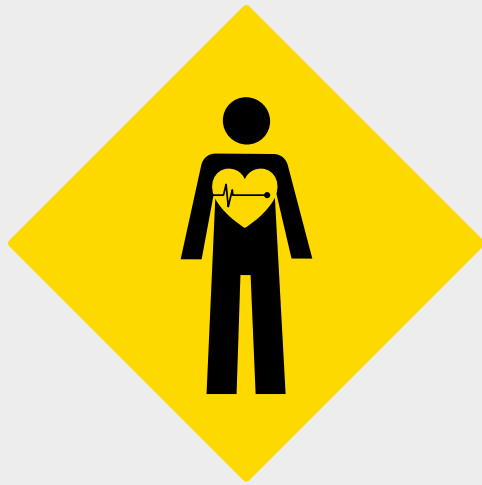


## Address the Highest Hazards

Some types of work have a greater frequency or severity of work-related injuries, illnesses or fatalities. These are known as high-hazard activities. The ministry and its partners work together to identify the leading causes of injuries, illnesses and fatalities in Ontario. These leading causes, or high hazards, then become the focus of system-wide planning and action. The system uses training, research and regulatory efforts to address hazards that are becoming more prevalent in certain sectors, or in activities across sectors.

## Strategic Goals

- **Leverage evidence.** Improve the use of data, information and research to identify activities with the greatest risks.
- **Elevate performance.** Develop additional rigorous training standards for specific high hazard work.
- **Target high needs.** Co-ordinate and focus resources on high-risk hazards, conditions of work with the highest rates of injury, illness and/or fatalities.



# Performance Data Highest Hazards

IN YEAR 2016

**208** WORK-RELATED DEATHS IN ONTARIO



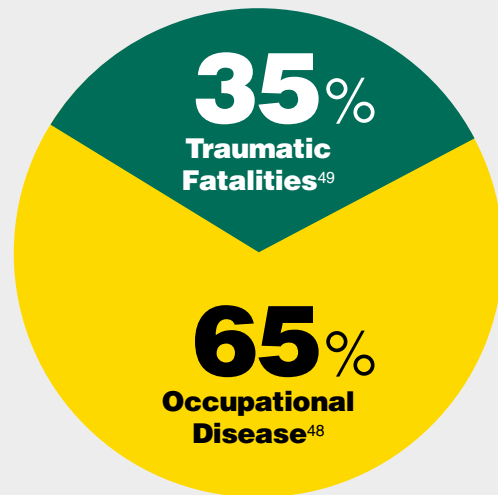
**72** Traumatic Fatalities<sup>46</sup>



**136** Occupational Disease Fatalities<sup>47</sup>

2007–2016

**2,422**  
TOTAL FATALITIES



## TRAUMATIC FATALITIES

**SCHEDULE 1:** The following industry sectors and events accounted for the highest traumatic fatality percentages

### Industry Sectors



**29%**  
Construction



**24%**  
Transportation



**12%**  
Services

### Events



**36%**  
Motor Vehicle Incidents



**18%**  
Falls



**13%**  
Struck By/Caught in Objects<sup>50</sup>

## OCCUPATIONAL DISEASE FATALITIES

**SCHEDULE 1:** The following industry sectors and disease types accounted for the highest occupational disease fatality percentages

### Industry Sectors



**29%**  
Construction



**20%**  
Manufacturing



**12%**  
Primary Metals

### Diseases



**34%** Mesothelioma  
**29%** Lung Cancer<sup>51</sup>

## Risk management workshops

To focus resources on high-risk hazards, the ministry takes a risk-based approach. As part of this approach, the ministry launched a risk assessment initiative and conducted workshops with system and industry expert stakeholders to identify, assess and mitigate the risks across the sector under review. The results from each risk assessment workshop are incorporated into occupational system planning.

The workshop results include:

**Falls from heights:** Falls above and below three metres or slips and trips were identified as a common high-risk hazards through all of the sector risk assessments. As a result, the system took a robust and direct approach to address fall hazards.

**Hospitals:** The hospital risk assessment workshop identified workplace violence as one of the sector's top high-risk hazards. To address violence in healthcare with an initial focus on nurses in hospitals, the Ministry of Labour and Ministry of Health and Long-Term Care established a Minister's Leadership Table.

**Mining:** The mining risk assessment identified several high-risk hazards, which led to regulatory changes. This included a requirement for employers to conduct an annual risk assessment, and to develop workplace tools. Causal analysis by the Mining Legislative Review Committee

will focus on four high-risk themes – ground control, mobile equipment, water management and occupational disease.

**Greenhouses (Flowers & Vegetables):** In the agriculture/horticulture sector, there was buy-in for the risk assessment process from the Technical Advisory Committee. System and industry stakeholders are moving towards conducting a causal analysis related to a high-risk hazard.

**Sawmills:** Within the forestry sector, a recently completed risk assessment identified substance abuse as the top risk. Key stakeholders in the forestry sector unanimously agreed on a detailed causal analysis for substance abuse in the sawmills sector.<sup>52</sup>

## FOCUS

# Ontario's Construction Health and Safety Action Plan

On May 11, 2017, Ontario released the Construction Health and Safety Action Plan (CHSAP). The plan contains 16 recommendations to create a more knowledgeable, skilled sector and to increase the sector's compliance with occupational health and safety laws. Initiatives and recommendations identified in the action plan have already been acted upon.

## OHS information at worker's and employer's fingertips

Elevate performance | Leverage evidence

The Infrastructure Health and Safety Association and the Canadian Centre for Occupational Health and Safety developed a web tool and mobile application that provides plain-language summaries, in both official languages, on 50 key topics related to OHS regulation for construction projects. This resource will help small and medium-sized construction employers and workers understand legislative and regulatory requirements.

## Blitzes at construction sites across Ontario

Target high needs

Three blitzes were conducted in 2016–17, which aimed at falls, mobile cranes and material hoisting, and electrical hazards. During these blitzes, ministry inspectors conducted 4,165 field visits. Detailed results are available in the Ministry of Labour report, *Occupational Health and Safety Enforcement April 2016 – March 2017*.

## Suspended access equipment

Target high needs | Elevate performance

In 2016–17, several important regulatory amendments from the action plan were implemented. For example, amendments to O. Reg. 213/91 (Construction Projects), strengthen and clarify requirements in using suspended access equipment, including:

- Notifying the ministry prior to putting suspended access equipment into service for the first time at a project;
- Roof plans and site-specific work plans;
- Training for workers who may use or inspect suspended access equipment;
- Enhanced design, operational, technical and engineering requirements; and
- Strengthened and enhanced inspection, testing and maintenance.

To support the implementation of these changes, the IHSA launched a new suspended access equipment training program. It focuses on those who use suspended work platform systems or powered boatswain's chairs after they have been set up and installed by others. The ministry also produced a technical guideline for suspended access equipment on construction projects.

FOCUS

# Improving Health and Safety in the Mining Sector

Ontario's mining sector is a vital part of the province's economy. It creates many direct and indirect jobs.

Underground mining has a range of unique health and safety hazards. Operations are becoming increasingly dependent on technology, which presents new challenges. While Ontario's mining sector is one of the safest in the world, there is always room for improvement.<sup>53</sup>

## Mining sector blitzes

Target high needs

In 2016–17, Ontario conducted three mining sector blitzes aimed at reducing fall hazards, promoting safe material tramming in mines and safe work processes at mine plants. During these blitzes, ministry inspectors conducted 170 field visits. Detailed results are available in the Ministry of Labour report, *Occupational Health and Safety Enforcement April 2016 – March 2017*.

## New requirements under Regulation 854

Leverage evidence | Elevate performance

As of January 1, 2017, new requirements are helping to protect the health and safety of workers in mines and mining plants. Amendments to Regulation 854 include new requirements to identify, assess and manage the risks of workplace hazards. A written water management program is also now required, as well as a written traffic management program. There are also enhanced requirements regarding recording of seismic events.

## Inviting the world's best rescue teams to learn from each other

Elevate performance | Leverage evidence

Workplace Safety North and Ontario Mine Rescue hosted 27 mine rescue teams representing 13 nations for the 10th International Mines Rescue Competition in Sudbury. Since 1999, the competition has enabled nations to share best practices and learn from each other.

Workplace Safety North and Ontario Mine Rescue also collaborated with Northern Centre for Advanced Technology Inc. (NORCAT) to create 'Ferdeno', the world's first computer simulation tool for underground mine rescue training. It allows users to experience what it's like to be a virtual mine rescue responder and could be marketed more broadly to video game players to promote play-based learning as a tool for raising awareness of workplace safety.<sup>54</sup>

## New database for exposure to potentially hazardous substances

Leverage evidence

The Occupational Cancer Research Centre created an Ontario mining exposure data base. It contains 120,000 measurements of potentially hazardous substances in Ontario mines. The database will help examine past trends in mining exposures and evaluate the impact of historical interventions on exposure levels.



## FOCUS

# Prevent Occupational Disease

Overexposure to hazardous substances can cause occupational disease. Deaths from occupational disease have outpaced traumatic workplace fatalities over the past ten years. For example, in 2016, there were 136 allowed occupational disease fatalities compared to 72 traumatic fatalities. That is why it is a priority of the Ministry of Labour to treat occupational diseases with the same seriousness and importance as physical injuries, to target hazardous workplace exposures and to make a difference.

## Occupational Disease Action Plan is building momentum

Leverage evidence | Target high needs | Elevate performance

Implementation of Ontario's first Occupational Disease Action Plan began in 2017. The effort was chaired by OHCOW and the MOL Prevention Office and involved highly committed health and safety system and healthcare partners.

To recognize International Noise Awareness Day in April, IHSA, the ministry and other system partners coordinated communications to raise awareness of the hazard of noise. Noise-induced hearing loss is the most common occupational disease suffered by workers in Ontario. Products included a video, social media campaign, network communications and an increasing web-presence to reach as many workers and employers as possible.

OHCOW's annual symposium on Occupational Health & Disease Prevention – "Occ-tober" focused on the action plan. Priorities in the plan, such as noise and diesel were integrated into other system conferences around the province for example, the WSN's Mining Health and Safety Conference & WSPS's Partners in Prevention.

As part of implementing the action plan, new resources on the hazards and prevention of diesel exhaust were developed for the mining sector by the Occupational Cancer Research Centre and WSN. Resources on diesel exhaust in other sectors are being developed as well.

To further the goals of the plan, MOL is now seeking partnership with the Ministry of Health and Long-Term Care to support the inclusion of occupation data in medical records.

## Occupational Disease Response Team

Leverage evidence | Target high needs | Elevate performance

In 2017, the ministry identified an opportunity to strengthen the response to occupational disease issues by improving the coordination of system resources through an "Occupational Disease Response Team". This new occupational disease response team will examine and respond to all aspects of occupational disease from initial reports, to enforcement, to helping workers file WSIB claims.

## Occupational Exposure Limit Updates

### Leverage evidence

Occupational Exposure Limits (OELs), set out in Regulation 833, help prevent occupational diseases by restricting the amount and duration of a worker's exposure to such hazardous chemical substances as asbestos, benzene and lead. The Ministry of Labour's process for regularly updating Ontario's OELs has been in place since 2004. This regular review process ensures that OELs are continually reviewed and updated.

Regulation 833 has applied to various workplaces, such as mines and industrial projects, for many years. However, construction projects were exempt from the requirements of this regulation. As of July 1, 2016, this regulation was extended to apply to workers on construction projects. This is an important development to strengthen the protections for construction workers against hazardous exposures in their workplace.

## New MOL Noise Guideline

### Elevate performance | Target high needs

Regulation 381 requires employers that fall under Ontario's OHS Act to take all measures reasonably necessary to protect workers

from exposure to hazardous noise levels. MOL released a new guide to the Noise Regulation (O. Reg. 381/15) in December 2016. This guide provides information and assistance to Ontario's constructors, employers and other workplace parties in complying with the requirements in the regulation.

## Workplace Hazardous Materials Information System

### Elevate performance

The Globally Harmonized System Classification and Labelling of Chemicals ensures that the labels, safety data sheets, and classifications used for hazardous products can be recognized and understood across borders. As of July 1, 2016, amendments to the Occupational Health and Safety Act (OHS Act) and Reg. 860 (Workplace Hazardous Materials Information System) now incorporate these international standards for workplace chemicals in Ontario.

## FOCUS

# Improve Safety for Workers at Heights

## Working at heights training

### Elevate performance

The Occupational Health and Safety Awareness and Training Regulation (O. Reg. 297/13) requires employers to ensure that workers on construction projects who use specified methods of fall protection successfully complete a Working At Heights training program. The program must be approved by the Chief Prevention Officer (CPO) and must be delivered by a training provider approved by the CPO. Between April 1, 2016 and March 31, 2017, approved training providers offered 21,420 classes, up 86 per cent from the previous fiscal year. In this period, 197,550 workers received the training, an increase of 86 per cent from the previous year. As of March 31, 2017, 303,576 learners have been trained.

