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INTRODUCTION

Governments around the world are at various stages of fundamental reform driven by economic pressures, growing social conflict and public dissatisfaction with government.

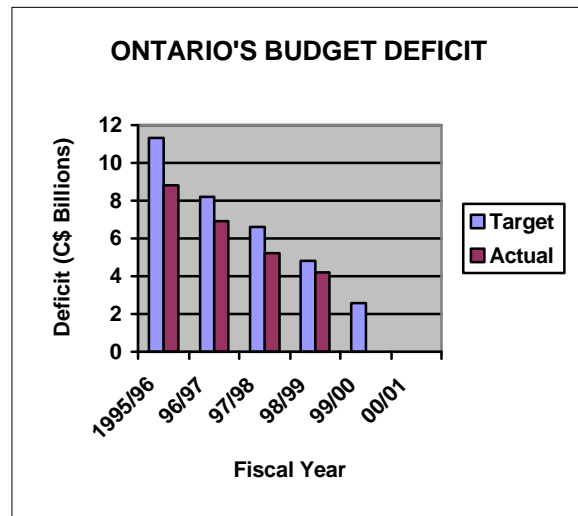
In Ontario, the current government took office in June 1995. It had a clear, well-articulated political agenda of balancing the budget, reducing taxes, achieving a smaller more accountable government, and eliminating red tape. The government has moved aggressively on that agenda.

The reform within the Ontario public service initially focused on the urgent need to get the financial affairs of the province in order. Although the fiscal agenda was the initial driver for change, developing a vision and strategic direction was critical to guide executives in their decision-making. That vision is an Ontario Public Service that is smaller, more integrated in its operations, with clear accountability frameworks, a public service that focuses on core businesses and continuously improves its service delivery to the public.

In the context of government wide reform, Ontario's health and safety system has been undergoing major changes. The fiscal imperative to make the cost of the workers' compensation system sustainable and the need to reduce Ministry of Labour expenditures were the initial triggers for change. A cost-effective, coherent, coordinated injury and illness prevention strategy is emerging. Workplaces are changing. In Ontario, the service and small business sectors are growing while manufacturing and resource industries are employing fewer workers. Health and safety policies and programs are responding. Organizations forming part of the province's health and safety system are beginning to collaborate after decades of trying to do it all on their own. Innovative initiatives are being tried, some showing significant promise in reducing workplace injuries and illnesses. Great change, challenge and opportunity will characterize the future in Ontario workplace health and safety.

ONTARIO PUBLIC SERVICE REFORMS

The Ontario Public Service is being transformed. As it is in many governments, the initial driver for change was a fiscal imperative to eliminate annual budgetary deficits. In 1995 the annual deficit amounted to \$11 Billion, approximately 20% of the total government budget¹. Significant reductions in the cost of operating the provincial government had to be made. Programs and services had to be curtailed and/or delivered more cost effectively. Clearly the civil service had to downsize. Each Ministry was given a specific financial goal that included a 30% reduction in administration. In addition to delivering on the administrative reduction Ministries had to determine which of their programs or services could be eliminated or provided by someone other than government or delivered more cost effectively. As ministries developed their individual business plans, government-wide strategies were developed and launched to improve customer service, internal structures and processes while achieving the financial goals.



A New Vision

A new vision of the Ontario Public Service has emerged². It is smaller in size, with integrated operations and clear accountability frameworks. Government will continue to set overall provincial policy but it will do so in a more integrated and coherent manner.

The public service is focusing on delivering its core business and ensuring quality service delivery by striving to be customer-centred, one that thinks “outside-in”. Ministries are moving away from providing direct service delivery to a service management role. In some cases municipalities will provide the services previously delivered by provincial ministries. In others, services are being provided by private sector organizations under contract to or in partnership with the provincial government.

Dramatic improvements in service are being achieved, in several instances by exploiting information technology. For example, citizens can now renew their vehicle registrations and driver’s licenses at electronic kiosks (ServiceOntario) accessible 24 hours a day. Business can register new corporations electronically through Ontario Business Connects in a few minutes, eliminating weeks of delay. Most ministries have set up home pages on the Web providing current information 365 days per year to anyone with access to the internet.

The service quality vision is to provide the citizens of Ontario with information and services when, where and how they want them.

There are several major projects underway to further improve internal structures and processes. One example is the setting up of a Shared Services Bureau to provide common administrative support to all ministries for services such as purchasing and payroll, helping them to cope with the 30% reduction in individual ministry administrative budgets. The province is making a huge investment in information technology to move to a common platform and implement common service-wide human resource and financial systems. A third example is a study being done to identify ways to improve the structures and processes of all ministries involved in inspection, investigation and enforcement.

