



Office of the Auditor General

Follow-up to the 2011 Audit of Occupational Health and Safety

Tabled at Audit Committee - October 8, 2015



Table of Contents

Executive Summary 1

 Introduction..... 1

 Summary of the Level of Completion..... 2

 Conclusion..... 3

 Acknowledgement 3

Detailed Follow-up report..... 5

 Introduction..... 5

 Key findings of the Original 2011 Audit..... 5

 Status of Implementation of year Audit Recommendations 7

 Summary of the Level of Completion..... 40

 Conclusion..... 41

 Acknowledgement 41

Executive Summary

Introduction

The Follow-up to the 2011 Audit of Occupational Health and Safety (OHS) was included in the Auditor General's 2013 Audit Plan.

The key findings of the original year audit included:

- Improvements are needed to meet legislative and policy requirements.
- The control framework needs improvement to meet the City's needs and comply with legislative requirements.
- The OHS program is decentralized with limited performance measurement made available to management.
- The OHS Branch does not monitor the implementation of its program across the City, nor does it explicitly address contraventions of policy or legislation.
- In the Long-Term Care Branch and Solid Waste Branch, many conventional OHS practices are not being fully applied, including hazards assessment, Joint Health and Safety Committees (JHSC), training of contract employees, objective setting and evaluation of performance;
- Improving these practices would strengthen the OHS program, improve the safety culture of the City, and help reduce occupational injuries and illnesses.
- The audit estimates that the City could achieve reductions in its Workplace Safety and Insurance Board (WSIB) costs of up to \$721,000 per year if it could reduce its injury rate to the average rate of similar employers.
- In order to be compliant with legislation and reduce costs, the audit recommends that the City develop a multi-year plan for implementation of an OHS framework and establish clear objectives and targets for OHS.

Summary of the Level of Completion

The table below outlines our assessment of the level of completion of each recommendation as of April 2014.

Table 1: OAG's assessment of level of completion of recommendations

Category	% Complete	Recommendations	Number of Recommendations	Percentage of Total Recommendations
Little or no action	0 to 24	8, 11, 12, 15, 23, 24, 25, 26	8	31%
Action Initiated	25 to 49	14, 16, 22	3	11%
Partially Complete	50 to 74	2, 6	2	8%
Substantially Complete	75 to 99	1, 5, 9, 13, 18	5	19%
Complete	100	3, 4, 7, 10, 17, 19, 20, 21	8	31%
Total			26	100%

The table below outlines management's assessment of the level of completion of each recommendation as of September 2014 in response to the OAG's assessment. These assessments have not been audited.

Table 2: Management's assessment of level of completion of recommendations

Category	% Complete	Recommendations	Number of Recommendations	Percentage of Total Recommendations
Little or no action	0 to 24	8, 11, 12, 15, 23, 24, 25, 26	8	31%
Action Initiated	25 to 49	14, 16, 22	3	11%
Partially Complete	50 to 74	2, 6	2	8%
Substantially Complete	75 to 99	1, 5, 13, 18	4	15%
Complete	100	3, 4, 7, 9, 10, 17, 19, 20, 21	9	35%
Total			26	100%

Conclusion

The Employee Health, Safety and Wellness Branch has undertaken an aggressive timeline to implement all of the 2011 audit's 26 recommendations. Management plans to fully implement all recommendations by 2015. We noted important progress in the areas of performance measurement and reporting. Specifically, the yearly Employee Health, Safety and Wellness Performance Report to Executive Committee/Senior Management Committee (EC/SMC) details some objectives, targets, and achievements. We understand that approximately 20 performance measures are planned for the 2014 annual report with additional ones in 2015.

Corporate-level Hazard Identification and Risk Assessments (HIRAs) have been completed in 2013 with position-level HIRAs to commence at the time of writing this report. Management anticipate their completion in 2015.

The City reports on WSIB expenses by department but does not track component costs separately to permit more meaningful analysis, and support better monitoring and assessment of OHS program performance. Management should consider alternative approaches to achieve the intention of the original audit recommendation.

A Manager Toolkit relating to return to work and accommodations was launched on Ozone.

The City has decided not to update its 2010 inventory of modified duty positions to match employee capabilities to available work to provide timely and effective return to work. As an alternative, management's preferred action is to return an employee to their substantive position; and, as such Job Demands Analysis are undertaken which meets the intent of the recommendation.

As the branch's implementation schedule extended over three years, they are still completing some of the recommendations. As such, nine recommendations where little or no action has occurred were dependent on completing the position-level HIRA (recommendation 8, 11 and 12) or on analysing the survey data for the training needs assessment (recommendations 15 and 16) or implementation had been scheduled for completion between Q4 2014 and Q2 2015 (recommendations 23 to 26). Management continues to implement the recommendations based on the schedule provided during the original audit which extends to 2015. As such, we will conduct an additional follow-up in 2016 to determine the completeness of the implementation.

Acknowledgement

We wish to express our appreciation for the cooperation and assistance afforded the audit team by management.

The following section is the detailed follow-up report.

Detailed Follow-up report

Introduction

The Follow-up to the 2011 Audit of Occupational Health and Safety was included in the Auditor General's 2013 Audit Plan.

Key findings of the Original 2011 Audit

Our audit found that management of the City's OHS program needs improvement to meet legislative and policy requirements. More specifically, we found that:

1. As the City does not separately track the components of its WSIB costs (e.g., salaries for lost time, pensions, awards, WSIB administration costs, etc.), management lacks information to monitor and assess OHS program performance. Since introducing its Return to Work program in 2008, we found that the City's average lost time per injury/illness claim has dropped from 11.34 days in 2007 to 6.24 in 2010. The City does not track savings from this program, but we estimate it has resulted in annual savings of approximately \$1,192,000 (see Appendix C for these calculations). This estimate does not include other potential savings from indirect costs (e.g. overtime, retraining, lost revenue and lost productivity).
2. The recent development of a Draft OHS Framework is an important initiative. The framework is modeled after CSA Z1000 and supports the City's OHS Policy, but may take several years to fully implement. It is likely to place additional administrative and resource burdens on departments and branches, but OHS Branch has not yet conducted an assessment of this impact or developed a plan to guide its implementation.
3. Interviews with managers and staff in OHS Branch and line branches clearly indicated that senior management has consistently invested resources in the OHS program whenever requested.
4. We found that, while OHS Branch provides annual reporting to senior management on injury/illness statistics and OHS related costs, the information is inadequate to support senior management in directing and overseeing the OHS program. Reporting on OHS to Executive Committee is ad-hoc, as OHS is not a standing agenda item.
5. OHS Branch has not implemented a formal city-wide process to identify and assess hazards. Each branch maintains its own process for identifying workplace hazards, and the adequacy and comprehensiveness of these approaches varies significantly. Neither of the branches we examined had conducted comprehensive and formal hazard assessments, although some elements were in place.
6. There is little formal objective setting or OHS planning at either the City or department/branch levels. OHS Policy requires that Executive Committee establish and communicate annual corporate OHS objectives and that

department heads establish complementary departmental OHS objectives. Support to Executive Committee to ensure this process is followed is inadequate.

7. OHS plans were not developed at either of the branches examined, as OHS issues were generally addressed on an ad-hoc basis.
8. As comprehensive hazard assessments have not been completed at either the City or branch level, we were unable to determine if sufficient preventive and protective measures were in place to adequately mitigate existing hazards. However, we noted that many OHS programs and procedures at the corporate and branch levels required review and updating to ensure their continued appropriateness and effectiveness. There was also a lack of coordination and monitoring to ensure that branch-level OHS procedures were aligned with corporate OHS programs.
9. The comprehensiveness and formality of training programs varied significantly between the two branches examined. The Long-Term Care Branch training program is well-documented and comprehensive, while the Solid Waste Branch training program is largely informal and undocumented. Job-specific hazard assessments are required for both branches to ensure that training programs are adequate to address all workplace hazards.
10. The Solid Waste Branch employs temporary workers on a daily basis for its waste collection operations and does not provide these workers with job-related health and safety training. Rather, the City relies on an agency which provides general labourers to ensure that workers are properly trained before commencing duties with the City. Given the extent of hazards faced by these temporary workers, we do not believe that the City should rely exclusively on agency training. Ontario's Occupational Health and Safety Act (OHSA) makes the City accountable for ensuring that all workers, regardless of whether they are full-time employees or temporary contractors, are provided with information, instruction and supervision to protect their health and safety (OHSA s. 25(2)(a)). In addition to being a contravention of the OHSA, the City's practice exposes temporary workers to undue health and safety risks and could lead to significant fines. As an example, one of the City of Ottawa's waste collection contractors, BFI Canada, was recently fined \$150,000 after a temporary worker from a labour supply agency was injured while collecting recyclable material. A Ministry of Labour investigation found that the temporary worker had not been provided adequate training on safe work procedures by BFI Canada and found the company guilty of failing to provide information, instruction and supervision to the worker with respect to safe operating procedures for mobile waste collection.
11. The Return to Work Program is inconsistently applied, depending on the WSIB Consultant and supervisor involved in the case, and several opportunities exist to minimize process delays and reduce lost-time. Program documentation does not clearly articulate roles and responsibilities for all parties and does not provide a clear step-by-step process that includes specific timelines for the

completion of each step. Monitoring of the program is minimal, and there is little reporting to senior management on program effectiveness and efficiency.