## Radio advertising to drive training

### Elevate performance | Target high needs

In February 2017, IHSA launched an advertising campaign to drive the message that construction workers who use travel-restraint or fall-arrest systems are required to complete a Working at Heights training program. The campaign centred on radio spots that aired on regional stations across the province. During that period, there was an increase of 335 per cent in visits to the Working at Heights training registration page — 15,116 page views compared to 3,477

for the same period in the previous year. From the launch of the Working at Heights standard to April 2017, IHSA and its associate training partners delivered IHSA's Working at Heights training to over 107,000 workers.

## Enforcement in workplaces

### Target high needs

From May 16 to July 15, 2016, MOL inspectors visited construction, industrial and mining workplaces across Ontario where workers could be at risk of falls. They targeted workplaces known to have a high frequency of injuries involving falls, where complaints have been received, where previous incidents have occurred and where there was a history of non-compliance. During this period, ministry inspectors conducted a total of 3,961 field visits to 3,343 workplaces. Inspectors issued a total of 10,321 orders under the OHSA and its regulations, including 653 stop work orders.

## Commitment from partners

### Elevate performance

The Workers Health and Safety Centre helped workers receive improved access to potentially life-saving Working at Heights training. As such, they also honoured their commitment of worker job security by delivering training to any worker who needed it. Since the new regulation came into force, the centre has trained 79,042 workers in their ministry-approved program.

## Integrate Service Delivery and System-Wide Planning

When Ontario workers and employers need information and services to improve workplace health and safety, it should be easy to find, regardless of which system partner they first contact. Integrated service delivery is about ensuring that all workplaces receive accessible, affordable, consistent programs and services that meet their needs. System partners work together to make it easier for everyone to access the system and understand legislative and regulatory requirements - with a variety of tools and approaches such as awareness, education, compliance and enforcement. More collaboration among system partners means information and resources reach more people, which ultimately results in Ontarians returning home from work safe and healthy.

### Strategic Goals

- **Access.** Improve client experience and access to services.
- **Efficiency.** Clarify roles of system partners and the services they provide.
- **Effectiveness.** Strengthen system partners' capacity to track their performance and be accountable.
- **Integration.** Increase integrated planning among all system partners.

## Collaborating and crowdsourcing on noise exposure

[Effectiveness](#) | [Integration](#) | [Access](#)

Developing and implementing the Occupational Disease Action Plan relies on internal and external collaboration. For example, technical and communications experts from across the system worked together on “Avoid Noise”, a coordinated campaign to raise awareness of noise-induced hearing loss and other disorders that can have a devastating impact on the health and well-being of those affected.

In a related effort, to gather realistic exposure information, OHCOW developed a new noise level crowd-sourcing application. This tool rates noise measurement phone apps, then encourages users to upload their levels to document real worker experience. This allows users, and the system, to compare their results with other workplaces, taking collaboration to a whole new scale that also engages workers and other users of the app.

## Online hearing tests to reduce impact of noise-induced hearing loss

[Access](#)

To encourage awareness and help reduce the impact of noise-induced hearing loss, WSIB launched a campaign aimed at males aged 20–40 in January 2017. It reached almost 36.5 million impressions between January 16 and February 28, 2017. This included close to 9 million video views, 300,000 website views and 7,000 online hearing tests.

## Noise Induced Hearing Loss

Noise Induced Hearing Loss (NIHL) is a permanent loss of hearing, usually in both ears, resulting from inner ear damage due to prolonged, continuous or intermittent hazardous noise exposure. It is the only type of hearing loss that’s completely preventable.

Between 2006 and 2015, almost 30,000 people – close to the population of Orillia, Ontario – had an allowed Noise Induced Hearing Loss (NIHL) claim. This accounted for about 23 per cent of all allowed occupational disease claims.

*Source: WSIB.*



## **Strengthening the system's capacity to track its performance**

### **Efficiency | Effectiveness**

WSIB has developed a new tool, the Health and Safety Index, to measure yearly change in Ontario's overall workplace health and safety. It will be updated annually and help the system to identify areas in need of focus. The methodology behind the index was released in spring 2017, coinciding with North American Occupational Safety and Health (NAOSH) week. The first set of results for the index will be released during NAOSH week in May 2018.

## **Sharing, listening and learning to improve training and safety**

### **Access | Integration**

The Workers Health & Safety Centre hosted a conference in June 2016 to discuss the continuing need for high-quality training through a focus on adult education principles. Attended by some 100 WHSC-qualified instructors and worker advocates, conference participants identified the challenges and solutions for achieving this important goal.

WHSC also maintained their extensive catalogue of training programs. This included revising programs that meet growing demand from worker representatives and clients for equipment operator training that helps workers meet competency requirements under the Occupational Health and Safety Act. Moreover, using a variety of media channels, WHSC informed worker representatives and clients of emerging research, changes to health and safety laws and essential resources.

## Build Collaborative Partnerships

Ontario's economy, population and workplaces are changing. This means the occupational health and safety system must continually seek new partnerships to understand challenges, reach more workers and employers and keep pace with the reality of workplaces. The associations and networks that workers and employers engage with can be valuable partners for the OHS system. In 2016–17, the system built and expanded new and stronger partnerships that can help reach a wider audience and promote system resources as well as to solicit feedback and advice. Partnering with other ministries also helped in sharing intelligence and enhancing enforcement efforts.

## Strategic Goals

- **Reach.** Use existing and new partnerships to reach a wider audience and promote system resources.
- **Share.** Partner with other ministries and levels of government to share intelligence and enhance enforcement efforts.
- **Expand.** Increase engagement with partners within and outside the system.

## **Distracted driving pavilion**

[Reach](#) | [Expand](#)

Workplace Safety and Prevention Services worked with the Ministry of Transportation and the Ontario Provincial Police to create a Distracted Driving Pavilion at the Partners in Prevention trade show. The interactive 400-foot driving course demonstrates how easily drivers can become distracted by focusing on things other than the road. Additional stakeholders involved in the pavilion included the Worker Road Safety Reference Group, Ontario Provincial Police, Canadian Pro Drivers, CAA South Central, Teens Learn to Drive and Arrive Alive Drive Sober.<sup>56</sup>

## **High hazard training for fire services**

[Share](#)

PSHSA teamed up with the Ontario Association of Fire Chiefs and the Fire Service Regional Training Centers to improve access to training, centralize services and revise high-hazard curriculum for the fire service in Ontario. Regionalized fire health and safety training uses existing fire department training sites across Ontario to provide accurate, consistent, certification-based training for high-hazard rescue operations in a safe, localized environment.<sup>57</sup>

## **Curriculum resource guides for K-12**

[Reach](#) | [Share](#)

The Ministry of Labour partnered with the Ministry of Education to publish resource guides, called Health and Safety: Scope and Sequence of Expectations. Released in April 2017, the resource guides are designed to help primary and secondary school teachers bring health and safety education into their classrooms by identifying learning expectations in Ontario's Kindergarten to Grade 8, and Grades 9 to 12 curriculums. The guides aim to support teachers in developing knowledge and skills related to health and safety (injury prevention and health protection), safe behaviours and safe practices.

## **Regional partnerships to increase the impact of enforcement**

[Reach](#) | [Expand](#)

The regional offices of the Ministry of Labour regularly collaborate with system partners and stakeholders to increase the impact of enforcement activities. For example, the ministry partnered with Marble Institute of America and the WSPS for a year-long initiative targeting marble and granite shops. For the Landscapers and Snow Removal Services Initiative, the ministry partnered with

Landscape Ontario and Workplace Safety and Insurance Board, which contacted their stakeholders and arranged training sessions. The ministry also prepared for the Finishing Trades initiative by working with the Interior Systems Contractors Association of Ontario to organize a tour of their training facility for ministry inspectors prior to the initiative.

## **National Day of Mourning**

[Reach](#)

Every year on April 28 on the National Day of Mourning, Ontarians pay respects and remember the thousands of workers who have been killed, injured or suffered illness as a result of work-related incidents, and honour the families and friends who have been deeply affected by these tragedies. WHSC helps promote the Day of Mourning events through communications in newspapers, brochures, fact sheets, armbands, speakers' notes, e-bulletins and through online social media posts. Thanks to the fundraising and organizing efforts of WHSC and community members across the province, worker memorials continue to be erected in Ontario communities.

## Promote a Culture of Occupational Health and Safety

Workplace health and safety can affect any Ontarian, either directly or by impacting someone they care about. At the same time, every Ontarian can play a role in preventing workplace injury and health impacts. An occupational health and safety culture is one where workers, employers, family members, mentors and OHS system partners share values, beliefs and attitudes.

Strong internal responsibility systems (IRS) are essential to this effort. They ensure all workplace parties, regardless of their role, know their occupational health and safety rights and responsibilities.

Compliance with statutory duties is essential to establishing a strong IRS in the workplace. The IRS means that everyone in the workplace has a role to play in keeping workplaces safe and healthy. For example, workers in the workplace who see a health and safety problem, such as a hazard or contravention of the OHSA in the workplace, have a statutory duty to report the situation to the employer or a supervisor. Employers and supervisors are, in turn, required to

address those situations and acquaint workers with any of the hazards in their work.<sup>58</sup>

Stronger societal support for workplace health and safety plays a key role to prevent workplace injuries, illness and fatalities – with many different voices advocating for improvement and many different players acting to make positive change happen.

### Strategic Goals

- **Insight.** Understand society's attitudes, beliefs and behaviours related to occupational health and safety and how they have changed over time.
- **Advocacy.** Nurture health and safety leaders and champions in the community and workplaces.
- **Openness.** Ensure health and safety programs foster a culture of openness and inclusiveness – rather than blame and reprisals – in the reporting of hazards.
- **Attitudes.** Foster social awareness of the importance of occupational health and safety and the Internal Responsibility System.



## Performance Data Culture of Occupational Health and Safety



**IN 2016–2017 HEALTH AND SAFETY ASSOCIATIONS RESPONDED TO**

**Requests for information**



The **Ministry of Labour's** Contact Centre received  
**97,740 PUBLIC INQUIRIES**  
APRIL 1, 2016 – MARCH 31, 2017

**78,003**  
by phone or email

**8.9%** DECREASE  
from 2015–2016<sup>59</sup>

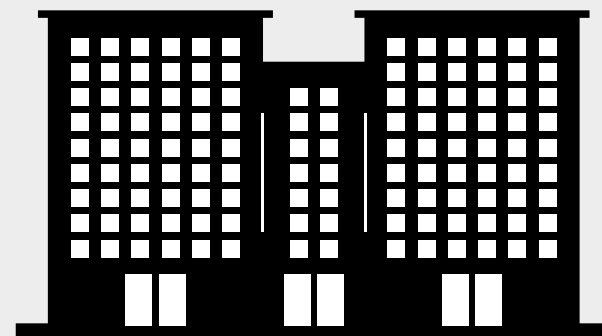


The Office of the Worker Adviser received **1,145 new service requests** related to occupational health and safety reprisals. As a result of these requests:

- **891 workers** received summary advice, information or referrals
- **230 workers** received in-depth consultations with a licensed lawyer or paralegal
- **64 reprisal complaints** that went to the Ontario Labour Relations Board were resolved and **59** of the **64** workers received monetary compensation or other benefits from employers.<sup>60</sup>

The Office of the Employer Adviser undertook under OHS section 50:

- **20 general informational calls**
- **22 case-specific enquiries**
- **27 representations, with 20 representations either settled or withdrawn**



## Correlation between perception and incidence

### Insight | Attitudes

In response to recommendations in the Mining Health, Safety and Prevention Review, Workplace Safety North launched a pilot project for the Climate Assessment and Audit Tool (CAAT). The pilot speaks to the IRS and best practices used to identify and control workplace hazards. As a predictive tool, CAAT measures both safety culture and system to provide a full picture of organizational health and safety. Since its introduction in 2015, more than 2,000 people from six Ontario mining worksites have participated in a two-year pilot project at Workplace Safety North. Data collected was analyzed by the Institute for Work and Health (IWH), which found a strong correlation between the perception survey scores (regarding company safety culture), and incidence of work-related injury and illness.

## Engaging executives

### Insight | Advocacy

Strong leaders recognize that solid health and safety performance drives business results. They promote a culture of safety in their organizations, and integrate prevention measures into business strategies, processes and performance measures. The CEO Health + Safety Leadership Network was established through the efforts of WSPS in 2014. The group has developed white papers offering insight into topics such as job mindfulness, workplace mental health and integrating health and safety into the board agenda.

