

Report to / Rapport au:

**OTTAWA POLICE SERVICE BOARD
LA COMMISSION DE SERVICE DE POLICE D'OTTAWA**

22 April 2024 / 22 avril 2024

Submitted by / Soumis par:

Chief of Police, Ottawa Police Service / Chef de police, Service de police d'Ottawa

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**SUBJECT: WORKPLACE INJURIES, ILLNESSES & INCIDENTS: 2023 ANNUAL
REPORT**

**OBJET: BLESSURES AU TRAVAIL, MALADIES ET INCIDENTS: RAPPORT
ANNUEL 2023**

REPORT RECOMMENDATIONS

That the Ottawa Police Service Board receive this report for information.

RECOMMANDATIONS DU RAPPORT

**Que la Commission de service de police d'Ottawa prenne connaissance du
présent rapport à titre d'information.**

BACKGROUND

This report is provided to the Ottawa Police Service Board (Board) to meet the Chief's requirements under the Occupational Health & Safety Policy (Policy CR-15). The policy states that:

“On an annual basis, the Chief of Police shall provide an Occupational Health and Safety Report to the Board that reports on the frequency and severity of injuries, and the effectiveness of the policy and programs in place.”

The Ottawa Police Service (OPS) is aware of the inherent risks associated with policing and cares about the health and safety of the members of the Service. Our commitment to promoting a healthy organization translates to a healthier membership to better serve our community. Through policy, monitoring, training, and practices, the OPS seeks to

reduce the impact of workplace injuries and illnesses and strives to provide a healthy and safe environment for all members.

Workplace injuries and illnesses can affect individual members and the OPS in a variety of ways. Direct impacts include pain and suffering experienced by affected members; monetary costs associated with compensation and treatment of affected members; and fewer OPS members available to serve the City of Ottawa. Indirect impacts include reduced member morale, sub-optimal resource use, and diminished operational performance.

This report contains a conventional analysis of incidents, injuries, and illnesses that occurred in OPS workplaces in 2023. Relevant information is summarized and tabulated. Some standard health and safety statistics are calculated and analyzed. Data from 2023 are compared with data from previous years. This report also includes a summary of initiatives that will be undertaken in 2024 to help reduce workplace injury and illness rates in future years.

DISCUSSION

Injuries, Illnesses, and Incidents

As per OPS Health and Safety Policy 3.06, a member is required to report an event to their supervisor when they become injured or ill due to a workplace event, or when they become aware of an incident that could have caused an injury or illness while in the workplace. As per the same policy, supervisors are responsible for attempting to identify contributing factors related to reported incidents and identifying corrective actions to help prevent similar incidents from occurring in the future. Supervisors must also document these events by completing Workplace Injury, Illness & Incident Report Forms (WIIIRFs). WIIIRFs are submitted to the Abilities Management Unit (AMU) and the Wellness & Safety Branch. AMU processes the reports and Wellness & Safety follows up with OPS stakeholders as needed, fulfilling any third-party reporting requirements necessary for regulatory compliance.

Table 1 provides a summary of the 707 WIIIRFs that were submitted in 2023.

Table 1: Summary of all WIIRFs Submitted in 2023

Incident Severity Category	Description	Number of Incidents
Incident Only	An incident occurred that could have resulted in an injury or illness. These incidents are sometimes called “near misses” or “close calls.”	421
First Aid	An injury or illness occurred, and first aid was administered. No external health care was sought.	60
Health Care	An injury or illness occurred, and external health care was sought from a doctor, chiropractor, physiotherapist, psychologist, or similar specialist. No time was lost from work beyond the date of injury or illness.	90
Lost Time	An injury or illness occurred, health care was sought, and time was lost from work beyond the date of injury or illness.	136
Total		707

WSIB-reportable Injuries and Illnesses

“Health care” and “Lost time” injuries and illnesses, noted in Table 1, must be reported by the OPS to the Workplace, Safety, and Insurance Board (WSIB). Consequently, these types of injuries and illnesses are referred to as “WSIB-reportable.” Table 2 provides a more detailed breakdown of the 226 WSIB-reportable injuries and illnesses that occurred in 2023.