12. Modified duty positions are generally identified on a case by case basis after an employee has been deemed capable of returning to work with modified duties. A city-wide listing of positions suitable for modified work is not maintained, making it difficult to identify opportunities to place employees in positions outside of their existing work unit.
13. Monitoring of the OHS program is inadequate to assess its effectiveness or identify root causes of injuries and illnesses. OHS Branch currently reports to senior management on OHS through an annual Occupational Injury/Illness Performance Report that tracks some indicators of occupational health but does not assess the effectiveness of the OHS program or its compliance with legislation. Further, no targets have been established for these measures to drive program improvement.
14. Within the two branches included in the scope of our audit, OHS monitoring activities are not comprehensive and are also inadequate to assess program effectiveness. Branch managers require greater support and oversight from OHS Branch to guide their OHS monitoring activities.
15. The City does not conduct comprehensive reviews of the OHS program at planned intervals. OHS Branch has recognized the need to conduct such reviews and has included the requirement in its Draft OHS Framework.

Status of Implementation of year Audit Recommendations

2011 Recommendation 1

That the City track WSIB component costs separately to permit more meaningful analysis, and support better monitoring and assessment of OHS program performance.

2011 Management Response

Management agrees with the recommendation.

Employee Health, Safety and Wellness will assess alternate approaches to WSIB account management and administration that will allow capture and monitoring of claim costs and assessment of OHS program performance, beginning Q3 2012 with completion by Q2 2013.

It should be noted that current WSIB account statements do not segregate individual claim costs as administration and physician fees are billed as a percentage of claim costs based on rates as defined annually by WSIB. These physician and administration fees are charged as a single cost on a monthly basis.

Costs associated with pre-amalgamation entities will be segregated from current WSIB costs to better reflect the City's current OHS program performance.

Management Representation of Status of Implementation of Recommendation 1 as of July 1, 2013

WSIB costs are allocated to departments by Finance according to a defined process twice monthly. A special administration account is used for all pre-amalgamation costs. Current WSIB cost reporting is based on these cost allocations defined by Finance.

As of April 2013, WSIB made on-line cost statements available in PDF as well as in excel formats. Reports are being developed to analyze and present this data for various components of WSIB costs, including salaries for lost time, pensions, awards, WSIB administration costs, physician costs, etc. An annual WSIB costs components report for 2013 will be prepared for submission to SMC/EC by end of Q1 2014.

A CITMT proposal was submitted in March 2013 for review of the Parklane System (disability management database), SAP and WSIB systems to enhance interface functionality and reporting capabilities to reduce manual manipulation of data and potential for error. The CITMT proposal results are anticipated to be reviewed and prioritized in the fall of 2013.

Management: % complete ***80%*****OAG's Follow-up Audit Findings regarding Recommendation 1**

The 2013 EHS&W Performance report submitted to SMC/EC on April 10, 2014 provided cost by departments and did not track WSIB component costs separately to permit more meaningful analysis, and support better monitoring and assessment of OHS program performance.

Management informed us that the Corporate IT Management Team (CITMT) proposal was deferred with no set date as it was not considered a priority.

For this recommendation to be considered complete, the City would need to track WSIB component costs separately or establish an alternative approach to achieve this objective.

OAG: % complete ***80%*****Management Representation of Status of Implementation of Recommendation 1 as of September 1, 2014**

Management agrees with the OAG's follow-up audit findings.

Alternative approaches to capturing claim costs are being investigated. Human Resources, in partnership with Finance, are exploring a data management tool to reconfigure the data into a composite for analysis. The review and solution identified is to be completed by Q4 2015.

Management: % complete ***80%***

2011 Recommendation 2

That the City assess the impact of providing a top-up to 100% of regular earnings for employees who are off work on long-term WSIB claims to determine if this benefit provides a disincentive for prompt return to work.

2011 Management Response

Management agrees with the recommendation.

The WSIB earnings top-up benefit was negotiated through collective agreements and paid to members of most employee groups from first day of a WSIB lost time claim. The correlation between WSIB long-term claims and disincentive for prompt return to work is subject to medical opinions as verified by WSIB and may result in an employee remaining off work.

It should also be noted that the WSIB maximum insurance earnings ceiling in 2010 was \$77,600.00, which is adjusted annually to reflect the average earnings in Ontario as reflected by Statistics Canada and the provisions under the Workplace Safety and Insurance Act. The rationale for salary top-up to regular earnings is to mitigate the financial disadvantage of employees injured at work. Consideration in future collective bargaining could include a review of this benefit.

Human Resources will assess the impact of top-up to 100% of regular earnings to determine if this benefit provides a disincentive for prompt return to work, beginning Q3 2012 with completion by Q2 2013.

Management Representation of Status of Implementation of Recommendation 2 as of July 1, 2013

WSIB provides several guidelines on a variety of topics including insurable earnings, which extends to benefits and varies by employer rate group.

A review of other municipal employers was conducted to determine if the WSIB top-up practice was unique to the City of Ottawa. Many unions have negotiated the top-up to WSIB loss of earnings, which is common in publicly-funded organizations, indicating that this practice is not unique to the City of Ottawa. There are multiple approaches and criteria applied to WSIB benefit calculations including the WSIB maximum insurance earnings ceiling.

ATU 279 does not have a collective agreement article that provides for top-up to earnings paid by WSIB claims. Review of WSIB claims indicates that the number of lost time claims in the ATU 279 employee group continues to be relative to other employee groups at the City. No further assessment is planned.

In general, it is not considered that the employer top-up to WSIB benefits is a disincentive for prompt return to work given that the employee must comply with any employer offer of modified and early and safe return to work or face potential benefits reduction or elimination.

<u>Management: % complete</u>	100%
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OAG's Follow-up Audit Findings regarding Recommendation 2

The review of other municipal employers conducted was not formal or documented and therefore could not be provided for review.

The ATU 279 comparison is also not a formal assessment. Management informed us that "this has been a long term view of the EHW team given the experience with ATU 279 and other City employee WSIB claims. WSIB claims have not been limited as a result of the last of WSIB top-up".

A comprehensive assessment of the impact of providing a top-up to 100% of regular earnings for employees who are off work on long-term WSIB claims will need to be completed in order for the recommendation to be considered implemented.

OAG: % complete ***50%***

Management Representation of Status of Implementation of Recommendation 2 as of September 1, 2014

Management agrees with the OAG's follow-up audit findings.

WSIB top-up is included in collective agreement language across several unions at the City and will be reviewed with the City Clerk and Solicitor's department following a further assessment of similar municipalities and their cost experience and claims trends with and without top-up. The review is to be completed by Q2 2015.

Management: % complete ***50%***

2011 Recommendation 3

That a multi-year plan to guide implementation of the Draft OHS Framework be developed and presented to senior management at the same time the Framework is presented for approval.

2011 Management Response

Management agrees with the recommendation.

Human Resources will develop a multi-year OHS Framework Implementation Plan to accompany the OHS Framework for Senior Management Committee (SMC) approval, beginning Q3 2012 with completion by Q2 2013.

Management Representation of Status of Implementation of Recommendation 3 as of July 1, 2013

An overview of the Occupational Health and Safety Management System Framework and accompanying multi-year OHS Framework Implementation Plan was received by Senior Management Committee on November 8, 2012.

Management: % complete ***100%***

OAG's Follow-up Audit Findings regarding Recommendation 3

The OHSMS Framework was approved by directors and general managers in 2012. A preliminary draft of the OHSMS Framework Implementation Plan for 2013 to 2015 inclusive was attached as Appendix 1 of the Occupational Health and Safety Management System Framework presentation to Senior Management Committee on November 8, 2012. Updates on the Framework were presented to ESMC in April 2013 and April 2014.

OAG: % complete**100%****2011 Recommendation 4**

That OHS reporting be provided to Executive Management Committee and OHS matters become a regular agenda item.

2011 Management Response

Management agrees with the recommendation based on the following:

Management will report OHS matters to Senior Management Committee (SMC) as this committee is comprised of department heads representing all City departments. These representatives have authority and responsibility to lead program implementation and address impacts. Issues of significance are escalated to Executive Management Committee for consideration and decision along with an annual executive summary OHS dashboard to reflect OHS Management System performance. OHS matters and reports will be added to the SMC meeting agenda at least semi-annually, as submitted by the Director of HR, with implementation of a 2011 OHS performance report complete by Q4 2012.