## A clear message: Stop · Think · Act

### Advocacy

WSPS is piloting a simple, easy-to-remember outreach message that has enormous potential to prevent injuries: Stop Think Act. It is a behaviour-based safety program that encourages people to carefully consider tasks they are performing and ask themselves how their own actions could contribute to a safe and productive outcome. WSPS rural volunteers are being trained as Stop Think Act ambassadors. In the first six months, the Stop Think Act message has been shared with almost 4,000 farmers, and plans are in place to reach another 5,000 in 2017.

## Helping hospitals evaluate joint health and safety committees

### Insight | Attitudes

Researchers at the Centre for Research Expertise in Occupational Disease developed the Joint Health and Safety Committee Assessment Tool. It is used to evaluate the effectiveness of joint health and safety committees in hospitals. The tool was then tested in the education sector and modifications were made to accommodate multi-site committees. An enhanced, electronic version of the tool is now available in English and French. In addition to Ontario, health care authorities in British Columbia have recently begun using the tool.





**3**

**Safe At Work Ontario**

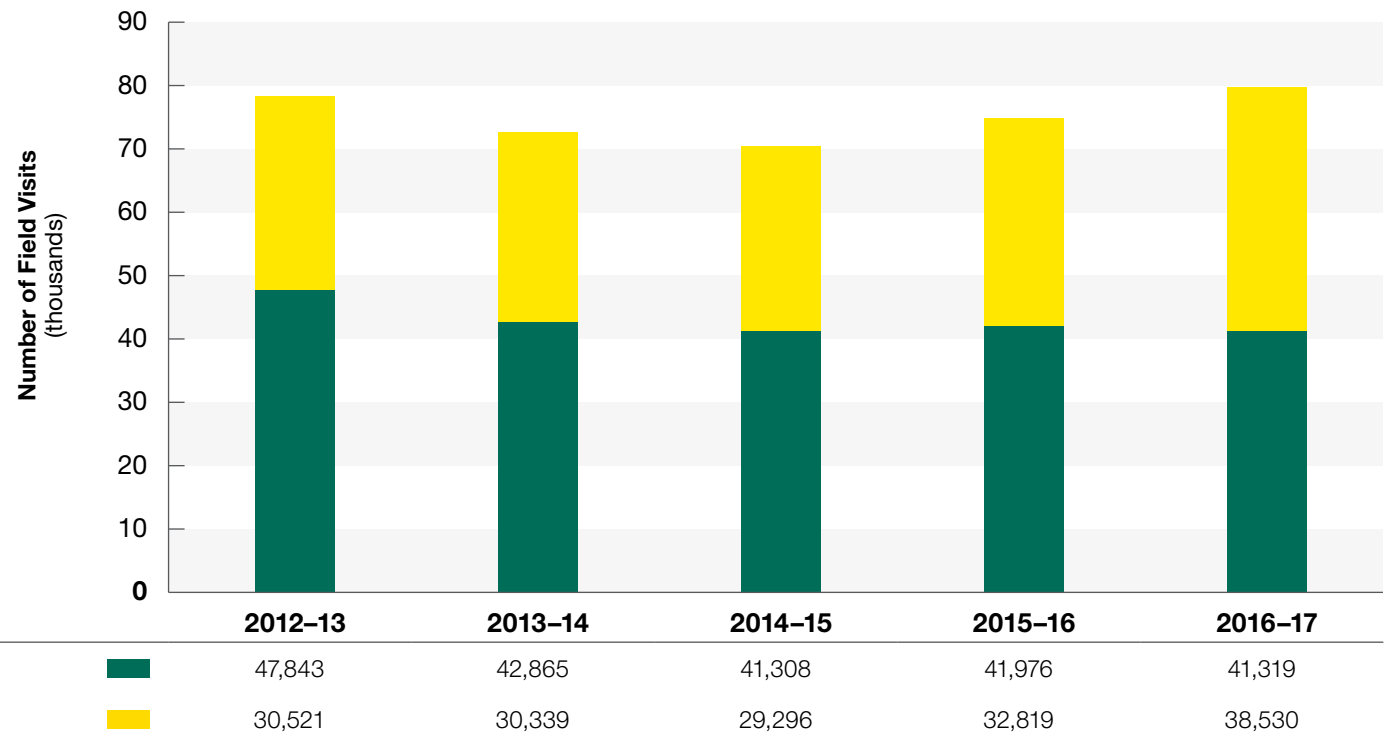


Safe At Work Ontario is a Ministry of Labour initiative to promote awareness and compliance regarding Ontario’s Occupational Health and Safety Act. Ministry of Labour inspectors conduct both proactive inspections and reactive investigations. In 2016–17,

inspectors made a total of 79,849 visits to 34,756 workplaces and issued 127,088 orders. 52% of workplace visits were proactive visits and accounted for 64% of all orders issued. In 2016–17, inspectors conducted 38,530 reactive visits, which accounted for 48% of all

field visits. For more information, please see the Ministry of Labour report Occupational Health and Safety Enforcement April 2016 – March 2017.

**FIGURE 1: Field Visits, Inspections, Consultation, Investigations**



Source: Ministry of Labour Data Systems

# 4

## Conclusion







# Occupational Health & Safety in Ontario



**This annual report highlights various activities undertaken by different partners in the system, however, it is not an exhaustive list of all the efforts undertaken in 2016–17. The examples cited represent the kind of effort, creativity and collaboration that we see performed by different people throughout the system.**

At the same time, these projects should be seen as part of a continuum towards stronger occupational health and safety in Ontario. They build on previous achievements, knowledge and regulatory action that has been delivering improved results. In the same way, the progress outlined in this annual report will be built upon by others in the years to come. This is because the work of occupational health and safety is not a project or initiative with a completion date. Ontarians are dynamic people, continually exploring new opportunities to build prosperity, and continually welcoming new Ontarians to be part of what we are building. This means Ontario's OHS system must continually ensure that Ontarians are safe and healthy at work — in whatever opportunities they choose to pursue and in workplaces that will always be changing. The one constant is that everyone shares a fundamental responsibility to ensure that everyone is safe at work, which will, in turn, further contribute to a more prosperous Ontario.





# 5

## System Finances



In 2016–17, the Ministry of Labour and system partners continued to invest approximately \$300 million to support the implementation of the integrated health and safety strategy.

<b>Occupational Health and Safety System Investments (\$ millions)</b>										
	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
Transfers to Health and Safety Associations (HSAs)	81.4	90.3	92.9	91.6	87.8	91.5	93.4	93.1	90.8	91.92
HSA Self - Generated Revenue	30.6	29.3	23.7	21.8	21.3	22.4	24.5	24.4	27.9	28.37
Enforcement	88.9	92.3	91.8	92.2	91.9	92.5	95.3	95.6	96.7	96.20
Legislation / Regulation Development	1.8	2.2	2.2	2.5	2.4	2.1	2.3	2.2	2.2	2.50
Agencies	14.2	14.6	14.5	14.8	15.0	15.6	17.0	16.0	15.3	15.50
Ministry of Labour Prevention Organization	—	—	—	—	0.2	5.3	11.9	13.9	14.4	13.30
Prevention Grants	1.7	2.1	1.8	1.4	1.6	1.5	1.7	1.6	2.0	4.0
Research	9.0	9.1	8.8	8.1	7.9	7.8	8.9	8.9	9.6	8.75
Workplace Health and Safety Services	10.1	12.6	16.6	7.4	9.3	6.5	3.7	3.4	3.0	3.0
Small Business Health and Safety Programs Rebates	1.5	1.5	1.3	1.2	1.0	0.9	1.2	0.9	0.8	0.9
Safety Group Rebates	45.2	32.7	32.2	39.0	44.9	43.6	44.4	39.3	39.3	28.8
<b>Total</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>	<b>302.0</b>	<b>293.3</b>

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

### Sources:

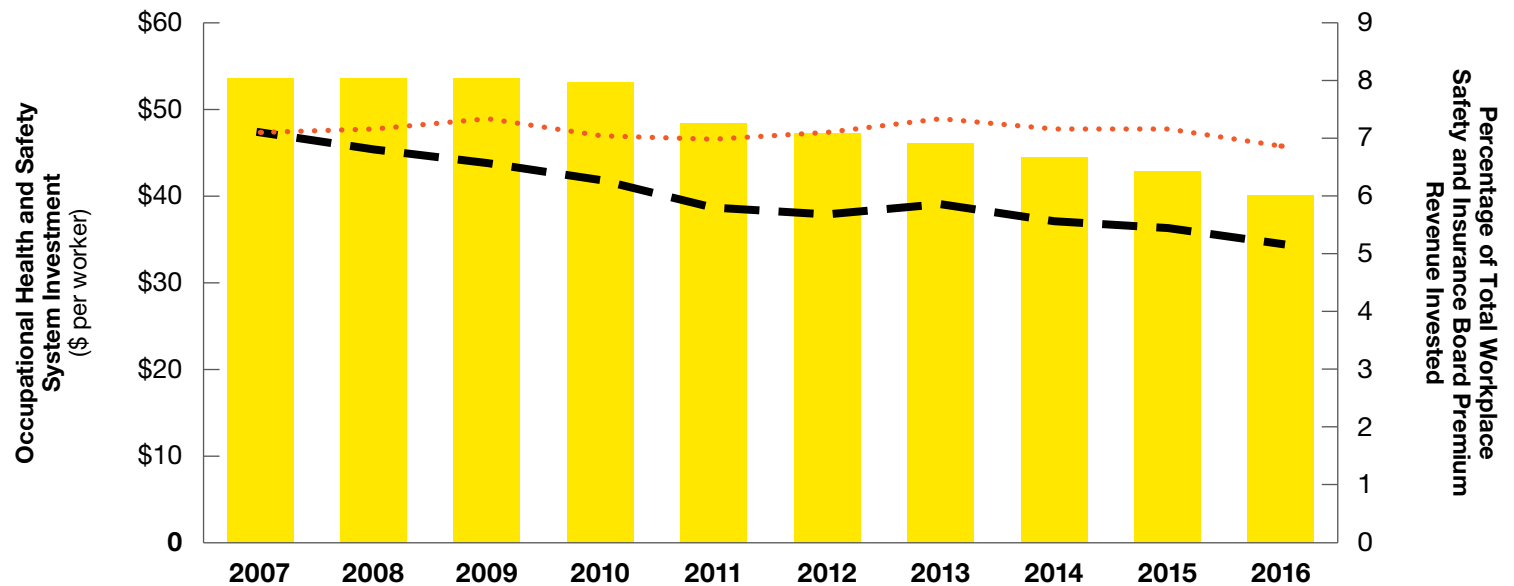
1. Transfers to HSAs: Workplace Safety and Insurance Board (WSIB) Prevention Program Statistics for 2007 to 2012; Ministry of Labour Transfer Payment Agreements (TPAs) with HSAs for 2012 to 2016.
2. HSAs self-generated revenue: HSAs audited financial statements 2007 to 2016.
3. Enforcement, legislation / regulation development, agencies, Ministry of Labour prevention organization: government of Ontario IFIS Database 2007 to 2016
4. Other grants: 2007 to 2012 figures are based on Ministry of Labour estimates according to unpublished WSIB financial information. Estimates are based on best available information at the time of preparation of the annual report and are reviewed annually to reflect new information as it becomes available. From 2013 onwards, the figures are based on the TPAs between the ministry and the grant recipients.
5. Research: WSIB – Research Advisory Council Budgeted Spend 2007 to 2013 and Research grant Expense Costs to the Institute of Work and Health (IWH) 2007 to 2012. Ministry of Labour – TPAs with research funding recipients 2012 to 2013. Cancer Care Ontario TPAs for research funding 2012–2013. Figures were also validated by the IWH and Centres for Research Expertise. From 2013 and onwards, the figures are based on the TPAs between the ministry and the grant recipients.
6. Workplace Health and Safety Services: WSIB Prevention Program Statistics for 2007 to 2016.
7. Small Business Health and Safety Program, Safety group Program Rebates – WSIB Prevention Program Statistics for 2007 to 2016.

### Notes:

1. Transfers to HSAs, other grants and research categories reflect calendar year investments (January 1 – December 31) from 2007 to 2012 and fiscal year investments (April 1 – March 31) for 2013 to 2016.
2. Transfers to HSAs from 2007 to 2011 reflect direct funding from the WSIB to the HSAs. The 2012 transfers reflect a combination of funding from the WSIB and the Ministry of Labour to the HSAs as the mandate for HSA 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.
3. 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 31st. The other health and safety associations reported on a fiscal year ending March 31st. From 2014–15 onwards, all the health and safety associations reported on a fiscal year ending March 31st.
4. Enforcement, legislation and regulation development, agencies and prevention organization reflect fiscal year investments (April 1 – March 31) from 2007 to 2016.
5. Research: Beginning in 2012, research was transferred to the Ministry of Labour from the WSIB. The Ministry of Labour administers funding to Specialized Research Centres and the Research Opportunities Program.
6. 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.
7. Agencies include investments associated with the Office of the Worker Adviser, Office of the Employer Adviser and the associated administration.
8. 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.