Table 2: Summary of WSIB-reportable Injuries and Illnesses from 2023

Injury/Illness Category	Description	Number of Incidents
Musculoskeletal	Includes sprains, strains, physical overexertion, soft tissue injuries, or repetitive strain injuries	55

Slips Trips Falls	Occurs when a member slips, trips, or falls	18
Contact	Occurs when a member strikes a person or object, (or when a member is struck by), cut, scratched, or pinched by an object	37
Psychological	Occurs when a member is exposed to a psychological stressor(s)	53
Exposure	Occurs when a member is exposed to a known or suspected biological, chemical, or physical agent	25
Motor Vehicle Incident	Occurs because of a motor vehicle accident	9
Assault	Occurs when a member is physically assaulted by another person	17
Other	Not covered by any other defined category	12
Total		226

The most frequent injury and illness category in 2023 was “musculoskeletal”. Events causing these sorts of injuries include lifting, pushing, pulling, awkward postures, overexertion, and repetitive movements. Resulting injuries and illnesses include sprains, strains, soft tissue injuries, and repetitive strain injuries.

Other noteworthy findings from the 2023 WSIB-reportable injury and illness data include:

- 90% of injuries and illnesses involved sworn members.
- 28% of sworn injuries and illnesses were musculoskeletal in nature.
- 32% of sworn injuries and illnesses resulted from pursuing, arresting, or otherwise interacting with non-compliant individuals.
- 8% of sworn injuries and illnesses resulted from training activities.
- 10% of injuries and illnesses involved civilian members of which 65% were psychological in nature and resulted from traumatic/stressful events.

Frequency and Severity

Frequency refers to how often WSIB-reportable injuries and illnesses occur. Severity refers to how long injured and ill workers were away from work due to “Lost Time” injuries or illnesses. Table 3 summarizes OPS’s frequency and severity rates from 2021 to 2023.

Table 3: Frequency and Severity Rates for 2021-2023

Statistic	2021	2022	2023	Interpretation
Frequency (%)	10.7	11.8	10.9	In 2023, approximately 11% of OPS members reported an injury or illness that resulted in the need for medical care and/or time away from work. Frequency decreased by approximately 1% in 2023 compared to 2022.
Severity (Hours)	1,559	1,645	1,791	In 2023, the average amount of time away from work by OPS members who needed time due to an injury or illness was 1,791 hours per injury or illness. Severity increased by 9% in 2023 compared to 2022.
FTEs Lost	95.2	105.2	117.1	In 2023, when the lost time for all members was combined, it was equivalent to 117.1 full-time employees being off work for the entire year due to injury or illness. Full Time Equivalents (FTEs) Lost was 11% higher in 2023 compared to 2022.

OPS Trends

Table 4 shows the number of WIIRFs received by OPS between 2021 and 2023.

Table 4: Number of WIIRFs: 2021-2023

Incident Severity Category	2021	2022	2023
Incident Only	496	405	421
First Aid	42	45	60
Health Care	84	106	90
Lost Time	127	133	136
Total	749	689	707

Compared to 2022, submitted WIIRFs that identified an event as “Incident Only” increased by 4%. The number of First Aid increased by 33%. Lost Time severity is demonstrating a leveling off with an increase of only 2%. The number of Health Care events decreased by 15%. The total number of WIIRFs submitted increased by 3%.

Year-to-year variation in the number of incidents is expected. As OPS continues to collect and analyze data in future years, the ability to provide meaningful statistical analysis will improve. This will allow for objective determination of whether observed year-to-year variations are significant in nature, or simply within normal variation.

Comparisons to Other Employers

There is limited public or published police-specific data against which the OPS can compare workplace injury and illness statistics. Provincial associations (e.g., Public Service’s Health and Safety Association of Ontario, Ontario Police Health & Safety Association) are working with the WSIB to produce data against which individual police services can compare their own frequency and severity rates in a meaningful way. In 2022, 11 police agencies shared their data with each other to begin to build understanding of each other’s experience with members requiring WSIB. Of those that shared, the OPS had the third lowest percentage of sworn officers being away from work due to PTSD diagnosis.

Post traumatic stress claims account for 71.1% of all mental stress claims for police services in Ontario. This increase in allowed mental stress claims and associated days

is driven by presumptive legislation. Since 2016, 24.6% of all allowed Ontario police service claims are mental stress related, accounting for approximately 76% of all days lost. In looking at WSIB claim data (not OPS specific), when a member sustains a physical injury, 87% return to work within 3 months. When a member sustains a psychological injury, 35% return to work after 6 months.

Direct Costs

Direct costs are those costs that are incurred exclusively because of workplace injuries and illnesses. Direct costs include things such as: wages, healthcare costs, pensions, survivor benefits, non-economic loss costs, and administrative fees. While the direct costs vary year-to-year due to variance and healthcare costs, these are comprised of factors that the OPS does not have direct control over, including legislative and contractual obligations.