Management Representation of Status of Implementation of Recommendation 4 as of July 1, 2013

A corporate-level 2011 Employee Health, Safety and Wellness Performance Report was received by Senior Management Committee on November 8, 2012. This report was a revised format, comparative to previous annual reports, to include information related to employee health, safety and wellness beyond the traditional Workplace Safety and Insurance data and financials.

The 2012 Annual Employee Health, Safety and Wellness Performance Report was received by Senior Management Committee on April 11, 2013. This report was further revised to include additional information related to non-occupational health data, long-term disability data, departmental activities and more detailed occupational injury/illness metrics.

An Occupational Health and Safety Management System Implementation Plan update is scheduled to be presented to SMC/EC in Q4 2013.

Management: % complete**100%**

OAG's Follow-up Audit Findings regarding Recommendation 4

A review of the 2011, 2012 and 2013 Annual Employee Health, Safety and Wellness Performance reports demonstrated how the report has evolved from a purely health and safety related report to a more comprehensive overview of the branch. Starting with the 2012 report, year-over-year comparisons, objectives, and priorities were included. Additional information related to non-occupational health data; long-term disability data; departmental activities; and, more detailed occupational injury/illness metrics, etc., were also reported. A few objectives, performance indicators and achieved results have been added to the 2013 annual report which was presented to ESMC in April 2014. Management reported that they anticipate that the report will continue to be refined with more than 20 performance measures in 2014 and additional ones in 2015.

OAG: % complete **100%**

2011 Recommendation 5

That the City establish clear objectives and performance targets for OHS and ensure that managers and staff at all levels are aware of the importance of achieving them

2011 Management Response

Management agrees with the recommendation.

Human Resources will recommend OHS objectives and performance targets for approval by Senior Management Committee. Defined OHS objectives and performance targets will be communicated throughout the City. Objectives will be accurately defined including appropriate and achievable performance measures and outcome targets. Implementation will begin Q4 2012 and will be complete by Q4 2013.

Management Representation of Status of Implementation of Recommendation 5 as of July 1, 2013

The 2012 Annual Employee Health, Safety and Wellness Performance Report was received by Senior Management Committee on April 11, 2013. This report included objectives and priorities for 2013, which were approved by SMC during this meeting. Associated performance measures will be reflected in the 2013 Annual Employee Health, Safety and Wellness Performance Report planned for submission to SMC/EC by end of Q1 2014.

Management: % complete **50%**

OAG's Follow-up Audit Findings regarding Recommendation 5

We reviewed the 2013 Annual Employee Health, Safety and Wellness Performance Report tabled at SMC/EC in April 2014. Four 2012 OHS objectives, performance measures and outcomes were reported on.

We understand that over 20 performance measures are planned for 2014 with additional ones in 2015.

Management anticipates full implementation in 2015.

OAG: % complete **85%**

Management Representation of Status of Implementation of Recommendation 5 as of September 1, 2014

Management agrees with the OAG's follow-up audit findings.

The 2013 Employee Health, Safety and Wellness Performance Report is available in both official languages on Ozone and is accessible by managers and employees. Further to this, the report was distributed through Senior Management Committee and all Health and Safety Committee Co-chairs and associated management teams. The draft 2014 Employee Health, Safety and Wellness Performance Report is under development to ensure performance measures are reflective of the priority objectives established by EC/SMC in Q1 2014.

This recommendation will be considered to be complete when the 2014 Employee Health, Safety and Wellness Performance Report, which will include the associated performance measures, is presented to EC/SMC in Q1 2015.

Management: % complete **85%**

2011 Recommendation 6

That the City develop and implement a comprehensive program for conducting hazard identification and risk assessments, ensuring that branches understand what is required and providing assistance to managers as needed. As full implementation of such a program could take several years, the City should ensure that its highest risk workplaces and occupations are addressed first.

2011 Management Response

Management agrees with the recommendation.

Human Resources will establish a corporate OHS Hazard Identification and Risk Assessment Program utilizing a systematic approach to include mitigation and prevention strategies.

The City recently established an Enhanced Risk Management Framework, which considers health and safety hazard identification, assessment and risk management. This will be considered for integration into the OHS Hazard Identification and Risk Assessment Program.

The implementation plan will ensure prioritization of higher risk operations as determined by review and analysis of existing data, including MOL compliance orders, workplace safety inspections and accident trends. Objectives, targets, performance measures, procedures and programs are dependent on the outcomes identified in Recommendations 4, 8, 10, 11, 12, 22 and 25 of these assessments.

Development of the Hazard Identification and Risk Assessment Program will be conducted in phases, including: a review of current hazard and risk data (Q4 2012), program and tool development (Q1 2013), communication, training and pilot assessment (Q2 2013) and implementation including support (Q3 2013) beginning with the two branches identified in this audit for pilot of this Program. The implementation will also include engagement of JHSC's and subject matter expertise where required, beginning Q4 2012 with completion by Q2 2015.

Management Representation of Status of Implementation of Recommendation 6 as of July 1, 2013

EHSW staff along with several departmental staff involved in the 2011 OHS Audit received training on the City of Ottawa Enhanced Risk Management (ERM) Framework, which considers health and safety hazard identification, assessment and risk management. The OHS Hazard Identification and Risk Assessment Tool was then designed to align with the ERM Tool.

A corporate-level OHS Hazard Identification and Risk Assessment tool was developed collaboratively with departmental representatives involved in the Audit utilizing a systematic approach to include identification, evaluation, mitigation and prevention strategies. A complimentary training package was developed and implemented when the HIRA tool was piloted across the Environmental Services Department and Long-Term Care facilities. Feedback was reviewed and the tool was revised as the pilot sessions progressed. A draft procedure is under review. The corporate-level HIRA will be implemented across all other departments in September 2013 beginning with operations departments and with significant involvement of the Safety Consultants to ensure consistency of interpretation and application. The department-level HIRA will provide guidance with identification and prioritization of mitigations including controls while continuing to implement a position-level HIRA.

A position-level HIRA has also been developed collaboratively with departmental representatives involved in the Audit and has been piloted in a few units with several follow-up adjustments. The schedule to implement across all departments is under development and will begin in October 2013 in alignment with the schedule as defined in the management response to meet the Q2 2015 deadline.

Health and Safety Committee members will attend a special Forum on September 24, 2013 to receive an overview of the OHSMS, update on the HSC compliance tool and to review the HIRA tool with opportunity to provide functionality feedback.

Management: % complete **50%**

OAG's Follow-up Audit Findings regarding Recommendation 6

The Hazard Identification and Risk Assessment (HIRA) has become a two-tier process. Corporate-level HIRAs were completed in 2013. These included classifying and rating each hazard by category, sub-category, frequency, likelihood and impact.

Position-level HIRAs have been initiated. OHS anticipates their completion in 2015. However, position-level HIRAs have been completed for the two branches reviewed in the original audit e.g., Solid Waste and Long-term Care.

We confirmed that approximately 300 staff who are Health and Safety Committee members attended the September 24, 2013 special Forum on September 24, 2013 on the OHSMS; HSC compliance tool; and, HIRA tool.

OAG: % complete ***70%***

Management Representation of Status of Implementation of Recommendation 6 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Position-level HIRA's are 20% complete as of September 1, 2014. Human Resources recognizes that the dynamic nature of the City may require modification of positions to meet operational and technical demands. This challenge is being considered throughout this assessment period and it will be the responsibility of branches and departments to maintain and update the position-level HIRA on a go-forward basis. The remaining position-level HIRA's are to be completed by Q4 2015.

Management: % complete ***70%***

2011 Recommendation 7

That the City's senior executives develop city-wide OHS objectives.

2011 Management Response

Management agrees with the recommendation.

Senior Management Committee, through the Director of HR, will develop and approve city-wide OHS objectives for implementation, beginning Q4 2012 with completion by Q4 2013, as identified in the management response to Recommendation 5.

Management Representation of Status of Implementation of Recommendation 7 as of July 1, 2013

The 2012 Annual Employee Health, Safety and Wellness Performance Report was received by Senior Management Committee on April 11, 2013. This report included objectives and priorities for 2013, which were approved by SMC during this meeting. In addition, a request was made to all department heads to provide input regarding opportunities to improve report information and data as well as trending and development of objectives and priorities.

Management: % complete ***100%***

OAG's Follow-up Audit Findings regarding Recommendation 7

We reviewed the 2011, 2012 and 2013 Annual Employee Health, Safety and Wellness Performance Report. No objectives and priorities were noted in the 2011 report.

Both the 2012 and 2013 reports identified objectives that aligned with the ESMC approved OHS priorities for the following year.

OAG: % complete ***100%***

2011 Recommendation 8

That the City should ensure that departments and branches set OHS objectives that are aligned to City-level objectives, and set priorities to address their most significant risks and occupational hazards. The City should provide OHS expertise and support to departments and branches throughout this process to ensure appropriate objectives and plans are developed.

2011 Management Response

Management agrees with the recommendation.