Quality Service

A key strategic direction is to improve the quality of services provided to the citizens of Ontario. Government-wide quality service standards have been set for office hours, telephone service and handling of complaints. An Ontario Public Service framework for quality service has been established. This

¹ 1998 Ontario Budget , Budget Papers – Jobs for the Future, Today - May 5, 1998

² A Framework for Action, Building The Ontario Public Service For The Future - June 1997

framework is modeled on service quality measurement systems used by the private sector. It identifies six cornerstones and related evaluation criteria for measuring internal processes key in a service quality organization. These cornerstones are:

- Leadership
- Customer focus
- Processes
- People
- Planning
- Partners and suppliers

Five pilot ministries, including the Ministry of Labour, will use this framework to establish a benchmark measurement of their internal processes related to service quality. This year these ministries will develop and implement a service quality improvement plan and begin a formalized continuous service quality improvement process.

THE MINISTRY OF LABOUR

The Ontario Ministry of Labour has three core businesses: occupational health and safety, employment rights and responsibilities and labour management services. The Ministry's goal is to ensure safe, fair and harmonious workplaces. Achieving this goal while still remaining responsive to the rapidly changing workplace environment requires the Ministry to deliver programs and services in ways that are innovative and efficient.

The Ministry's key strategies are to:

- Focus the Ministry's role on setting, communicating and enforcing fair and reasonable workplace standards while encouraging greater self-reliance in achieving these standards in the workplace
- Establish fair workplace standards that are flexible enough to respond to the demands of the new global economy, and which encourage new investment and job creation
- Remain firmly committed to a strong enforcement program, aimed at helping those employees in greatest need, and
- Improving service to the Ministry's customers

As noted earlier, the Ministry of Labour is one of five pilot ministries who are carrying out baseline assessments and developing a service quality improvement plan. The assessment of the Ministry will involve trained assessors interviewing approximately 200 employees of the Ministry representing a diagonal cross-section of the organization and its agencies. An analysis of this data will identify a few vital priorities for the Ministry to focus on during the next year. These assessments will be carried out annually and the priority actions will be incorporated into the next year's business plan of the Ministry, a beginning to a process of continuous improvement in service quality.

Several ministries including the Ministry of Labour have carried out customer surveys to identify gaps in and ways to improve customer service. In March 1998 over 1,300 users of the Ministry's services were interviewed by a consulting firm contracted to identify gaps between client expectations and satisfaction level with the service they received. In health and safety, clients rated the following attributes as most important to them:

- Information is accurate and consistent
- Staff are impartial and provide fair treatment
- Concerns are fully heard and understood
- Staff are knowledgeable and have a complete grasp of the issues
- Confidentiality is maintained throughout the process
- Inquiries are dealt with in a professional and courteous manner

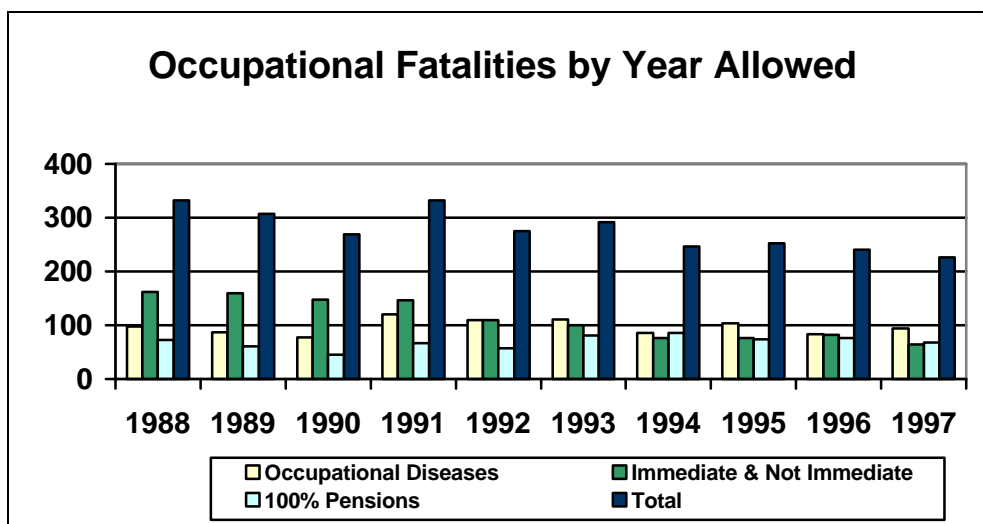
- Relevant information needed is quickly and easily obtained
- Matters are dealt with in a timely fashion
- Messages are handled or returned promptly
- Services are available during convenient hours
- Flexibility is demonstrated in accommodating client schedules

It was a pleasant surprise to find that clients generally were more satisfied with the level of service than Ministry management anticipated. The survey results are a benchmark upon which the Ministry's client service improvement efforts will be compared. It is planned that these client satisfaction surveys will be repeated at two-year intervals, giving time for service improvement initiatives to take hold.