Direct costs associated with injuries and illnesses from 2021 to 2023 are summarized in Table 5.

Table 5: Direct costs of Workplace Injuries and Illnesses for 2021-2023

Year	Cost
2021	\$13,148,290
2022	\$13,455,415
2023	\$15,871,172

Direct costs in 2023 were \$15,871,172. These costs were approximately 15% higher than costs for 2022.

A portion of increased direct costs were attributable to the increase in both injury and illness frequency and severity. Increased frequency and severity, or FTEs lost, can result in higher costs associated with wages, increased medical costs, and increased WSIB-imposed administrative fees. The provisional administrative fees in 2023 were 18.3% as compared to the actual rate in 2022 that was 19.9%. The confirmed administrative fee for 2023 will not be provided until mid-year 2024. These fees are administrative in nature and are in addition to any WSIB claim-related costs.

A portion of costs (\$725,846) is associated with permanent WSIB awards related to individuals who are away from work indefinitely due to workplace injuries or illnesses. These injuries or illnesses occurred before the amalgamation of the OPS, and some of those individuals will never return to work. The OPS cannot affect those costs; however,

can help reduce costs moving forward by taking measures to minimize the frequency and severity of new workplace injuries and illnesses.

The OPS' Wellness Program has helped to create an environment in which members are increasingly comfortable reporting psychological injuries and illnesses and seeking treatment for such psychological injuries and illnesses. As the OPS' wellness culture continues to evolve it is expected that the Wellness Program will help reduce WSIB costs through prevention and by decreasing the severity of psychological injuries and illnesses. One such program is the Support and Reintegration program.

The Support and Reintegration Program outlines a comprehensive, supportive, and interactive program to assist an employee who is experiencing an emotional, cognitive, or physical reaction to a critical incident and/or an exposure to a stressful event(s), as well as supporting employees returning to the workplace after an extended absence.

The commitment to building wellness programs, resources, and supports for our members, families, and retirees will impact not only our culture of care but will also positively affect our abilities to build public trust and confidence and meaningfully contribute to community safety and well being.

Indirect Costs

Workplace injuries and illnesses can result in many indirect costs, including decreased productivity; decreased worker morale; diminished service performance; and increased administrative effort spent on early and safe return to work efforts.

It is difficult to quantitatively evaluate these indirect costs, however, conventional estimates suggest that the ratio of indirect costs to direct costs commonly range from 1:1 up to 5:1. The range of this ratio underscores that it is not only the direct costs that are impactful but indirect costs as well.

Contributing Factors and Corrective Actions

WIIIRFs are designed to capture information about factors that may have contributed to incidents. Supervisors are expected to identify what corrective actions, if any, should be implemented to reduce the risk that similar incidents will occur in the future. Tables 6 and 7 summarize information about contributing factors and corrective actions gathered from WIIIRFs submitted in 2023.

Table 6: Contributing Factors Identified on WIIRFS in 2023.

Type of Contributing Factors	% of WIIRFs Indicating Contributing Factor Type
Environmental	14%
Equipment	2%
Policy/Procedure	0%
Training	1%
No Contributing Factors Identified	83%

Table 7: Corrective Actions Identified on WIIRFS in 2023.

Corrective Actions Identified?	% of Completed WIIRFS
Yes	4%
No	96%

Potential contributing factors were identified on 17% of WIIRFs. Corrective actions were identified on 4% of WIIRFs. Increasing the frequency at which contributing factors and corrective actions are identified has the potential to reduce the frequency and severity of future workplace injuries and illnesses.

The OPS is committed to improving the identification of corrective measures that could be taken to reduce injuries to our members. We continue to provide supervisors with tools that help them complete thorough investigations following workplace injuries, illnesses, and incidents. Investment of time and resources in continued monitoring of these factors has the potential to mitigate risk. Further analysis of the way OPS supervisors complete WIIRFs will provide insight into approaches that may be useful for improving the quality of post-incident investigations that occur. One approach would be to provide OPS supervisors with incident investigation training that can equip the supervisor with the necessary skills to determine root causes and contributing factors, as well as implementing the appropriate corrective actions to prevent similar incidents in the future.

Return to Work Strategies

At the end of Q4 2023, four disability case managers -- two for non-occupational injuries and illnesses, and two for occupational injuries and illnesses -- were managing 501 cases.

- 251 cases involved formal medical accommodations (169 involve the member working within their substantive position and 82 involve the member working outside of their substantive position); and
- 250 cases involved absences from work.