Human Resources will develop processes and tools to support departments and branches in establishing OHS objectives and priorities that will address significant occupational hazards and risks in alignment with City-level objectives. This initiative is dependent on the deliverables identified in the management responses to Recommendations 6 and 12, which will be implemented beginning Q4 2012 and Q2 2013, respectively. This initiative will be extended to the two high risk branches identified by this audit, followed by roll-out to other departments in order of risk priority, beginning Q1 2013 with completion by Q4 2014.

Management Representation of Status of Implementation of Recommendation 8 as of July 1, 2013

EHSW staff consulted with the Corporate Business Services branch to understand the current process for defining corporate objectives and priorities as well as the reporting structures and formats to ensure business alignment. Further analysis and development is in progress. This initiative is dependent on the deliverables identified in the management responses to Recommendations 6 and 12, which will be implemented beginning Q4 2012 and Q2 2013, respectively and will be completed by Q2 2015. This initiative will be extended to the two high risk branches identified by this audit, followed by roll-out to other departments in order of risk priority, beginning Q1 2014 with completion by Q4 2014.

Management: % complete ***10%***

OAG's Follow-up Audit Findings regarding Recommendation 8

Corporate-level HIRAs were completed. At the time of writing this follow-up, only Solid Waste and Long-term Care branches had position-level HIRAs completed (2013).

Recommendation 8 cannot be addressed until the completion of position-level HIRAs. These are scheduled to be undertaken in 2014 and 2015.

OAG: % complete **20%**

Management Representation of Status of Implementation of Recommendation 8 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Objectives have been established at the corporate level based on completion of the corporate-level HIRA's. Position-level HIRA's are 20% complete as of September 1, 2014. Position groups have been categorized into three levels of hazard priority so that highest hazard positions are reviewed earlier than lower hazard positions. Results of the assessments are reviewed to ensure any priority objectives and targets are identified and implemented in a timely fashion.

This recommendation will be considered to be complete when position-level HIRA's are completed by Q4 2015.

Management: % complete **20%**

2011 Recommendation 9

That the City ensure that all JHSC meet at least once every three months and conduct workplace inspections once every month to ensure compliance with the Ontario Health and Safety Act regulations.

2011 Management Response

Management agrees with the recommendation.

Human Resources will establish a process to monitor Joint Health and Safety Committees to ensure they meet at least every three months and conduct workplace safety inspections at least monthly to ensure compliance with the Ontario Occupational Health and Safety Act. Implementation will begin Q3 2012 and will be complete by Q1 2013.

Management Representation of Status of Implementation of Recommendation 9 as of July 1, 2013

A corporate-level process and tracking tool to monitor JHSC meeting and workplace inspection compliance was established and tested in 2012 with corporate roll-out to provincial and federally regulated worksites across the City of Ottawa in Q1 2013. The tracking tool is monitored on a monthly basis by Safety Consultants to identify compliance concerns and opportunities for improvement. A departmental JHSC compliance report is submitted to JHSC co-chairs on a monthly basis for review and improvement as required.

A corporate roll-up report of JHSC meeting and workplace safety inspection compliance is planned annually in the 2013 Annual EHSW Performance Report for submission to SMC/EC by end of Q1 2014.

Management: % complete***100%*****OAG's Follow-up Audit Findings regarding Recommendation 9**

A corporate-level process and tracking tool was established to monitor JHSC meetings and workplace inspections. By the end of the first quarter the issue of missing data had for the most part been resolved. As the tool demonstrates that JHSC was not fully in compliance with the Ontario Health and Safety Act regulations at all times during 2013 (i.e., meeting at least once every three months and workplace inspections once a month) we believe some additional work remains. We did note that the 2013 Annual EHSW Performance Report, included the reporting of numbers of HSC meetings as well as workplace inspections scheduled versus completed.

For this recommendation to be considered fully implemented, JHSC will need to be fully in compliance with the OHS Act.

OAG: % complete***95%*****Management Representation of Status of Implementation of Recommendation 9 as of September 1, 2014.**

Management agrees with the OAG's follow-up audit findings, however further progress has been made.

Management considers this recommendation to be fully implemented. Tools, processes and a monitoring framework are in place and committee members are knowledgeable of regulatory requirements. Ongoing monitoring is conducted by Safety Consultants and non-conformances are followed up to identify root causes and associated corrective measures (i.e. ensuring a back-up representative is identified should a member become ill or otherwise unable to attend a committee meeting). Further strategies include e-mail communications to committee members to remind them of expectations, recognition of compliance performance and escalation of non-conformances to the attention of the applicable department head and Director of HR for further corrective action as required. Processes are well established and closely monitored with noted improvement in performance in Q1-Q3 2014.

Management considers implementation of this recommendation to be complete.

Management: % complete***100%*****2011 Recommendation 10**

That the City develop a strategy to prioritize the development and maintenance of corporate OHS policies and procedures and ensure they are updated in a timely manner. Prioritization should be linked to both risk and need.

2011 Management Response

Management agrees with the recommendation.

Human Resources will review and update where required, the current process to prioritize OHS policy and procedure development and maintenance, ensuring it considers organizational and operational risk as well as regulatory obligations. Implementation will begin Q3 2012 and will be complete by Q2 2013.

Management Representation of Status of Implementation of Recommendation 10 as of July 1, 2013

OHS corporate policies and procedures are developed and refreshed in accordance with the requirements of the Corporate Administrative Policy Framework, which includes a cyclical review process to ensure policies are relevant and current. An inventory of corporate policies is maintained by Corporate Business Services and is reported annually to the Executive Committee. A recent review of OHS policies identified additional corporate policies and procedures to be added to the corporate inventory and these will follow the corporate procedure for regular updates and reporting on a go-forward basis, taking into consideration as appropriate, priorities identified through the hazard identification and risk assessment process.

Management: % complete **100%**

OAG's Follow-up Audit Findings regarding Recommendation 10

We concur that corporate OHS policies and procedures are developed, reviewed and updated in accordance with the requirements of the Corporate Administrative Policy Framework. Five corporate OHS policies and procedures are on the Corporate Administrative Policy monitoring tool. Of these, one review was in progress; one had been completed in 2013 and three had a next review year of 2014. Additional policies and programs have been added and are being tracked through the corporate inventory.

OAG: % complete **100%**

2011 Recommendation 11

That once comprehensive hazard assessments have been completed at the branch level, OHS procedures should be developed for hazards not adequately covered by existing procedures. Where a corporate-level OHS program or procedure exists but are insufficient for the branch, supplemental procedures should be developed.

2011 Management Response

Management agrees with the recommendation.

Human Resources will develop a process that requires review and assessment of the effectiveness of control plans to mitigate identified hazards and associated risks. Control plans may include administrative controls not limited to the development or enhancement of existing programs or procedures, and if required and none exist, new or supplemental programs or procedures will be developed. This initiative is dependent on the the deliverables identified in the management responses to Recommendations 6 and 12, which will be implemented beginning Q4 2012 and Q2 2013, respectively. Implementation of this recommendation will begin Q1 2013 and will be complete by Q2 2015.

Management Representation of Status of Implementation of Recommendation 11 as of July 1, 2013

As per the Management Representation of the Status of Implementation of Recommendation 6, a corporate-level OHS Hazard Identification and Risk Assessment tool was developed collaboratively with departmental representatives involved in the Audit utilizing a systematic approach to include identification, evaluation, mitigation and prevention strategies. A complimentary training package was developed and implemented when the HIRA tool was piloted across the Environmental Services Department and Long-Term Care facilities. Feedback was reviewed and the tool was revised as the pilot sessions progressed. A draft procedure is under review. The corporate level HIRA will be implemented across all other departments in September 2013 beginning with operations departments and with significant involvement of the Safety Consultants to ensure consistency of interpretation and application. The department-level HIRA will provide guidance with identification and prioritization of mitigations including controls while continuing to implement a position level HIRA.

A position-level HIRA has also been developed collaboratively with departmental representatives involved in the Audit and has been piloted in a few units with several follow-up adjustments. The schedule to implement across all departments is under development and will begin in October 2013 at which time hazard data will begin to be collected and assessed for purposes of mitigation in alignment with the schedule as defined in the management response to meet the Q2 2015 deadline.

Health and Safety Committee members will attend a special Forum on September 24, 2013 to receive an overview of the OHSMS, update on the HSC compliance tool and to review the HIRA tool with opportunity to provide functionality feedback.

Management: % complete

0%

OAG's Follow-up Audit Findings regarding Recommendation 11

We confirmed that approximately 300 staff who are Health and Safety Committee members attended the September 24, 2013 special Forum on September 24, 2013 on the OHSMS; HSC compliance tool; and, HIRA tool.

HIRAs were undertaken as a two-stage process: corporate and position levels. Corporate-level HIRAs were completed in 2013. The position-level HIRA will be undertaken in 2014 with completion anticipated for 2015. Management informed us that supplemental policies will be developed at the branch level with the support of OHS once position-level HIRAs are completed.