In 2016, the system invested \$45.73 per worker under provincial jurisdiction. This is \$1.76 less than the last 10 years' average, \$47.48. The system investment per worker under provincial jurisdiction was \$34.46. Adjusted for rising costs due to inflation: 16.6% lower than the last 10 years' average.

**FIGURE 1: System Investment Per Worker and as a Percentage of Workplace Safety and Insurance Board Premium Revenue**



System investment per worker under provincial jurisdiction	<span style="color: yellow;">■</span>	\$47.53	\$47.59	\$48.87	\$47.10	\$46.67	\$47.40	\$48.81	\$47.58	\$47.56	\$45.73
System investment as a percentage of premium revenue	<span style="color: black;">---</span>	8.07%	8.04%	8.07%	7.98%	7.31%	7.13%	6.94%	6.70%	6.45%	6.03%
System investment per worker under provincial jurisdiction, adjusted for rising costs due to inflation	<span style="color: red;">●●●</span>	\$47.53	\$45.41	\$43.71	\$41.72	\$38.47	\$37.98	\$39.18	\$37.17	\$36.17	\$34.46

Sources:

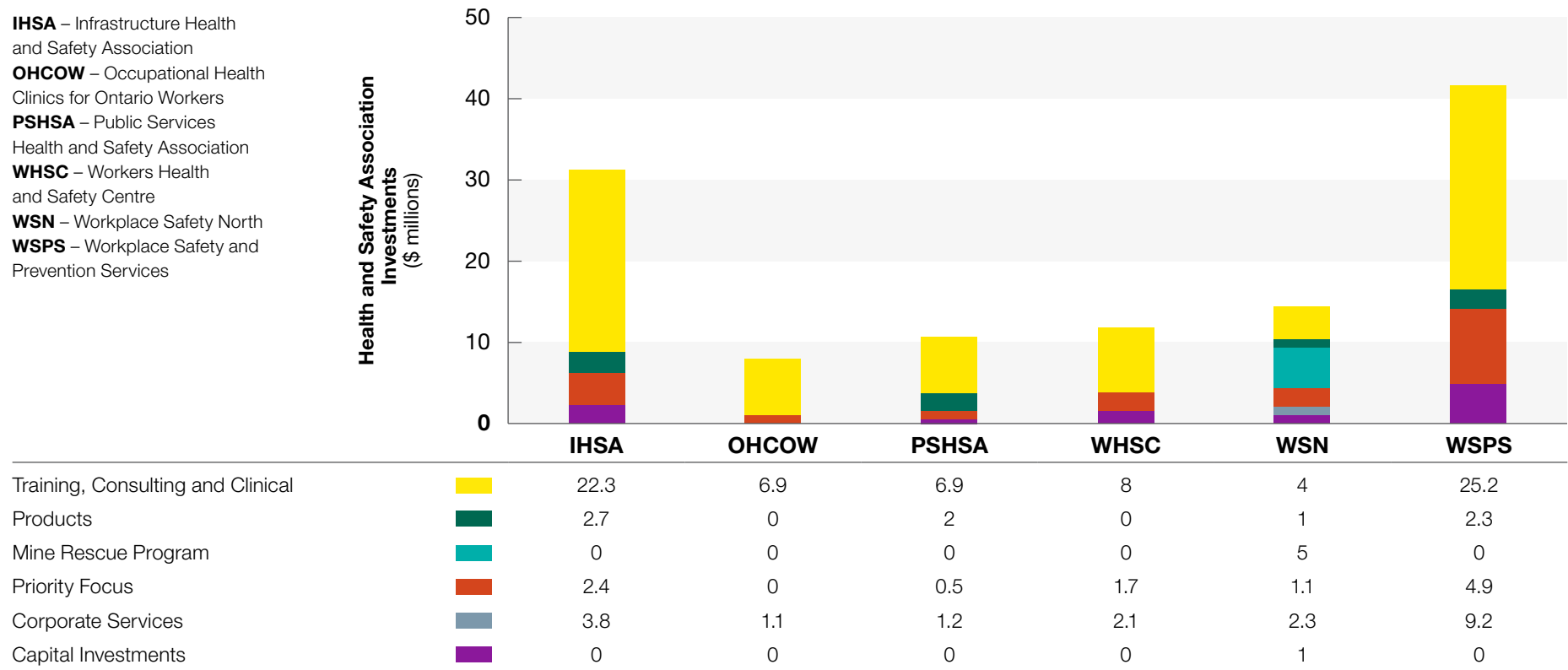
1. 2007–2016 Provincial Economic Accounts Deflator
2. Ministry of Labour calculation based on Statistics Canada Labour Force Survey 2007 to 2016 and Survey of Employment, Payroll and Hours tables and Workplace Safety and Insurance Board Corporate Reports: 2007 to 2016.

Investments by health and safety associations are drawn from their self-generated revenues and transfer payment funding from the Ministry of Labour.



The chart below states total actual spending by health and safety association. For each health and safety association, most expenditures are directed to training, consulting and clinical services.

**FIGURE 2: 2016–17 Health and Safety Association Expenditures, 2016–17 (\$ Millions)**



*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.
- In 2016–17, the total health and safety association actual expenditures were lower than the total investments (health and safety association transfers and self-generated revenues).

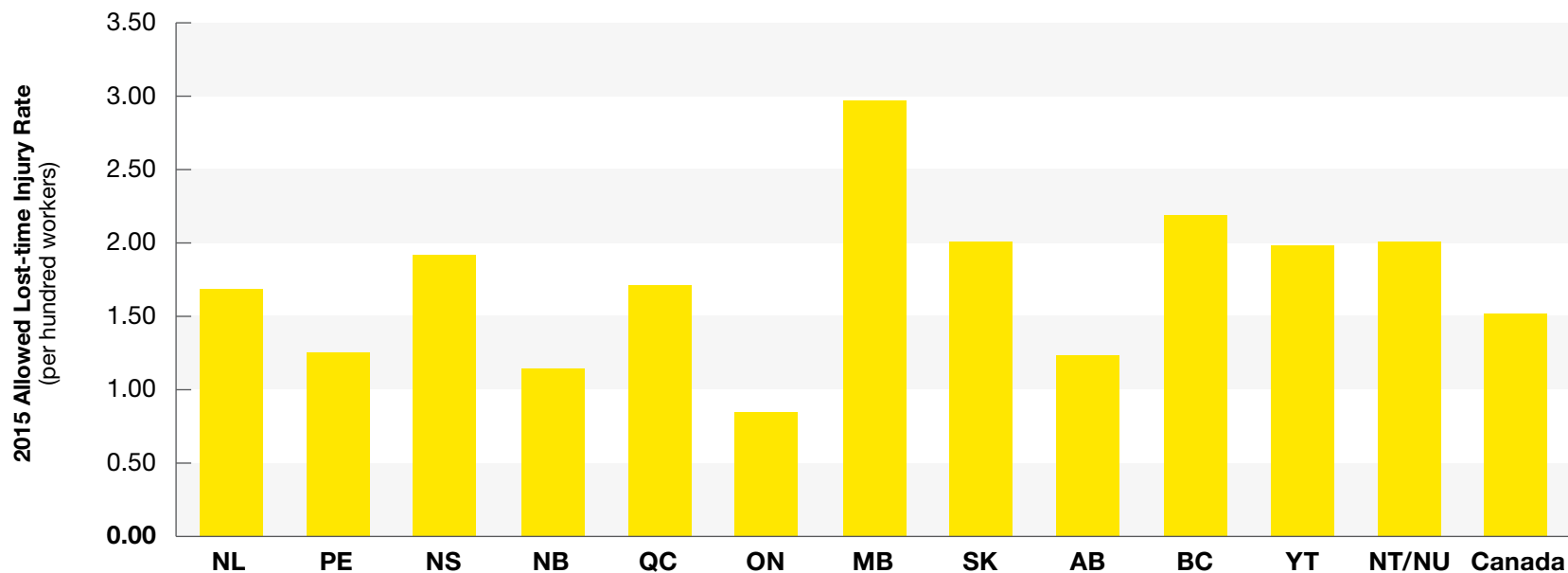




# 6

## **Appendix A: Statistical Charts**

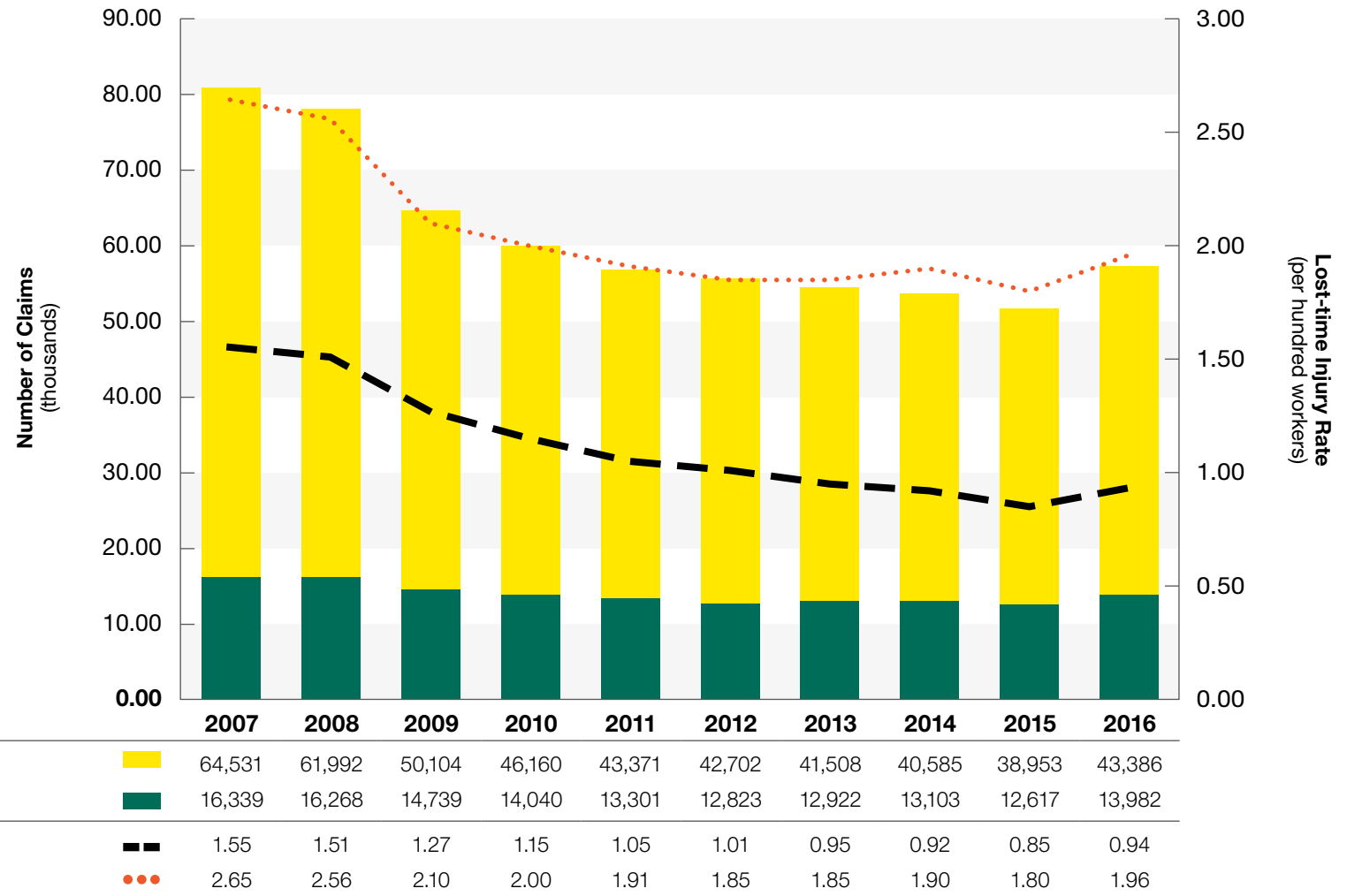


**FIGURE 1: Allowed Lost-Time Injury Rate (Provinces and Territories of Canada)**

	NL	PE	NS	NB	QC	ON	MB	SK	AB	BC	YT	NT/NU	Canada
2015	1.70	1.28	1.94	1.15	1.74	0.85	2.99	2.04	1.25	2.22	2.00	2.02	1.51
2014	1.73	1.39	1.90	1.15	1.80	0.92	3.17	2.24	1.31	2.27	2.07	2.33	1.56
2013	1.78	1.22	1.92	1.13	1.82	0.95	3.12	2.57	1.34	2.30	1.87	2.21	1.60
2012	1.76	1.35	2.01	1.18	1.85	1.01	3.33	2.81	1.39	2.34	2.14	2.13	1.65
2011	1.99	1.28	2.08	1.26	1.93	1.05	3.27	2.90	1.49	2.33	2.28	2.37	1.72
2010	2.03	1.21	2.21	1.35	1.97	1.15	3.37	3.15	1.42	2.27	2.12	2.45	1.76
2009	2.07	1.33	2.33	1.29	2.02	1.20	3.54	3.33	1.51	2.35	2.38	2.17	1.82
2008	2.15	1.35	2.59	1.36	2.32	1.45	4.08	3.57	1.73	2.96	2.73	2.51	2.12
2007	2.25	1.37	2.72	1.36	2.44	1.53	4.31	3.72	1.98	3.06	2.90	2.73	2.24
2006	2.36	1.35	2.80	1.33	2.69	1.61	4.65	3.93	2.24	3.12	2.63	2.71	2.39