Identifying modified duties for members when formal medical accommodations are validated is required by the Ontario Human Rights Code under its Duty to Accommodate; however, the practice also allows for members to stay engaged in work, be supported in their recovery, and mitigate the financial and resource impact of a member being away from work.

The Support and Reintegration program, allows for a comprehensive, supportive, and interactive program designed to assist an employee who is experiencing an emotional, cognitive, or physical reaction to a critical incident and/or an exposure to a stressful event(s). The AMU and Wellness sections work with the insurance case managers (WSIB and LTD) and in consultation with treatment providers to assist members with a safe and healthy return to work.

It is this type of member-centric program that will assist our members in reaching their full potential state of health. The member-centric focus is also our approach in assisting our members to identify suitable work when restrictions are identified.

The Health, Safety and Wellness Unit works collaboratively with other sections in seeking the best outcome for the members. The OPS remains committed to delivering on recommendations outlined within the Ontario Chief Coroner's Expert Panel on Police Officer Deaths by Suicide "Staying Visible, Staying Connected for Life". In fact, it was this report that resulted in the implementation of the Wellness Portal and the hiring of the Wellness Resource Liaison position and the continued growth of the outreach portion of our Wellness Unit.

The Wellness Portal has allowed members at work, or on leave, as well as their families, and retirees to stay connected to the myriad of services and programs available.

Utilization metrics demonstrate the Wellness Portal continues to have new users visit the site to gather information. In 2023 we also increased our social media presence to expand our reach to those who may be away from work for an extended period and to

families who may be needing a way to identify resources for their loved one. We also look for ways to collaborate with other units and sections to share wellness resources for those who are not actively at work.

The Wellness Resource Liaison plays a critical role in supporting members, families, retirees and engagement with other OPS units and external stakeholders. This position serves as a supportive “bridge” between the member and the service by way of reach-outs offering health and wellness supports. This role has allowed for the implementation of identifying proactive and innovative ways to connect with members across the organization. This work meaningfully contributes to a healthier and psychologically safer workplace.

In 2023, our Wellness Resource Liaison volunteered to be the secondary handler to our new National Service Dog, Cindy. Wounded Warriors Canada donated our Facility Dog. It is through partnerships with organizations like Wounded Warriors, that we can provide our members with a variety of services and programs. The Wellness Resource Liaison offers to bring Cindy to debriefs after critical incidents, to return to work meetings after extended periods of leave, and other wellness related events as a support and comfort to members during these challenging times.

In 2023 we added 22 new peer supporters to our Peer Support program for a total of 55 peer supporters. In addition to Peer Supporters being available to members, families, and retirees, we also identified the need to engage their expertise in new ways. Peer Supporters were also eager to participate and contribute to a supportive environment by coming out to events like 9RunRun, Recruit Dinners and debriefs. We also continue to look for opportunities to partner with other First Responder agencies.

In 2023, the Early Intervention (EI) program saw an overall 2.9% rise in all threshold alert types. The total number of threshold alerts for 2023 was 4853. The threshold alert for critical incidents had an increase of 22.5% from 2022 to 2023, which means there were 2262 instances where members, which includes Communications Centre personnel, responded to 3 critical incidents or more within 30 days. Critical incidents are defined as any call for service relating to death. If there is a disturbing call, but it doesn't meet the definition it isn't included as a critical incident.

On average 125 members worked more than 50 hours of overtime in 30 days per month. From these EI metrics we can extrapolate that service demand impacts our members. As an example, in October 2023, due to the Zelensky visit, Panda Game and POTUS visit we had 245 overtime threshold alerts.

There were 170 members who had an interaction with the wellness team, which resulted in 413 support communications, and we know this number is under reported.

In 2024, we are engaging with external vendors and providers like PSPNet, Wounded Warriors and other mental health professionals to provide first responder specific programs for our members, families, and retirees. We are also engaging in a Wellness Evaluation so we can continue to improve, develop, and grow our Wellness programs for our members, families, and retirees.

These new initiatives, in conjunction with the development and implementation of growing our wellness programming like Peer Support, Early Intervention, and the Support and Reintegration programs, demonstrate OPS's commitment to the health and well-being of our members and their families, and retirees.

Recommendations

The OPS should take all reasonable precautions to create and maintain healthy and safe workplaces. This, in turn, will help minimize workplace injuries and illness rates. As outlined by the Occupational Health and Safety Act and OPS Policy 3.06: Health and Safety, everyone at the OPS has a role to play in the creation and maintenance of healthy and safe workplaces.