The position-level HIRAs for the two branches (e.g., Solid Waste and Long-term Care) reviewed in the original audit were completed.

OAG: % complete

20%

Management Representation of Status of Implementation of Recommendation 11 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

As noted in Management's Representation of Status of Implementation of Recommendation 8, as of September 1, 2014, objectives have been established at the corporate level based on completion of the corporate-level HIRA's. Position-level HIRA's are 20% complete as of September 1, 2014. Position groups have been categorized into three levels of hazard priority so that highest hazard positions are reviewed earlier than lower hazard positions. This assessment process identifies gaps where corporate programs and procedures and/or departmental and branch-specific procedures are not sufficient to address the hazards. Departmental and branch procedures may be utilized or amended to address similar hazard types in other branches or departments. Implementation is in progress.

This recommendation will be considered to be complete when position-level HIRA's are completed by Q4 2015.

Management: % complete

20%

2011 Recommendation 12

That the City provide support to departments and branches in developing preventive and protective measures to address significant risks identified during hazard assessments.

2011 Management Response

Management agrees with the recommendation.

Employee Health, Safety and Wellness, along with other subject matter experts across the City, will support departments and branches in identifying preventive and protective measures to mitigate risks associated with significant hazards for identification in the control plans. This initiative is dependent on the OHS Hazard Identification and Risk Assessment Program identified in the management response to Recommendation 6 that will begin Q4 2012. This initiative will begin implementation in Q2 2013 and will be complete by Q2 2015.

Management Representation of Status of Implementation of Recommendation 12 as of July 1, 2013

As per the Management Representation of the Status of Implementation of Recommendation 6, a corporate-level OHS Hazard Identification and Risk Assessment tool was developed collaboratively with departmental representatives involved in the Audit utilizing a systematic approach to include identification, evaluation, mitigation and prevention strategies. A complimentary training package was developed and implemented when the HIRA tool was piloted across the Environmental Services Department and Long-Term Care facilities. Feedback was reviewed and the tool was revised as the pilot sessions progressed. A draft procedure is under review. The corporate level HIRA will be implemented across all other departments in September 2013 beginning with operations departments and with significant involvement of the Safety Consultants to ensure consistency of interpretation and application. The department-level HIRA will provide guidance with identification and prioritization of mitigations including controls while continuing to implement a position-level HIRA.

A position-level HIRA has also been developed collaboratively with departmental representatives involved in the Audit and has been piloted in a few units with several follow-up adjustments. The schedule to implement across all departments is under development and will begin in October 2013 in alignment with the schedule as defined in the management response to meet the Q2 2015 deadline.

Health and Safety Committee members will attend a special Forum on September 24, 2013 to receive an overview of the OHSMS, update on the HSC compliance tool and to review the HIRA tool with opportunity to provide functionality feedback.

Management: % complete **10%****OAG's Follow-up Audit Findings regarding Recommendation 12**

We confirmed that over 300 staff who are Health and Safety Committee members attended the September 24, 2013 special Forum on September 24, 2013 on the OHSMS; HSC compliance tool; and, HIRA tool.

HIRAs were undertaken as a two-stage process: corporate and position levels. Corporate-level HIRAs were completed in 2013. The position-level HIRA will be undertaken in 2014 with completion anticipated for 2015. Management informed us that supplemental policies will be developed at the branch level with the support of OHS once position-level HIRAs are completed.

The position-level HIRAs for the two branches (e.g., Solid Waste and Long-term Care) reviewed in the original audit were completed.

OAG: % complete **20%****Management Representation of Status of Implementation of Recommendation 12 as of September 1, 2014.**

Management agrees with the OAG's follow-up audit findings.

As noted in Management's Representation of Status of Implementation of Recommendation 8, as of September 1, 2014, objectives have been established at the corporate level based on completion of the corporate-level HIRA's. Position-level HIRA's are 20% complete as of September 1, 2014. Position groups have been categorized into three hazard priority levels so that highest hazard positions are reviewed earlier than lower hazard positions. Safety Consultants are facilitating these assessments, increasing awareness of corporate programs and procedures and capturing the existence of departmental and branch-specific procedures and processes in the HIRA template as well as providing consultation to mitigate significant hazards in a timely fashion. Implementation is in progress.

This recommendation will be considered to be complete when position-level HIRA's are completed by Q4 2015.

Management: % complete **20%**

2011 Recommendation 13

That the City develop and implement a centralized monitoring system to track and identify when OHS programs and procedures must be reviewed.

2011 Management Response

Management agrees with the recommendation.

Human Resources will implement a monitoring system to track review dates for OHS programs and procedures, beginning in Q4 2012 with completion by Q2 2013.

Management Representation of Status of Implementation of Recommendation 13 as of July 1, 2013

An OHS policy and procedures tracking tool was developed, which aligns with the Corporate Administrative Inventory tool to capture existing corporate health and safety programs, policies and procedures. Corporately, programs and procedures require review at a minimum of every three years, however based on legislative changes and best industry practices, the review period could be more frequent. The frequency will be dependent on the tool developed in association with Recommendation 10. HIRA data collection will provide further opportunity to inventory policies and procedures. The expected completion date has been revised to Q4 2013.

Management: % complete **50%**

OAG's Follow-up Audit Findings regarding Recommendation 13

OHS has developed a Policy and Procedure Document Review – Work Instructions to track and identify when OHS programs and procedures are to be reviewed. These draft Work Instructions were used for the first time in February 2014. Management anticipates reviewing these during spring 2014 with a view of modifying these as required.

OAG: % complete **75%**

Management Representation of Status of Implementation of Recommendation 13 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Human Resources continues to monitor the Corporate Administrative Inventory tool to ensure conformance with the draft process, which will be finalized in Q1 2015. The internal legislative review work instruction has been fully implemented and a quarterly review of applicable health and safety legislation is being conducted. A communication process to affected departments has been included in the work instruction in the event that new legislation or changes to existing legislation impacts departments. The legal registry review is a standing item at all bi-weekly Safety unit meetings, with appropriate action plans documented.

This recommendation will be considered to be complete when position-level HIRA's are completed by Q4 2015.

Management: % complete ***75%*****2011 Recommendation 14**

That OHS training needs assessments be completed in a timely manner for all workers to determine individual workplace and job-specific OHS training needs.

2011 Management Response

Management agrees with the recommendation.

Human Resources will develop a Training Needs Assessment Program for all workers by job category and workplace, to be implemented across the City, beginning with the two branches identified in this audit for pilot, beginning Q4 2012 with completion by Q4 2013.

Management Representation of Status of Implementation of Recommendation 14 as of July 1, 2013

Employee Health Safety and Wellness collaborated with Learning and Development as well as departmental training units to develop a Training Needs Assessment Tool for all workers by job category and workplace. Training program data is being collated to: determine current state corporately, assess current needs assessment mechanisms and, to better understand tracking mechanisms for potential future state centralization. The expected completion date has been revised to Q3 2014.

Management: % complete ***30%*****OAG's Follow-up Audit Findings regarding Recommendation 14**

A Training Needs Assessment Tool on 30 Health and Safety training topics was developed and issued to the key representatives in the training coordinator network on October 2013. Results of 14 of the 24 surveys completed have been verified.

OAG: % complete ***30%***

Management Representation of Status of Implementation of Recommendation 14 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Progress on the verification of the training needs surveys was deferred to address the Mandatory Health and Safety Awareness Training. The Mandatory Health and Safety Training enforced by the Ministry of Labour (MOL) under regulation was implemented at the City in Q2 2014 through the alignment of the MOL e-learning for supervisors and workers with the City's Learning Management System. As of August 29, 2014 supervisor training is 91% complete and worker training is 49% complete. This initiative prompted the establishment of a system that will allow registration, tracking and recording of all future training, including health and safety training. Verification of remaining training needs surveys will continue through 2015 and will align with the HIRA process.

The expected completion date has been revised to Q4 2015.

Management: % complete **30%**

2011 Recommendation 15

That the City should ensure that departments and branches work with OHS Branch to develop required training programs, ensuring that training is standardized and, where possible, harmonized and consistently delivered across the City.

2011 Management Response

Management agrees with the recommendation.

Employee Health, Safety and Wellness will develop a process to standardize training programs and harmonization where practicable with consistent delivery methods across the City. Implementation will begin Q3 2012 and will be complete by Q3 2013.

Management Representation of Status of Implementation of Recommendation 15 as of July 1, 2013

Fact-finding indicates that subject matter training titles are not consistent. Training methods need to be identified to reflect awareness, knowledge transfer and practical application and, if testing was completed and assessed.

The Ministry of Labour has also announced upcoming requirements for mandatory training for employees and supervisors in 2014 including proof of training, which must be considered in harmonization with existing training and new training.