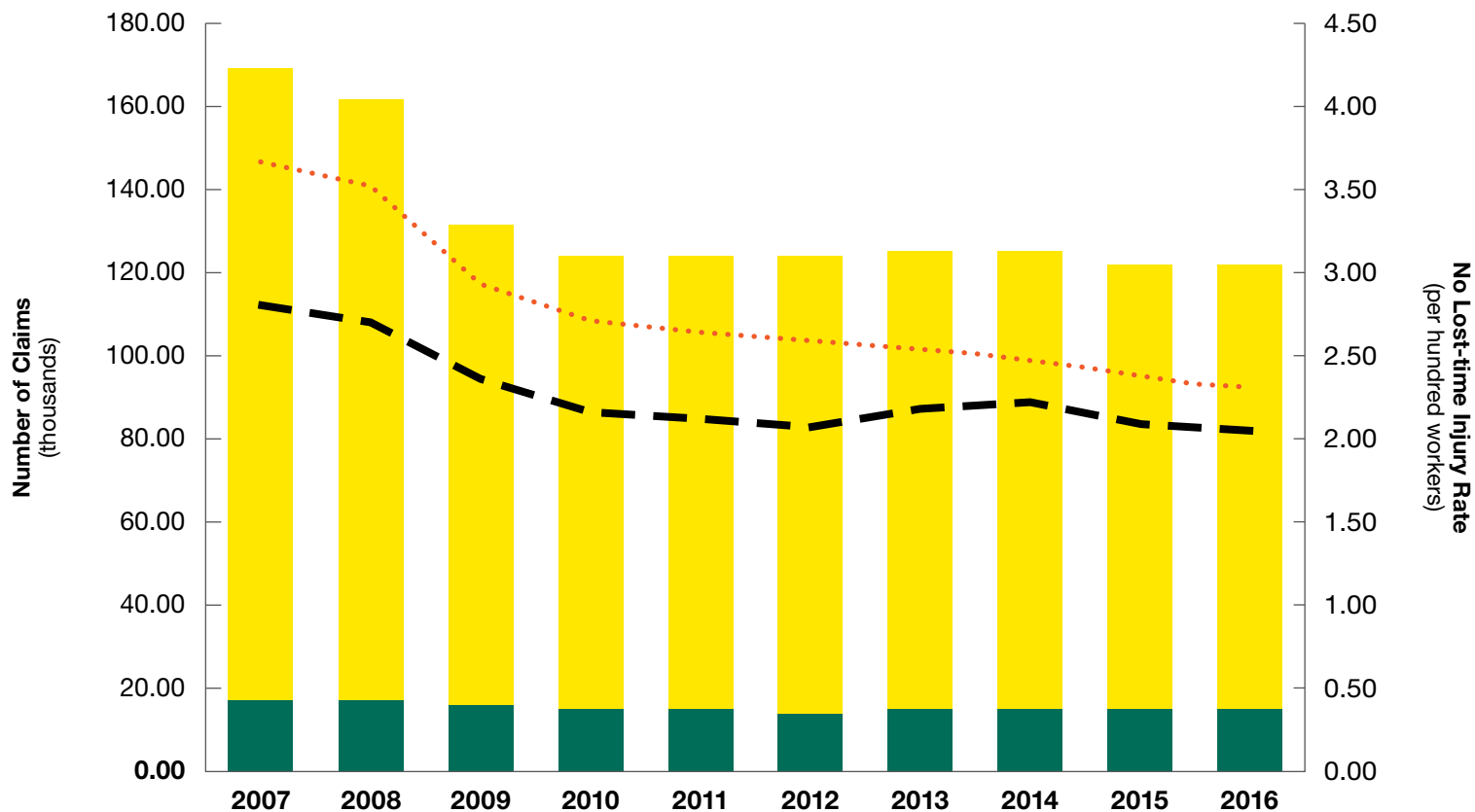
Source: Association of Workers Compensation Boards of Canada (AWCBC), accompanying notes available on AWCBC website.

Ontario data include Schedule 1 only. Rate for Schedule 2 is available in the next table.

**FIGURE 2: WSIB Allowed Lost-Time Injury Claims/Rates (Year of Injury/Illness)**

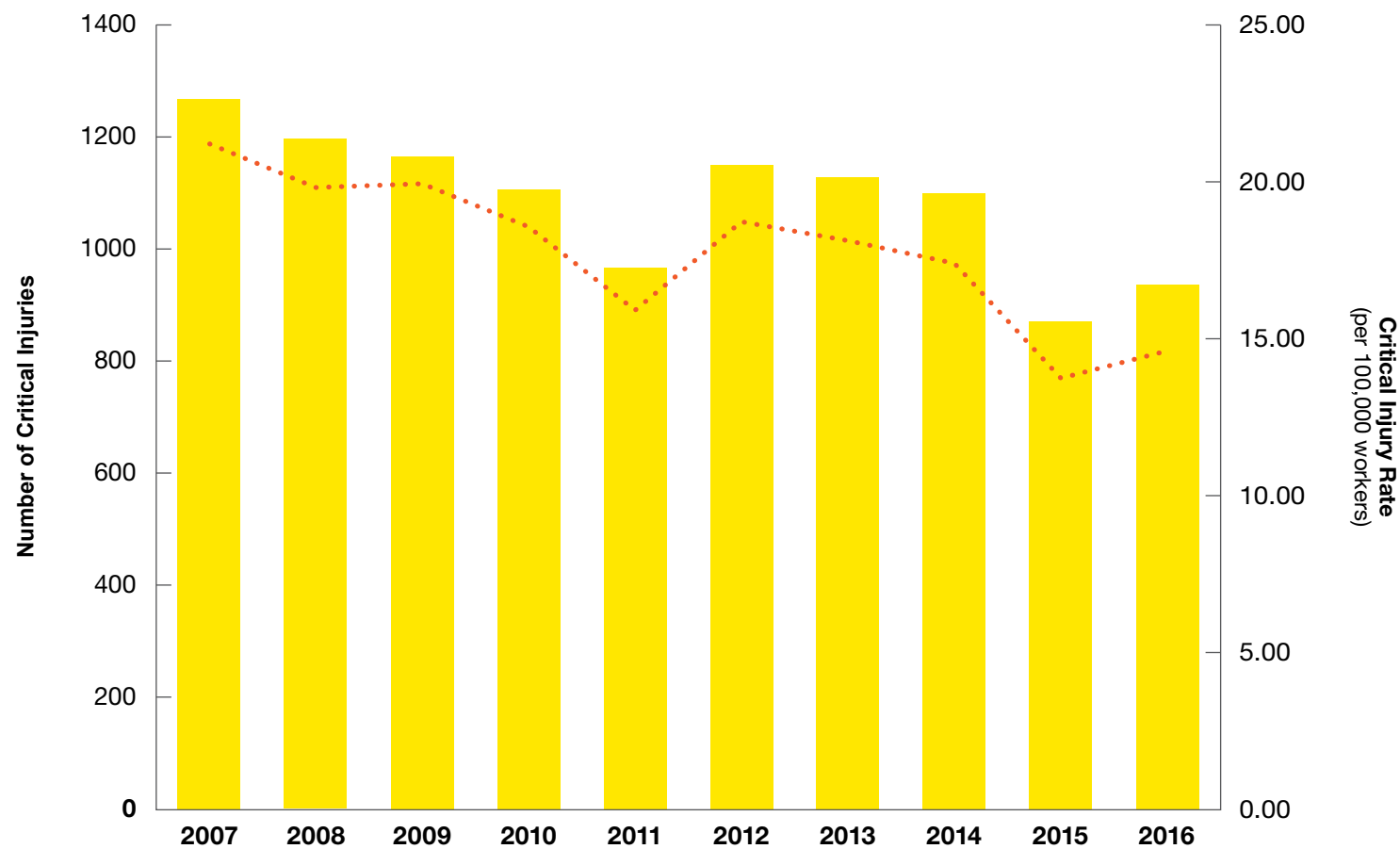
Source: Workplace Safety and Insurance Board By the Numbers 2016, Schedule 1 and Schedule 2.

**FIGURE 3: WSIB Allowed No Lost-Time Injury Claims/Rates (Year of Injury/Illness)**



Schedule 1	<span style="color: yellow;">■</span>	152,418	144,489	115,340	108,660	108,954	109,648	110,120	110,196	107,504	106,888
Schedule 2	<span style="color: darkgreen;">■</span>	17,220	17,182	16,503	15,192	14,721	14,371	15,208	15,328	14,629	14,617
Schedule 1 Rate	<span style="color: red;">●●●</span>	3.67	3.52	2.93	2.71	2.64	2.59	2.53	2.49	2.36	2.31
Schedule 2 Rate	<span style="color: black;">- - -</span>	2.8	2.7	2.36	2.16	2.12	2.07	2.18	2.22	2.09	2.05

Source: Workplace Safety and Insurance Board By the Numbers 2016, Schedule 1 and Schedule 2.

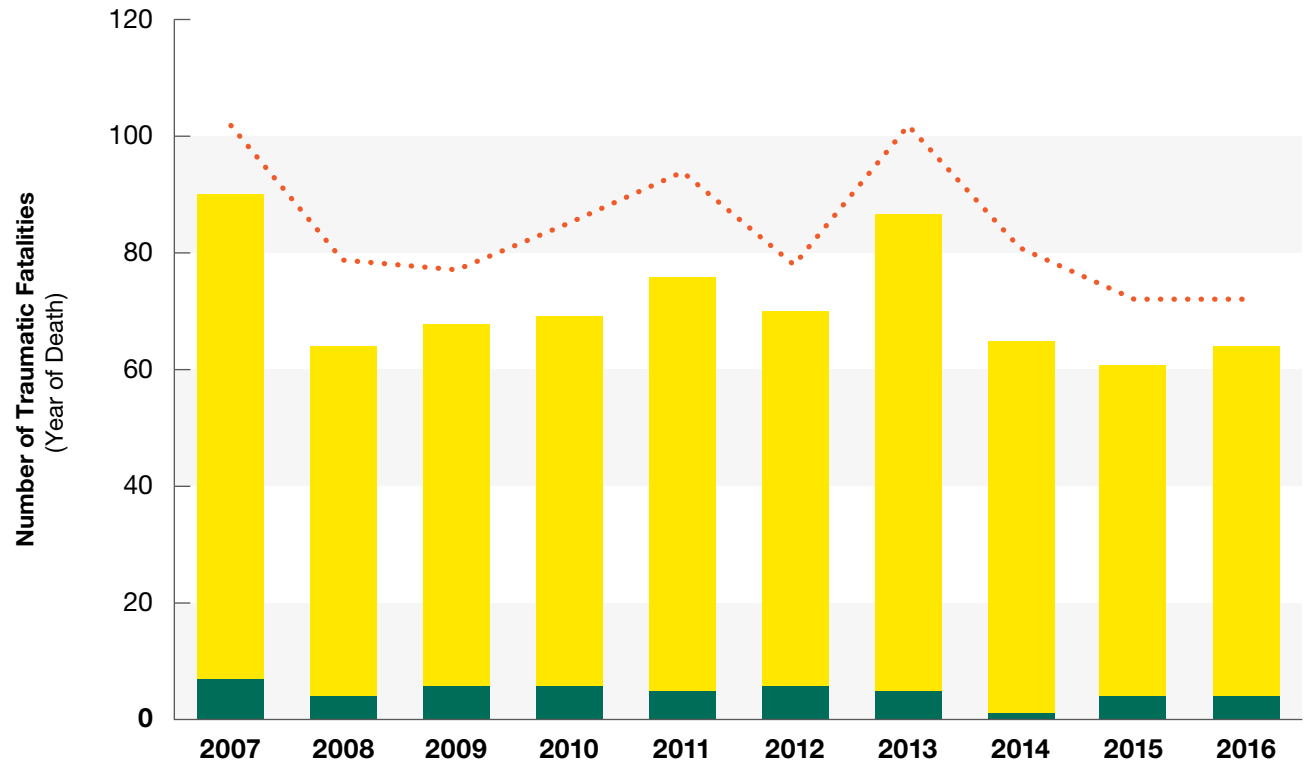
**FIGURE 4: Ministry of Labour Reported Critical Injuries and Critical Injury Rate (Year of Injury)**

Total critical injury events	<span style="color: yellow;">■</span>	1,270	1,194	1,166	1,104	966	1,147	1,130	1,095	873	938
Critical injury rate (per 100,000 workers)	<span style="color: red;">●●●</span>	21.22	19.81	19.93	18.56	15.91	18.76	18.12	17.40	13.75	14.62

Source: Ministry of Labour Data Systems 2007 to 2016 and Ministry of Labour calculation based on Statistics Canada Labour Force Survey 2007 to 2016.