Table 8 summarizes some specific initiatives that were undertaken by the OPS in 2023 in an effect to help reduce injury and illness rates.

Table 8: Selected 2023 Health & Safety-related Initiatives.

Initiative	Anticipated Outcome
The Wellness Evaluation	Through a comprehensive wellness evaluation, we can continue to build programs and services available to support members and families. Holistically improve the health of members, helping reduce the frequency and severity of workplace injuries and illnesses in addition to keeping those at work, well at work.
Ergonomic assessments for individual workstations and specialized applications.	Identification and mitigation of risk factors that can contribute to musculoskeletal injuries. In 2023, 72

	ergonomic assessments were completed. Recommendations to improve individual workstations were provided in all 72 assessments.
Annual Ergonomic Assessments Summary Report	Review of data will assist with improved consideration of ergonomic principles during workspace design and equipment procurement to reduce risks of musculoskeletal injuries. Ergonomic design principles are included in future procurement practices for personnel equipment (e.g., clothing, equipment, vehicles, and workstations).
Continued focus on Early & Safe Return to Work	Minimize the amount of lost time without increasing the risk of further harm. The implementation and growth of the Support and Reintegration program supports early and safe return to work principles.
Incident investigation training and continued review of incident contributing factors and corrective actions.	Improved understanding of methods for enhancing incident investigations performed by all supervisors across the Service with the intention of reducing frequency and severity of workplace incidents and illnesses. Supervisors who successfully complete accident investigation training will be able to identify root causes and contributing factors of incidents, as well as implement corrective actions that can mitigate similar incidents from occurring in the future. In 2023 , we also saw an opportunity to collaborate with the City to create a more informative Injury on Duty Report.

<p>Collaborating with OPS sections to raise awareness for specific occupational hazards.</p>	<p>Members are educated regarding the risks of exposure to occupational hazards and the control measures that can help reduce exposure. Members are also educated on how to identify and evaluate specific occupational hazards based on the duties of their operations. For example, the Wellness and Safety Branch is collaborating with the Tactical Unit to develop a standard operating procedure that will aid the Unit to determine the types of hazards present prior to occupying a new building space for their training. This will help the Unit to identify the types of training exercises that can be performed to ensure the health and safety of its members.</p>
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In 2024, the service will be pursuing the following activities to further protect and better the health, safety, and wellness of members:

- Revising industrial hygiene programs such as: lead control program, hearing conservation program, and respiratory protection program.
- Updating the OPS' Designated Officers program and recruiting members to become Designated Officers to provide 24/7 support for members.
- Continuing to provide training sessions to our operational leaders on accident investigation.
- Continuing to support members, retirees, and families through wellness programs like: Early Intervention, Peer Support, Health Promotion, Safe Workplace Program, Support and Reintegration, and the Abilities Management Unit.

CONSULTATION

There has been no formal public consultation process regarding the contents of this report. The Occupational Health and Safety Act prescribes that reports of this nature must be shared with specific stakeholders. Consequently, consultation with the OPS Joint Health & Safety Committee will be scheduled before the end of Q2, 2024.

FINANCIAL IMPLICATIONS

Total direct costs from 2021 to 2023 were as follows:

Budgetary Line Item	Amount Paid		
	2021	2022	2023
501093 – WSIB Admin Charges	\$2,277,994.86	\$2,073,609.98	2,119,498.19
501094 – WSIB Permanent Awards	\$2,525,485	\$730,525	\$725,846
501194 – WSIB Payments	\$1,462,315.14	\$2,908,453.02	\$3,322,135.82
Salary advances (wages)	\$5,850,121	\$6,581,403	\$8,248,139
Salary advances top-off	\$1,032,374	\$1,161,424	\$1,455,553
Total	\$13,148,290	\$13,455,415	\$15,871,172

Total direct costs in 2023 were \$15,871,172. Monthly full payment of fees is mandatory for regulatory compliance reasons. Non-compliance will result in fines imposed by the Workplace Safety & Insurance Board. There are no options for choosing different levels of service for WSIB coverage. A portion of costs is recurring and constant. A portion of costs varies with WSIB usage rates.

SUPPORTING DOCUMENTATION

Document 1 - 2023 Annual Ergonomics Report

CONCLUSION

The OPS is committed to safeguarding the health and safety of its members. We continue to review and monitor our progress, to optimize member health and safety, and minimize the various human and finance costs associated with workplace injuries and illnesses. The OPS' commitment to a duty of care applies to both our community and our members. Our commitment to promoting a healthy organization translates into a healthier membership to better serve the City of Ottawa.