Standardization of training will be dependent on the training needs assessment indicated in Recommendation 14. The expected completion date has been revised to Q4 2014.

Management: % complete **10%**

OAG's Follow-up Audit Findings regarding Recommendation 15

A Training Needs Assessment Tool was developed and issued to the key representatives in the training coordinator network on October 2013. OHS is presently verifying the data collected for the purpose of determining the current state corporately and current needs assessment mechanisms. Analysis of the training needs assessment (recommendation 14) need to be completed prior to developing required training programs, ensuring standardization and, harmonizing and consistently delivered these across the City.

The Ministry of Labour has announced a new regulation requiring mandatory health & safety awareness training for employees and supervisors starting July 1, 2014 including the requirement that preserve proof of completion.

OAG: % complete **20%**

Management Representation of Status of Implementation of Recommendation 15 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

As noted in Management's Representation of Status of Implementation of Recommendation 14, progress on the verification of the training needs surveys was deferred to address the Mandatory Health and Safety Awareness Training. The Mandatory Health and Safety Training enforced by the Ministry of Labour (MOL) was implemented at the City in Q2 2014 through the alignment of the MOL e-learning for supervisors and workers with the City's Learning Management System. Of paramount significance to the successful completion of supervisor training at 91% and worker training at 49% as of August 29, 2014, was the establishment of departmental training representatives who led the departmental and branch coordination of communications, unique requirements and formats and compliance monitoring at the departmental level. These representatives, including the training coordinator network, will be critical to all future health and safety training needs analysis, coordination and monitoring.

Verification of remaining training needs surveys will continue through 2015 and will align with the HIRA findings. The expected completion date has been revised to Q4 2015.

Management: % complete **20%**

2011 Recommendation 16

That completed training be tracked at the department or branch level for each worker and periodically verified by OHS Branch.

2011 Management Response

Management agrees with the recommendation.

Human Resources will expand implementation of the training and events module in SAP to include tracking of OHS training by employee. Training reports will be captured by department and periodically verified by the OHS Branch. Implementation will begin Q3 2012 and will be complete by Q4 2013.

Management Representation of Status of Implementation of Recommendation 16 as of July 1, 2013

The implementation of the training and events module in SAP was expanded to include corporate safety training courses in May 2012. A CITMT proposal was submitted in March 2013 for on-line training registration and training records management at the department level in SAP with results to be released in September 2013 for potential implementation in 2014.

As stated in the management response to Recommendation 14 training program data is being collated to: determine current state corporately, assess current needs assessment mechanisms and to better understand complexities of tracking systems and integration requirements for potential future state centralization.

The expected completion date has been revised to Q3 2014.

Management: % complete **25%**

OAG's Follow-up Audit Findings regarding Recommendation 16

No funding was allocated to the CITMT proposal submitted in March 2013 for on-line training registration and training records management at the department level in SAP. A Training Needs Assessment Tool was developed and issued to the key representatives in the training coordinator network on October 2013. OHS is presently verifying the data collected for the purpose of determining the current state corporately and current needs assessment mechanisms. Analysis of the training needs assessment (recommendation 14) need to be completed prior to developing required training programs, ensuring standardization and, harmonizing and consistently delivered these across the City.

OAG: % complete **25%**

Management Representation of Status of Implementation of Recommendation 16 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings, however further progress has been made.

As noted in Management's Representation of Status of Implementation of Recommendation 14, progress on the verification of the training needs surveys was deferred to address the Mandatory Health and Safety Awareness Training. The Mandatory Health and Safety Training enforced by the Ministry of Labour (MOL) was implemented at the City in Q2 2014 through the alignment of the MOL e-learning for supervisors and workers with the City's Learning Management System. Training records were populated by unique event number in the City's SAP training

module for tracking purposes. This process will be utilized on a go-forward basis to allow departments and branches to self monitor training compliance.

The expected completion date has been revised to Q4 2015.

Management: % complete

40%

2011 Recommendation 17

That the City review and update the Return to Work Program to clarify roles and responsibilities, outline clear procedures for all parties, and ensure that employees receive an information package at the time of injury that includes: a description of the employee's obligations in the return to work process; a clear expectation of immediately returning page 3 of Form 8 to the employer; a letter to the health care practitioner explaining the City's commitment to assisting the employee's return to work; and where appropriate, an offer of modified work.

2011 Management Response

Management agrees with the recommendation.

Human Resources will update the Return to Work Program to ensure that managers, supervisors and workers are knowledgeable of roles, responsibilities and procedures. Work on this program will include the review and implementation of an information package administered at time of occupation injury or illness, which communicates the City's commitment to assisting the employee's early and safe return to work, including modified work duty assignments as appropriate. Implementation will begin Q3 2012 and will be complete by Q2 2013.

Management Representation of Status of Implementation of Recommendation 17 as of July 1, 2013

Tools have been developed and distributed to Human Resources Business Partners and to some departments for feedback and testing. The Return to Work Program identified roles, responsibilities and procedures. Information is to be provided to the employee at the time of occupational injury or illness, which communicates the City's commitment to assist the employee's early and safe return to work, including modified work duty assignments as appropriate. The revised program and tools have been presented to managers by WSIB Consultants and will be officially rolled-out and communicated by the end of September 2013.

Management: % complete

95%

OAG's Follow-up Audit Findings regarding Recommendation 17

On October 9, 2013, a Management Bulletin referenced the Early and Safe Return to Work Resources. It provided links to Supervisory and Employee Responsibility checklists, Note to the Health Care Provider, Return to Work/Workplace Accommodation Plan Template, etc.

A Workplace Wellness and Productivity Network was issued via a Management Bulletin in February 4, 2014; and, included a hyperlink to the newly launched Manager's Toolkit. It noted that this Toolkit had been introduced at the Manager's Learning Forum on January 10, 2014. The Program, Procedures and Guidelines included a subsection on Workplace accommodation and return to work. The guidelines were reviewed December 17, 2013.

In addition, a Tips & Tools to Succeed in Managing Attendance, Workplace Accommodation & Early & Safe Return to Work Workshop is available to managers through the Workshop and Training for Managers section.

On March 17, 2014, the Director of Human Resources sent an email to all network users introducing "Your Employee Workplace Wellness and Productivity Network" referencing that information on the safe return to work and workplace accommodation can be found on Ozone.

OAG: % complete

100%

2011 Recommendation 18

That the City should regularly monitor the Return to Work program to assess its effectiveness and identify opportunities for improvement. Performance indicators and targets should be established to support the continuous improvement of the program.

2011 Management Response

Management agrees with the recommendation.

Human Resources will define performance indicators and targets and monitor Return to Work Program performance, at least annually, to identify opportunities for improvement. Implementation will begin Q3 2012 and will be complete by Q2 2013.

Management Representation of Status of Implementation of Recommendation 18 as of July 1, 2013

Performance indicators and targets for Return to Work performance are being finalized. Currently data capture is being performed manually as there is limited capability within the existing case management tool (Parklane).

The expected completion date has been revised to the end of Q4 2013 for reporting in the 2013 Annual EHSW Performance Report by the end of Q1 2014.

Management: % complete

75%

OAG's Follow-up Audit Findings regarding Recommendation 18

Management informed us that performance measures were not included in the EHS&W performance report but have been drafted:

- Number of employees with clearance to return to work from WSIB who returned to work;

- Number of employees with clearance to return to work from WSIB that did not return to work; and,
- Average duration of RTW from WSIB notification to actual return.

This recommendation will be considered fully implemented once the performance indicators have been finalized and reported on as part of an EHSW annual performance report.

OAG: % complete ***75%***

Management Representation of Status of Implementation of Recommendation 18 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Performance measures are being assessed for effectiveness using current data and will be reported in the 2014 Employee Health, Safety and Wellness Performance Report, which will be submitted to EC/SMC in Q1 2015.

Management: % complete ***75%***

2011 Recommendation 19

That the City should create an inventory of modified duty positions and match employee capabilities to available work to provide timely and effective return to work.

2011 Management Response

Management agrees with the recommendation.

An inventory of modified duty positions was developed and finalized in July 2011 in response to an OAG recommendation in the 2008 Audit of Sick Leave Management. Human Resources will review and update the current inventory of modified duty positions along with associated information, including job demands analysis and job descriptions, where required. This review and update of the inventory of modified duty positions for matching of employee capabilities and timely return to work will begin Q3 2012 and will be complete by Q2 2013.

Management Representation of Status of Implementation of Recommendation 19 as of July 1, 2013

The inventory of modified duty positions developed in July 2011 was reviewed however, it is management's experience that it is rare that an employee cannot be accommodated within his or her own substantive position. In these situations, alternate positions within their unit, branch and department are considered respectively, referencing Job Demands Analysis to ensure a match with the employee's functional abilities. Where a Job Demands Analysis does not exist or is out of date, a new analysis is completed by an ergonomics consultant. The use of Job Demands Analysis, rather than an inventory of modified duty positions, has proven to be a more efficient and effective approach to early and safe return to work.