Note: Critical injury rates are calculated by the Ministry of Labour based on the number of reported critical injuries divided by the number of people employed under provincial jurisdiction.



**FIGURE 5: Traumatic Fatalities (Year of Death)**

WSIB Allowed Traumatic Fatalities by  
Year of Death (Schedule 1)



83 60 62 63 71 64 82 64 57 60

WSIB Allowed Traumatic Fatalities by  
Year of Death (Schedule 2)



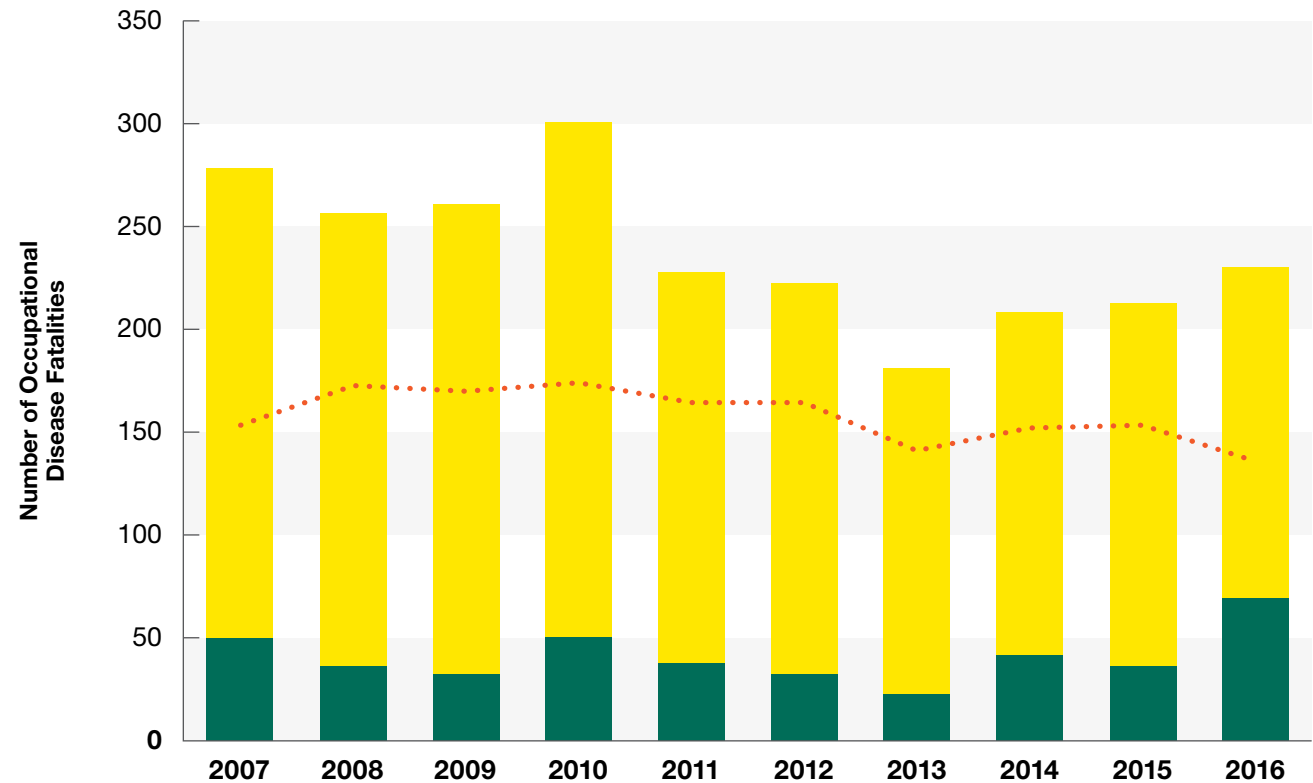
7 4 6 6 5 6 5 1 4 4

Total Traumatic Fatalities for Ontario:  
Ministry of Labour & Workplace Safety and  
Insurance Board (Year of Death)



102 79 77 85 94 78 102 81 72 72

Sources: Workplace Safety and Insurance Board, By the Numbers 2016, Schedule 1 and 2. Workplace Safety Insurance Board Day of Mourning Fatalities Report: 2007 to 2016.

**FIGURE 6: Allowed Occupational Disease Fatalities**

WSIB Allowed Occupational Disease Fatalities,  
Schedule 1 (Year of Entitlement)



228

221

229

250

190

190

158

167

175

161

WSIB Allowed Occupational Disease Fatalities,  
Schedule 2 (Year of Entitlement)



51

36

32

51

38

32

23

42

37

70

WSIB Allowed Occupational Disease Fatalities  
(Year of Death)



153

172

170

174

164

164

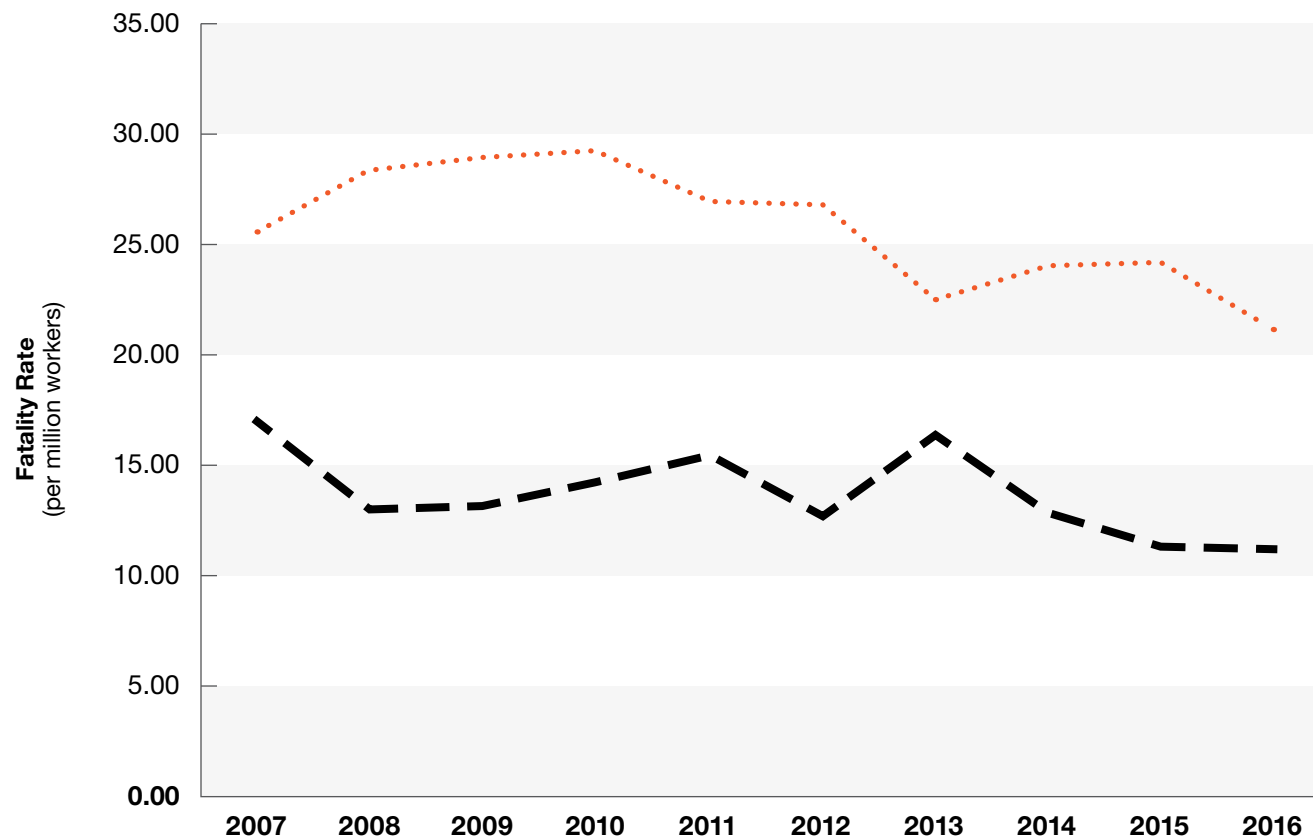
141

152

154

136

Sources: Workplace Safety and Insurance Board, By the Numbers 2016, Schedule 1 and 2. Workplace Safety Insurance Board Day of Mourning Fatalities Report: 2007 to 2016.

**FIGURE 7: Fatality Rates (Year of Death)**

Traumatic Fatality Rates, Per Million Workers  
Ministry of Labour and WSIB (Year of Death)



17.05

13.11

13.17

14.30

15.49

12.76

16.36

12.88

11.34

11.23

Occupational Disease Fatality Rates,  
Per Million Workers. WSIB (Year of Death)