Management: % complete**100%****OAG's Follow-up Audit Findings regarding Recommendation 19**

Management provided us with the March 2010 Inventory of Existing Temporary Modified Duties/Positions for the City of Ottawa. During interviews management informed us that the inventory was not used as the preferred action is to return an employee to their substantive position; and, that accommodations not to the employee's substantive position often cause Labour Relations difficulties.

Management informed us that: "Modified Duties Inventory was developed in July 2011 and was reviewed in July 2013 however the WSIB direction moved more strongly to accommodation in the employees substantive position deeming the modified duties listing not be useful on a go forward basis. The modified duties were not formally reviewed as modified duties but rather as a resource for early and safe return to work."

Although the present practice of using Job Demands Analysis differs from the original recommendation, there would be no benefit to maintaining an inventory that is seldom or not used at all. In 2013, OHS performed: 483 office ergonomics (assessments and follow-ups); 108 non-occupational return to work (assessments and follow-ups); 58 WSIB return to work (assessments and follow-ups); 40 job demands analysis, 11 training session on injury prevention; and, 96 equipment review – ergonomic analysis.

We were informed that the data is not tracked for non-WSIB cases, however, Parklane System, Occupational Health and Safety's software provides data on employees who returned to modified work from WSIB. A total of 242 employees returned to modified work from WSIB during 2013.

OAG: % complete**100%****2011 Recommendation 20**

That modified duty work assignments not be limited to the employee's current department or branch. Opportunities for temporarily transferring the employee to another department or branch should be considered whenever possible.

2011 Management Response

Management agrees with the recommendation.

Human Resources will develop a modified work process that will require suitable modified duty work assignments to be offered in the injured/ill employee's substantive position first. In situations where this is not possible, modified duty work assignments will consider positions inside the injured/ill employee's unit, branch and department. Where this is not successful, other departments will be searched for suitable opportunities respecting the employee's right to accommodations and union collective agreements as dictated by legal precedence on a case-by-case basis.

Implementation across all departments will begin Q3 2012 and will be complete by Q2 2013.

Management Representation of Status of Implementation of Recommendation 20 as of July 1, 2013

Workplace Accommodation Procedures require suitable modified duty work assignments to be offered in the injured/ill employee's substantive position first. In situations where this is not possible, modified duty work assignments will consider positions inside the injured/ill employee's unit, branch and department. Where this is not successful, the department head will be advised to ensure no further considerations can be made. Other departments will be searched for suitable opportunities respecting the employee's right to accommodations and union collective agreements with involvement of the employee's union representative. Communications regarding the deployment of the procedures have been prepared for roll-out through Corporate Communications in a Management Bulletin and will be placed on Ozone in September 2013.

Management: % complete **100%**

OAG's Follow-up Audit Findings regarding Recommendation 20

During interviews management informed us that the preferred action is to return an employee to their substantive position; and, that accommodations not to the employee's substantive position often cause Labour Relations difficulties.

A Workplace Wellness and Productivity Network was issued via a Management Bulletin in February 4, 2014; and, included a hyperlink to the newly launched Manager's Toolkit. It noted that this Toolkit had been introduced at the Manager's Learning Forum on January 10, 2014. The Program, Procedures and Guidelines included a subsection on Workplace accommodation and return to work. The guidelines were reviewed December 17, 2013. The References section includes the Workplace Accommodation Policy as revised August 2012.

A Manager's Guide for Workplace Accommodation and Return to Work states that Workplace Accommodations may include modified work, which may involve a change in the task or hours of work, a physical change in the work area and in the equipment used.

In addition, a Tips & Tools to Succeed in Managing Attendance, Workplace Accommodation & Early & Safe Return to Work Workshop is available to managers through the Workshop and Training for Managers section.

OAG: % complete **100%**

2011 Recommendation 21

That documented return to work plans be developed for all WSIB lost-time cases, and should include signoff by the WSIB Consultant, the supervisor and the injured employee.

2011 Management Response

Management agrees with the recommendation.

Human Resources will revise the return to work process, as identified in management response to Recommendation 17, to require documentation of return to work plans for all WSIB lost-time cases with evidence of sign-off by all associated parties, across all departments, beginning Q3 2012 with completion by Q2 2013.

Management Representation of Status of Implementation of Recommendation 21 as of July 1, 2013

A Return to Work Procedure requiring documented return to work plans with sign-off by associated parties and support tools have been developed with input from various stakeholders in tandem with the revised accident report, which is to be rolled out officially by the end of September 2013. Education sessions have been initiated by WSIB consultants with their client groups to ensure understanding and compliance.

Management: % complete **95%**

OAG's Follow-up Audit Findings regarding Recommendation 21

On October 9, 2013, a Management Bulletin referenced the Early and Safe Return to Work Resources. It provided links to Supervisory and Employee Responsibility checklists, Note to the Health Care Provider, Return to Work/Workplace Accommodation Plan Template, etc.

A Workplace Wellness and Productivity Network was issued via a Management Bulletin in February 4, 2014; and, included a hyperlink to the newly launched Manager's Toolkit. It noted that this Toolkit had been introduced at the Manager's Learning Forum on January 10, 2014. The Program, Procedures and Guidelines included a subsection on Workplace accommodation and return to work. The guidelines were reviewed December 17, 2013.

During 2013, 30 training sessions on the new WSIB ESRTW tools were provided (5 of these were information training sessions).

OAG: % complete **100%**

2011 Recommendation 22

That OHS performance measures and targets be established at the City, department and branch levels. Performance measures should include OHS regulatory compliance measures and targets (e.g., frequency of OHS compliance issues, average time required to close identified OHS compliance issues), OHS program implementation measures and targets (e.g., ratio of hazard assessments completed, ratio of required procedures in place), and JHSC activity measures and targets (e.g., JHSC meeting compliance, inspection compliance).

2011 Management Response

Management agrees with the recommendation.

Human Resources, in consultation with City departments and branches, will establish processes to ensure OHS performance measures and targets, as identified above are established, maintained and tracked by Q4 2014. This initiative is dependent on the deliverables identified in the management response to Recommendation 8 and will begin simultaneously in Q1 2013 with completion by Q4 2014.

Management Representation of Status of Implementation of Recommendation 22 as of July 1, 2013

JHSC activity performance measures and targets are well defined for meetings and workplace safety inspections and are reported on a monthly basis to Health and Safety Committees and departmental managers, along with accident information.

A tracking tool has been established to record all correspondence and site visits from regulatory agencies, such as the Ministry of Labour (MOL) and Human Resources and Skills Development Canada (HRSDC). The tracking tool captures all information related to work refusals, reporting of critical injuries and regular blitz/inspections, by purpose for the visit / correspondence, along with the affected department/branch. All reports, orders for compliance, directives and/or assurance of voluntary compliance are attached to the tracking tool for reference. Notices of compliance issued to regulators as a response to orders are recorded on the tracking tool through to completion. A summary of the tracking tool data will be provided in the 2013 Employee Health, Safety and Wellness Performance Report for completion by Q1 2014.

As per the original management response, this initiative is dependent on the deliverables identified in the management response to Recommendation 8, which began in Q1 2013 and are expected to be completed by Q4 2014.

Management: % complete

25%

OAG's Follow-up Audit Findings regarding Recommendation 22

A corporate-level process and tracking tool was established to monitor JHSC meetings and workplace inspections. By the end of the first quarter the issue of missing data had for the most part been resolved. As the tool demonstrates that JHSC was not in compliance with the Ontario Health and Safety Act regulations at all times during 2013 (i.e., meeting at least once every three months and workplace inspections once a month) we believe some additional work remains.

The 2013 Annual EHSW Performance Report tabled at ESMC, included the reporting of numbers of HSC meetings as well as workplace inspections scheduled versus completed. It also provided OHS objectives, performance measure and outcome relating to OHS legal requirements.

Position-level HIRAs need to be completed before this recommendation can be fully implemented.

OAG: % complete ***40%*****Management Representation of Status of Implementation of Recommendation 22 as of September 1, 2014.**

Management agrees with the OAG's follow-up audit findings.

The position-level HIRA results are being reviewed as they are being completed to determine priority objectives and targets and will be included in the annual EHSW Performance Report. Where HSCs are not meeting compliance, Safety Consultants follow-up with HSC Co-chairs to understand root causes and identify mitigations, including back-up representatives.

The expected completion date has been revised to Q4 2015.

Management: % complete ***40%*****2011 Recommendation 23**

That performance against OHS targets be tracked by departments and branches and reported to the OHS Branch on a quarterly basis.

2011 Management Response

Management agrees with the recommendation.

Human Resources will collect data related to performance against defined OHS targets from departments and branches on a quarterly basis. This initiative is dependent on the deliverables identified in the management response to Recommendation 22 that will be complete by Q4 2014. This initiative will begin Q2 2014 and will be complete by Q1 2015.