25.57

28.55

29.07

29.27

27.02

26.83

22.62

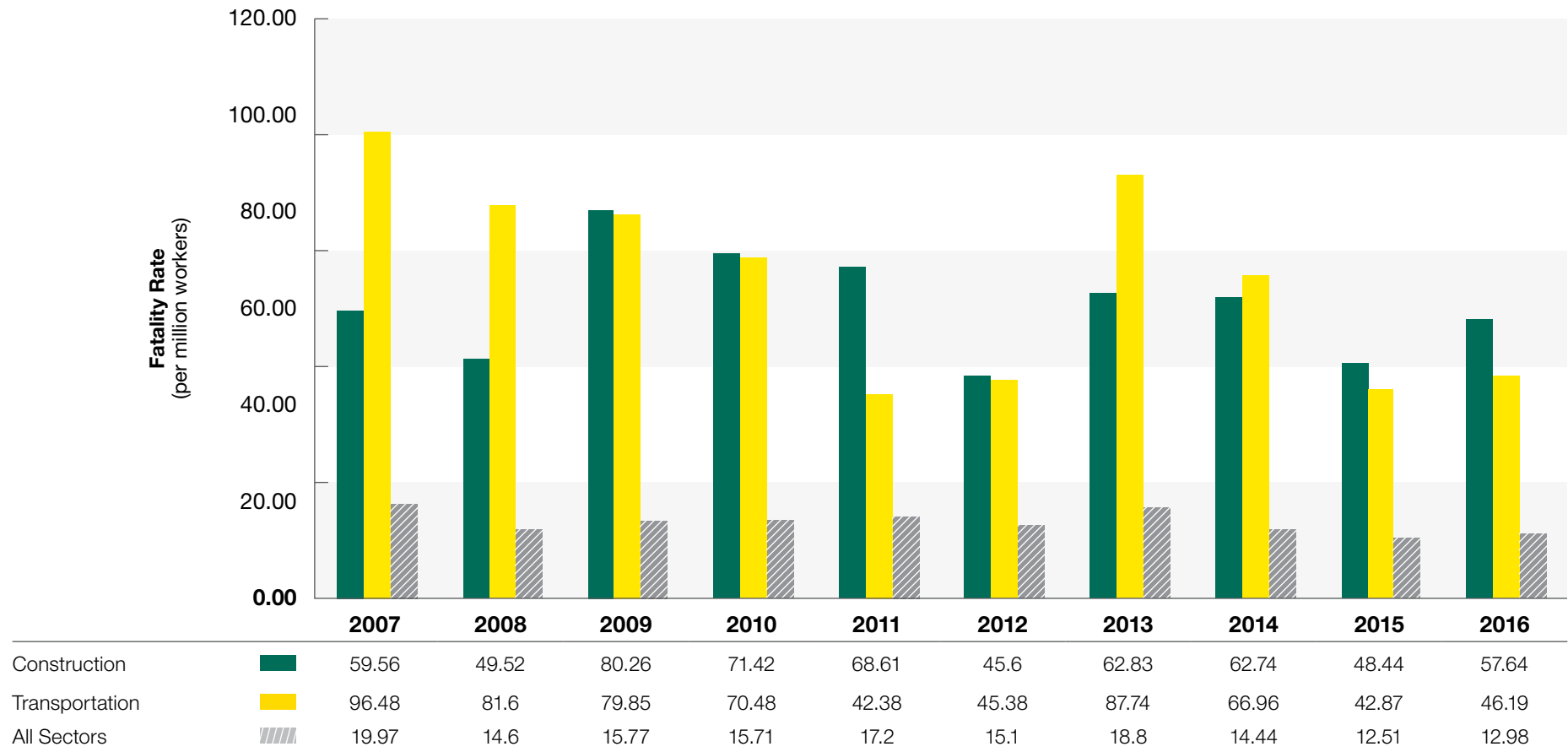
24.16

24.25

21.20

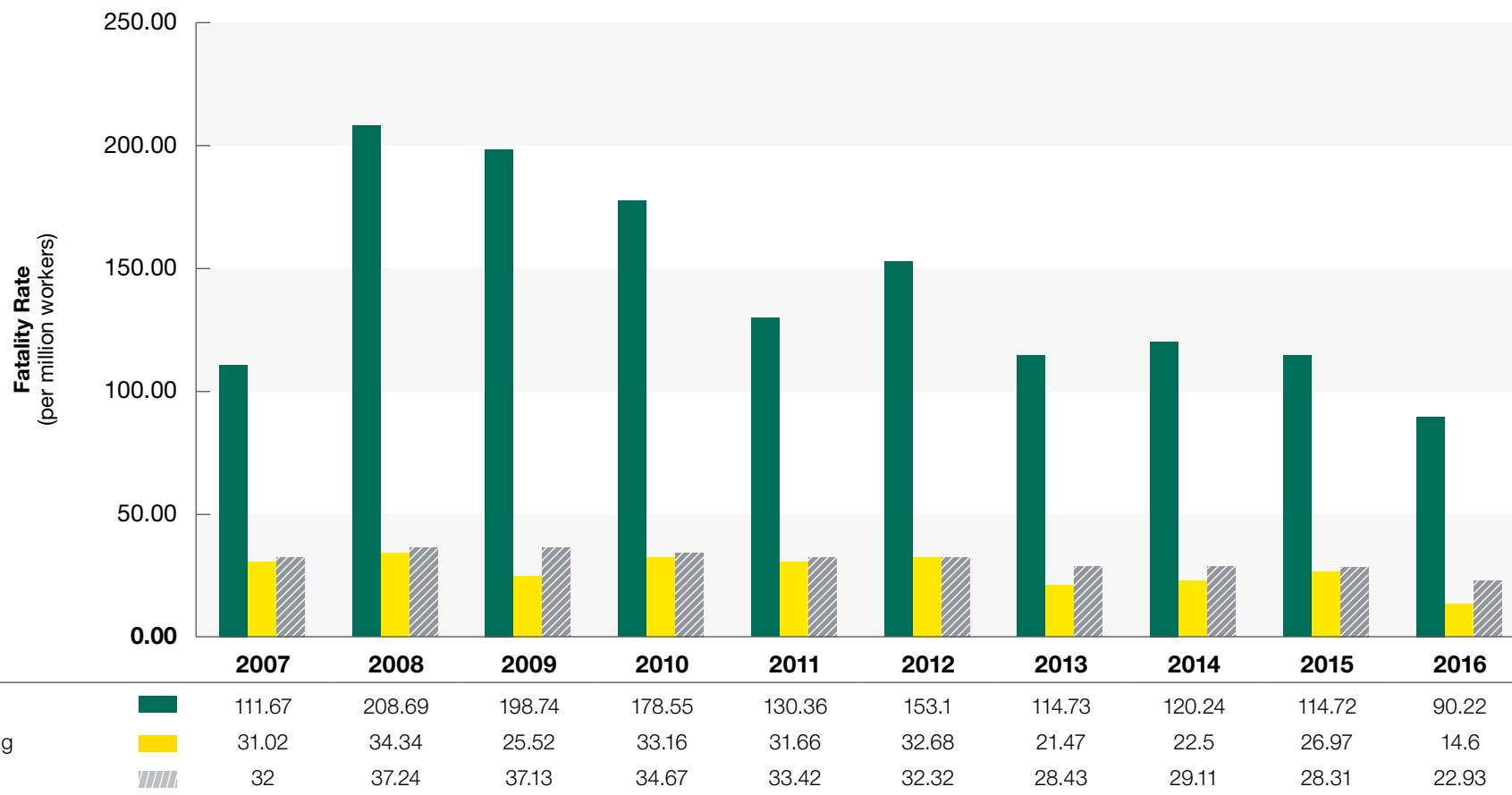
Sources: Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2007 to 2016 and Ministry of Labour calculation based on Statistics Canada Labour Force Survey 2007 to 2016.

Note: 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 8: Top 2 and All Sectors: Traumatic Fatality Rates (per million) for Schedule 1: 2007–2016***Sources:*

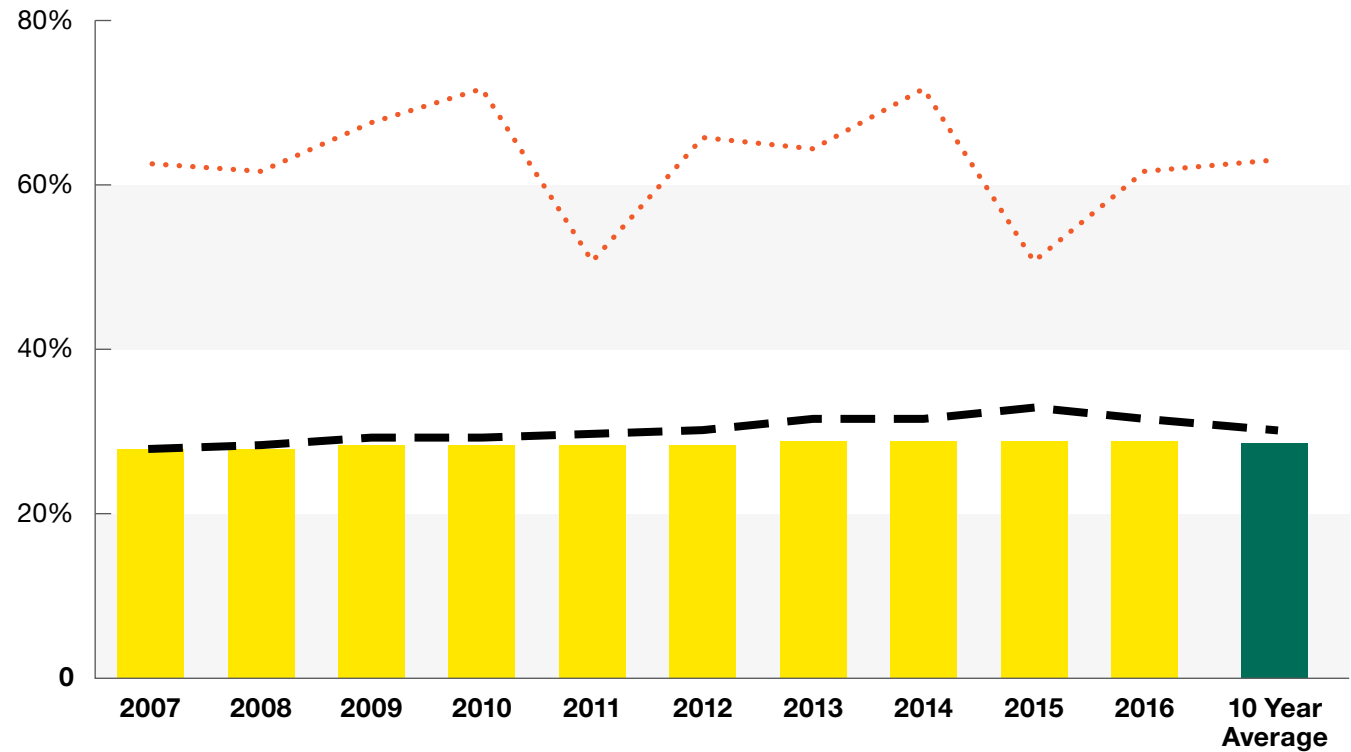
1. By the Numbers: 2016 Workplace Safety and Insurance Board Statistical Report Schedule 1.
2. Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2007 to 2016.

Top sectors are based on share of fatalities over 10 years. Rates are based on per million Workplace Safety and Insurance Board covered employment (year of death) and 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.

**FIGURE 9: Top 2 and All Sectors: Occupational Disease Rates (per million) for Schedule 1: 2007–2016***Sources:*

1. Workplace Safety and Insurance Board Statistical Report Schedule 1, 2007 to 2016.
2. Workplace Safety and Insurance Board Day of Mourning Fatalities Report: 2007 to 2016.

Top sectors are based on share of fatalities over 10 years. Rates are based on per million Workplace Safety and Insurance Board covered employment (year of death) and 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.

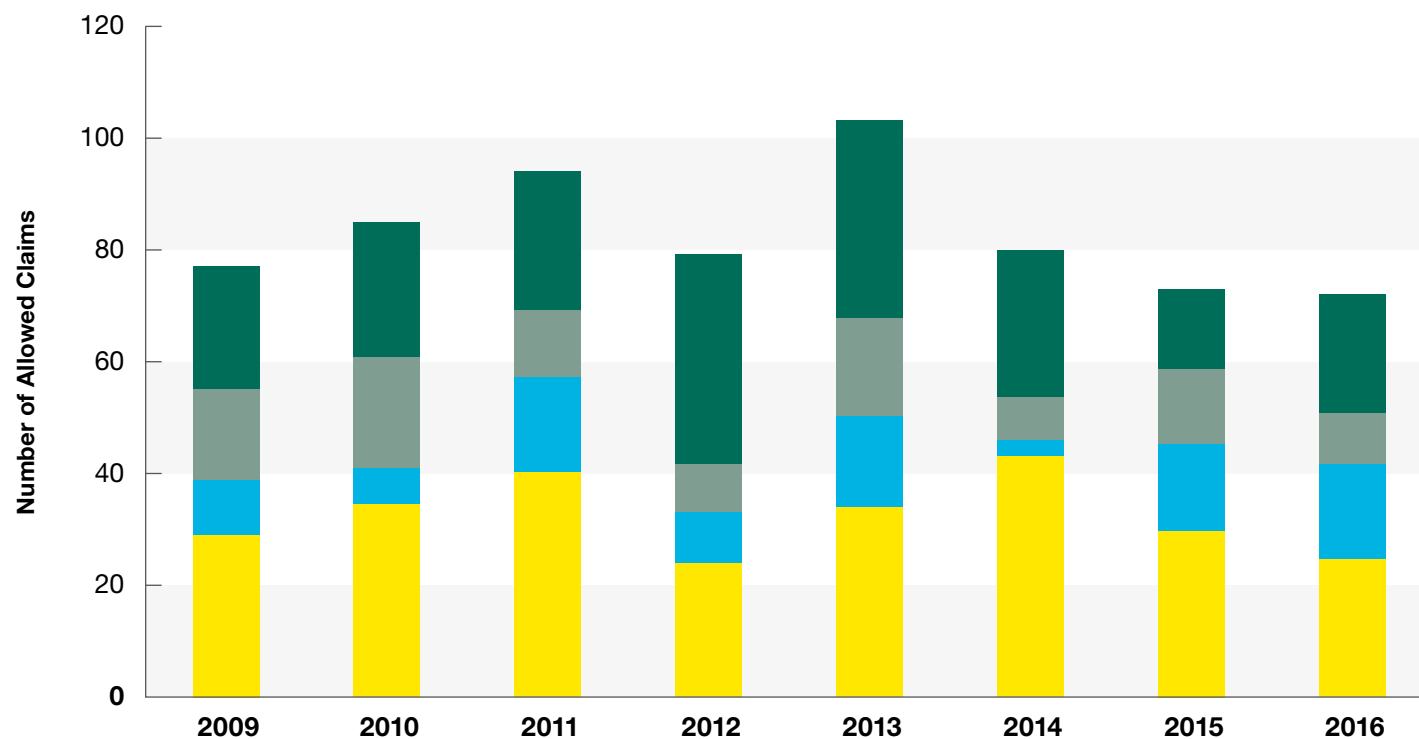
**FIGURE 10: Small Businesses: Share of Traumatic Fatalities, Allowed Lost-time Injury Claims and Employment (Schedule 1)**

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	10 Year Average
Share of Total Employment	28.05%	28.10%	28.33%	28.47%	28.44%	28.52%	28.77%	28.91%	28.92%	28.91%	28.54%
Share of WSIB Allowed Traumatic Fatalities (Year of Incident)	62.50%	61.67%	67.80%	71.67%	50.75%	65.63%	64.56%	71.88%	50.94%	61.82%	62.92%
Share of WSIB Allowed Lost-time Claims (Year of Injury/Illness)	27.92%	28.24%	29.07%	29.32%	29.89%	30.05%	31.52%	31.65%	32.87%	31.59%	30.21%

Sources: Table 281-0042 - Survey of Employment, Payrolls and Hours (SEPH), employment for all employees, by enterprise size and North American Industry Classification System (NAICS), annual (persons). CANSIM (database). Accessed December 12, 2017.