Management Representation of Status of Implementation of Recommendation 23 as of July 1, 2013

As per the original management response, this initiative is dependent on the deliverables identified in the management response to Recommendation 22 that will be complete by Q4 2014. This initiative will begin Q2 2014 and will be complete by Q1 2015.

Management: % complete **0%**

OAG's Follow-up Audit Findings regarding Recommendation 23

As per management's response, the implementation of recommendation 23 is dependent on recommendation 22 and is therefore schedule for Q2 2014 with a completion of Q1 2015. Management's timeline has not changed from the original audit.

OAG: % complete **0%**

Management Representation of Status of Implementation of Recommendation 23 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Human Resources is exploring current performance measure reporting processes by branches and departments to determine opportunities for alignment.

The expected completion date has been revised to Q4 2015.

Management: % complete **0%**

2011 Recommendation 24

That the City prepare quarterly summaries of performance against target and provide these to managers at all levels of the City to support more proactive management of OHS.

2011 Management Response

Management agrees with the recommendation.

Human Resources will summarize performance measures against defined targets and provide information to all management level staff on a quarterly basis. This initiative is dependent on the deliverables identified in the management response to Recommendation 8 that will be complete by Q4 2014. This initiative will be complete by Q1 2015.

Management Representation of Status of Implementation of Recommendation 24 as of July 1, 2013

As per the original management response, this initiative is dependent on the deliverables identified in the management response to Recommendation 8 that will be complete by Q4 2014. Implementation of this initiative will be complete by Q1 2015.

Management: % complete **0%**

OAG's Follow-up Audit Findings regarding Recommendation 24

As per management's response, the implementation of recommendation 23 is dependent on recommendation 8 and is therefore scheduled for completion by Q1 2015. Management's timeline has not changed from the original audit.

OAG: % complete **0%**

Management Representation of Status of Implementation of Recommendation 24 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

Human Resources are exploring the inclusion of performance measures in existing reports, such as quarterly dashboard reports, in addition to the monthly reporting to HSC's and management teams.

The expected completion date has been revised to Q4 2015.

Management: % complete **0%**

2011 Recommendation 25

That the City prepare an annual City of Ottawa OHS performance report for senior management that includes these recommended measures and a qualitative assessment of the City's performance on OHS matters and an analysis of root causes for areas of concern and recommended corrective actions.

2011 Management Response

Management agrees with the recommendation.

Human Resources will enhance the current Annual OHS Report to Senior Management Committee to include OHS performance measures as defined by the City, a qualitative assessment, analysis of root causes for significant areas of concern and recommendations for corrective action. This initiative is dependent on the deliverables identified in the management responses to Recommendations 6, 8, 12, 22 and 23 that will be complete between Q4 2014 and Q2 2015. The initial report including available OHS performance data will be submitted to Senior Management Committee by Q3 2014 for the year 2013 with a city-wide OHS performance report submission by Q3 2015 for the year 2014.

Management Representation of Status of Implementation of Recommendation 25 as of July 1, 2013

As per the original management response, this initiative is dependent on the deliverables identified in the management responses to Recommendations 6, 8, 12, 22 and 23 that will be complete between Q4 2014 and Q2 2015. The initial report including available OHS performance data will be submitted to Senior Management Committee by Q3 2014 for the year 2013 with a city-wide OHS performance report submission by Q3 2015 for the year 2014.

Management: % complete **0%**

OAG's Follow-up Audit Findings regarding Recommendation 25

As per management's response, the implementation of recommendation 23 is dependent on recommendation 6, 8, 12, 22 and 23 and is therefore schedule for completion of Q3 2015. Management's timeline has not changed from the original audit.

OAG: % complete **0%**

Management Representation of Status of Implementation of Recommendation 25 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings, however further progress has been made.

The 2013 annual Employee Health, Safety and Wellness Performance Report included OHS performance data as submitted to SMC. Additional performance data will be included in the 2014 Employee Health, Safety and Wellness Performance Report, which will be submitted to EC/SMC in Q1 2015 as performance targets are defined and monitoring is enhanced.

The expected completion date has been revised to Q1 2016.

Management: % complete **15%**

2011 Recommendation 26

That the City conduct comprehensive reviews of the OHS management control framework at planned intervals (at least annually) to assess its suitability, adequacy, and effectiveness, and to identify opportunities for continual improvement. These results should be reported to senior executives to permit integration with objective setting and resource allocation decisions.

2011 Management Response

Management agrees with the recommendation.

Human Resources will review the OHS Framework implementation and ongoing performance on an annual basis and provide findings and identified opportunities for improvement in a report to Senior Management Committee. This initiative is dependent on the deliverables identified in the management response to Recommendation 3 that will be complete by Q2 2013. The initial report including this information will be submitted by Q1 2014 for the year 2013.

Management Representation of Status of Implementation of Recommendation 26 as of July 1, 2013

As per the original management response, this initiative is dependent on the deliverables identified in the management response to Recommendation 3 that will be complete by Q4 2013. The initial report including this information will be submitted by Q1 2014 for the year 2013.

Management: % complete **0%**

OAG's Follow-up Audit Findings regarding Recommendation 26

As stated in recommendation 3, on November 8, 2012, SMC were provided with OHSMS Framework Implementation Plan spanning from Q4 2013 to Q4 2015. An update on the Framework was tabled at ESMC in April 2014.

OAG: % complete **15%**

Management Representation of Status of Implementation of Recommendation 26 as of September 1, 2014.

Management agrees with the OAG's follow-up audit findings.

An OHS Framework update to EC/SMC is planned in Q4 2014 and again in Q1 2015.

The expected completion date has been revised to Q1 2016.

Management: % complete **15%**

Summary of the Level of Completion

The table below outlines our assessment of the level of completion of each recommendation as of *date* 2014.

Table 3: OAG's assessment of level of completion of recommendations (Repeat of Table 1 in Executive Summary)

Category	% Complete	Recommendations	Number of Recommendations	Percentage of Total Recommendations
Little or no action	0 to 24	8, 11, 12, 15, 23, 24, 25, 26	8	31%
Action Initiated	25 to 49	14, 16, 22	3	11%
Partially Complete	50 to 74	2, 6	2	8%
Substantially Complete	75 to 99	1, 5, 9, 13, 18	5	19%
Complete	100	3, 4, 7, 10, 17, 19, 20, 21	8	31%
Total			26	100%

The table below outlines management's assessment of the level of completion of each recommendation as of *date* in response to the OAG's assessment. These assessments have not been audited.

Table 4: Management's assessment of level of completion of recommendations (Repeat of Table 2 in Executive Summary)

Category	% Complete	Recommendations	Number of Recommendations	Percentage of Total Recommendations
Little or no action	0 to 24	8, 11, 12, 15, 23, 24, 25, 26	8	31%
Action Initiated	25 to 49	14, 16, 22	3	11%
Partially Complete	50 to 74	2, 6	2	8%
Substantially Complete	75 to 99	1, 5, 13, 18	4	15%
Complete	100	3, 4, 7, 9, 10, 17, 19, 20, 21	9	35%
Total			26	100%

Conclusion

The Employee Health, Safety and Wellness Branch has undertaken an aggressive timeline to implement all of the 2011 audit's 26 recommendations. Management plans to fully implement all recommendations by 2015. We noted important progress in the areas of performance measurement and reporting. Specifically, the yearly Employee Health, Safety and Wellness Performance Report to Executive Committee/Senior Management Committee (EC/SMC) details some objectives, targets, and achievements. We understand that approximately 20 performance measures are planned for the 2014 annual report with additional ones in 2015.

Corporate-level Hazard Identification and Risk Assessments (HIRAs) have been completed in 2013 with position-level HIRAs to commence at the time of writing this report. Management anticipate their completion in 2015.

The City reports on WSIB expenses by department but does not track component costs separately to permit more meaningful analysis, and support better monitoring and assessment of OHS program performance. Management should consider alternative approaches to achieve the intention of the original audit recommendation.

A Manager Toolkit relating to return to work and accommodations was launched on Ozone.

The City has decided not to update its 2010 inventory of modified duty positions to match employee capabilities to available work to provide timely and effective return to work. As an alternative, management's preferred action is to return an employee to their substantive position; and, as such Job Demands Analysis are undertaken which meets the intent of the recommendation.

As the branch's implementation schedule extended over three years, they are still completing some of the recommendations. As such, nine recommendations where little or no action has occurred were dependent on completing the position-level HIRA (recommendation 8, 11 and 12) or on analysing the survey data for the training needs assessment (recommendations 15 and 16) or implementation had been scheduled for completion between Q4 2014 and Q2 2015 (recommendations 23 to 26). Management continues to implement the recommendations based on the schedule provided during the original audit which extends to 2015. As such, we will conduct an additional follow-up in 2016 to determine the completeness of the implementation.

Acknowledgement

We wish to express our appreciation for the cooperation and assistance afforded the audit team by management.