Workplace Safety and Insurance Board database. Accessed December 2017. Data extracted by the Ministry of Labour. May not exactly match published WSIB data.



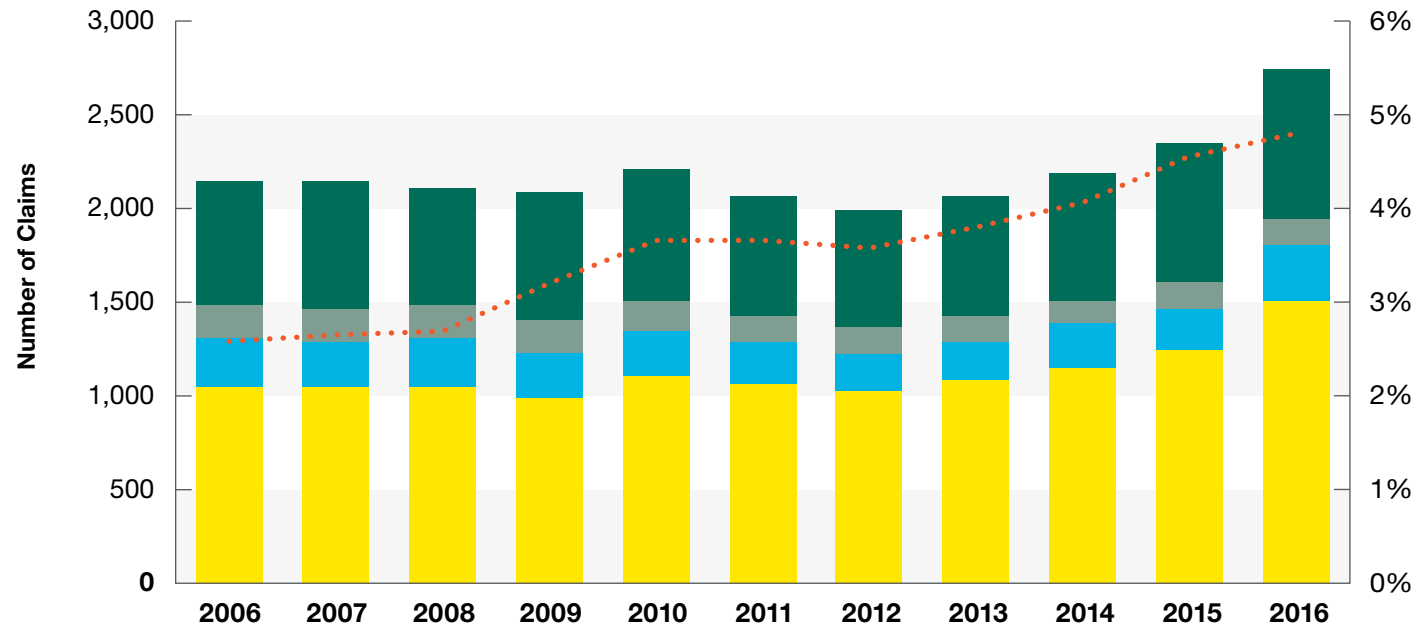
**FIGURE 11: Top 3 Events and Other Events for Traumatic Fatalities**

	2009	2010	2011	2012	2013	2014	2015	2016
Motor Vehicle Accidents	22	24	25	37	35	26	14	21
Falls from Heights	16	20	12	9	18	8	14	9
Crushed by	10	6	17	9	16	3	15	17
Other Events	29	35	40	24	34	43	30	25

Source: Ministry of Labour. Provincial traumatic fatalities by year of death 2009–2016.

Notes:

1. Provincial traumatic fatalities are not available prior to 2009.
2. The Motor Vehicle Accident fatalities reported in this analysis may include non-traffic accidents

**FIGURE 12: Violence and Harassment: Allowed Lost-Time Injuries for Schedule 1 and Schedule 2: 2006–2016**

Total Violence and Harassment Schedule 1 - Health Care	660	675	627	670	693	650	615	636	676	747	804
Total Violence and Harassment Schedule 1 - Services	192	178	176	180	167	141	142	140	130	128	148
Violence and Harassment Schedule 1 - Other	254	252	258	236	242	212	197	200	223	218	291
Violence and Harassment - Schedule 2	1,051	1,048	1,053	999	1,109	1,079	1,040	1,100	1,161	1,263	1,521
Violence and Harassment Claims Share of Total Lost-time Claim	2.59%	2.66%	2.70%	3.22%	3.67%	3.67%	3.59%	3.81%	4.08%	4.57%	4.82%

Source: Workplace Safety and Insurance Board. Data extracted by Ministry of Labour. Data may not match WSIB publications.

Note: Count of "Violence and harassment" equals Workplace Safety and Insurance Board data of "Assaults, violent acts, harassment and act of war or terrorism".



# 7

## **Appendix B: Glossary of Terms**



## Glossary of Terms

**Allowed Claims** Claims where entitlement to benefits has been authorized by the Workplace Safety and Insurance Board (WSIB). Allowed claims are different than registered claims.

- **Allowed Lost-time Injury Claim**

A lost-time injury claim is created when a worker suffers a work-related injury/disease which results in one of the following: being off work past the day of accident, loss of wages/earnings or a permanent disability/impairment.

- **Lost Time Injury (LTI) Rate** Number of allowed lost-time injuries/illnesses per 100 derived full-time equivalent (FTE) workers for the injury year specified.

- **Allowed No Lost-time Injury Claim**

A no lost-time injury 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** Number of allowed no lost-time injuries/illnesses per 100 derived full-time equivalent (FTE) 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**

**Fatalities by Entitlement Year** Allowed claims from workers who died of a work-related disease or condition for which entitlement to survivor benefits has been granted in the year specified. Excludes claims from workers who passed away while in receipt of 100% permanent disability benefits granted under a pre-1990 legislative framework.

**Allowed Traumatic Fatalities by Year**

**of Death** Allowed claims from workers who died of a work-related traumatic incident in the year specified. Excludes claims from workers who passed away while in receipt of 100% permanent disability (PD) benefits granted under a pre-1990 legislative framework.

**Complaint** A complaint is any expression of discontent or concern registered with the Ministry of Labour regarding health and safety issues. Complaints include only those that have been reported to the ministry.

**Critical Injury as reported to the Ministry of Labour** Critical injuries include only those that have been reported to the ministry and not necessarily critical injuries

as defined by the Occupational Health and Safety Act. The Ministry of Labour investigates workers covered by the Occupational Health and Safety Act. Critical injuries in the ministry's data systems may include non-workers, as this is required to be reported. This represents data that was reported to the ministry and may not represent what actually occurred at the workplace.

**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.

**Event** A work refusal, complaint, incident, illness, occurrence, dispute or work stoppage reported to the Ministry of Labour regarding health and safety issues. Events include only those that have been reported to the ministry and may not reflect what actually occurred in the workplace.



**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.

**Field Visits** A field visit occurs when a ministry inspector visits a workplace and meets with the workplace parties in order to enforce the Occupational Health and Safety Act. Field visits may be for the purpose of an inspection, investigation or a consultation.

**Field Visit Inspection** The Ministry of Labour proactively inspects workplaces to monitor compliance with occupational health and safety legislation, and to promote the Internal Responsibility System. These are usually unannounced visits. The ministry targets workplaces and/or sectors of the economy that have a history of poor compliance or high levels of work-related injuries.

**Field Visit Consultation** These field visits are made to advise workplace parties of their rights, duties and responsibilities under the Occupational Health and Safety Act, and of ministry policies and procedures.

**Field Visit Investigation** These are reactive field visits for the purpose of investigating a fatality, critical injury, work refusal, complaint, occupational disease or other health and safety-related events in the workplace that have been reported to 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.

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.
- 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.

**Nonstandard Work** Nonstandard work is temporary employment, part time work that is involuntary, or self-employment without paid help. Multiple job holders where their main job pays less than the economy-wide median wage are also included in this category.

**Occupational Disease** Occupational diseases are caused by exposure to physical, chemical, or biological agents in the workplace.

**Occupational Health, Safety, Prevention and Innovation Program (OHSPiP)** Funding for activities that address the province's key occupational health and safety priorities. These 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.



**Provincial Enforcement Initiatives**

Provincial initiatives identify workplaces for inspection based on hazards inherent to the operation of the business. However, enforcement initiatives may also focus on a particular sector or a type of workplace, for example, new or small businesses. Provincial initiatives may run for an entire year or more to allow for extended outreach to these workplaces.

**Provincial Inspection Blitzes**

Provincial blitzes identify workplaces for inspection based on hazards inherent to the operation of the business. Blitzes are limited in duration (one to four months) and raise awareness of these hazards so that the workplace parties can ensure that they are complying with the Occupational Health and Safety Act and regulations.

**Proactive Inspection** A “proactive inspection” is an unannounced field visit to a workplace to ensure compliance with the Act and its regulations.

**Reactive Investigation** A reactive investigation occurs when a workplace notifies the Ministry of Labour of a complaint, work refusal, occurrence, critical injury or fatality.

**Regional Enforcement Initiatives** Each

regional ministry office may conduct its own local initiative(s) to raise awareness of and help address health and safety issues that are specific to particular geographic areas of Ontario and/or have a higher rate of occurrence than in the rest of the province.

**Registered Claims** Registered claims for injuries, illnesses or fatalities reported to the WSIB in the year (as some claims are registered with the WSIB after the year in which the injury, illness or fatality occurred) and includes all allowed, denied, abandoned and pending claims.

**Research Opportunities Program**

The Research Opportunities Program (ROP) provides strategic research investments through public calls for occupational health and safety research projects that focus on identified occupational health and safety system priorities.

**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 and benefit from the expertise and guidance of approved industry sponsors. Workplaces participating

in this incentive program may receive rebates of up to six per cent of their Workplace Safety and Insurance Board premium: four per cent for meeting program requirements by successfully implementing five health and safety initiatives; one per cent for reducing their injury severity rate by more than seven per cent from the current two years compared to the previous two years; and one per cent for reducing their injury frequency rate by more than seven per cent from the current two years compared to the previous two years.

**Schedule 1** Schedule 1 employers are those for which the WSIB is liable to pay benefit compensation for workers’ claims. Under the Workplace Safety and Insurance Act, Schedule 1 employers are required to pay premiums to the WSIB and are protected by a system of collective liability. Under this Act, the WSIB pays benefits to injured workers out of money pooled in the insurance fund it administered, and Schedule 1 employers are relieved of individual responsibility for actual accident costs.

**Schedule 2** Schedule 2 employers are employers that self-insure the provisions of benefits under the WSIA. Schedule 2 employers are liable to pay all benefit compensation and administration costs for

the workers' claims. The WSIB 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.

**Small Business Health and Safety Programs (formerly Safe Communities Incentive Program - SCIP)**

The Small Business Health and Safety Programs include Information Sessions and Building Your Health and Safety Program. Information Sessions provide an introduction to the Occupational Health & Safety System and provide essential updates on WSIB and MOL. 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 five per cent rebate after they participate in three in-class sessions and submit the program requirements. Participating employers then have access to implementation support with a Small Business Health and Safety Consultant.

**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 Workwell Program evaluates the health and safety and return to work practices and procedures of employers who are at greater risk of experiencing workplace incidents and/or are experiencing greater difficulties with return to work. Participating in Workwell through its on-site collaborative model encourages companies to make necessary improvements to their Health and Safety Management System including Return to Work program, helps prevent injuries, illnesses and fatalities.

**Year of Incident** The year in which the injury or illness occurred.

**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.



# 8

## **Data Limitations and Methodology in this Report**



## Data Limitations and Methodology in this Report

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

- Ministry of Labour enforcement data may be subject to change because of ongoing enforcement activities and investigation of events.
- 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.
- Critical injuries include only those that have been reported to the ministry and not necessarily critical injuries as defined by the Occupational Health and Safety Act (OHSA). The Ministry of Labour investigates workers covered by the OHSA. Critical injuries in the ministry's data systems may include non-workers, as this is required to be reported. This represents data that was reported to the ministry and may not represent actual events at the workplace.
- The Ministry of Labour tracks and reports fatalities at workplaces covered by the Occupational Health and Safety Act. This excludes death from natural causes, death of non-workers at a workplace, suicides, death as a result of a criminal act or a traffic accident (unless the OHSA is also implicated) and death from occupational exposures that occurred many years ago.
- 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.

# 9

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and Safety in Ontario* at **Ontario.ca/labour**

ISBN 978-1-4868-1856-3 (Print)

ISBN 978-1-4868-1857-0 (HTML)

ISBN 978-1-4868-1858-7 (PDF)

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