Ontario's Occupational Health and Safety Legislation & System

The goal in occupational health and safety is to make Ontario workplaces among the safest in the world. A specific numerical goal of reducing the overall lost time injury frequency by 30% starting in 1995 was set by the Minister of Labour³.

It was realized that not everyone would agree to the lost time injury frequency as the best single numerical measure of health and safety performance. Some would argue that workplace deaths are more appropriate. Others would choose the cost of workplace injuries. Still others would measure any workplace injury, ranging from injuries requiring first aid to injuries resulting in worker deaths. There are problems with trying to select any one specific measure for health and safety performance. For example: with workplace deaths, the number of deaths attributable to a given year is difficult to determine due to long latency periods with some occupational diseases, and in Ontario all deaths of persons on 100% disability pension are counted notwithstanding that the cause of death may not be work related⁴. This is complicated by the recognition that changes in policy on what is an allowable claim for compensation can skew the data. For example, increases in allowed occupational diseases can be attributable to changes in policy or greater awareness by workers that they should submit a compensation claim.



Note: see footnote 4

In Ontario, 1995, the lost time injury frequency was chosen as the key measure of health and safety performance to emphasize the need to focus initially on prevention of serious injuries to workers.

The philosophy in Ontario is that workplace health and safety, productivity and quality are the responsibility of those in the workplace; owners, employers, supervisors and workers. Government's role in workplace health and safety is to create an environment that encourages workplaces to want to improve

³ Ministry of Labour - 1998-1999 Business Plan

⁴ Workplace Safety and Insurance Board – Statistical Supplement to the 1997 Annual Report

their health and safety and to set and enforce minimum standards. It is realized that many workplaces expend considerable effort on health and safety and often far exceed minimum standards. This self-reliance is encouraged and key to advancing health and safety. The government will never have sufficient resources to enforce compliance in all workplaces. Enforcement resources must be targeted to workplaces where enforcement will have maximum impact. To promote self-reliance, the legislation and related standards must be easy for those in the workplace to understand and apply.

THE LEGISLATION

In Ontario, the principal health and safety legislation consists of the Workplace Safety and Insurance Act (WSIA) January 1, 1998 and the Occupational Health and Safety Act (**the Act**).

The Workplace Safety and Insurance Act

The Workplace Safety and Insurance Board (the Board) is a scheduled agency of government and is responsible for implementing the WSIA. It has a mandate for promoting safer and healthier workplaces and preventing occupational injury and illness through the funding of research, and the provision of information, training and assistance to workplaces. The Board also has programs to rehabilitate injured workers, promote early and safe return to work, and where that is not possible, to pay injured workers compensation. The Board is funded by an assessment levied against employers' payroll, that assessment currently averaging \$2.59 per \$100 payroll. The actual assessment varies between industrial sectors based largely on the cost of paying to treat and compensate injured workers. Eligible employers covered by the Board get "insurance" coverage for their workers through the Board in exchange for workers giving up their right to sue employers for any injuries the workers may incur. The cost of on-the-job injuries is substantial. In 1996 the Board paid \$2.4 Billion in benefits to injured workers. The costs of the pain and suffering to workers and those close to them, as well as the lost productivity in workplaces are immeasurable.

During the past decade, the costs of occupational injuries and illnesses have spiraled upward resulting in a substantial unfunded benefits liability. The legislation has been overhauled to reduce costs, to give the Board the prevention mandate and to strengthen obligations for self-reliance in return to work. The Board is currently undergoing massive internal change to make its programs and services more effective in preventing injury and industrial disease and in achieving early return to work of injured workers. The Board has a variety of legislated tools available it can use to achieve its mandate. It can and does change the assessment rate against entire industrial sectors based on their injury and illness "insurance" costs. The Board can and does penalize or reward individual employers by increasing or decreasing their assessments dependent on their health and safety performance. These assessments based on injury/illness experience ratings or health and safety program audits are strong and effective incentives for getting management in workplaces to focus on reducing workplace injuries and illnesses. The prevention mandate is the responsibility of a newly formed Prevention Division within the Board. It provides \$62 Million in funding to sector specific Safe Workplace Associations (SWA's) who provide information, training and health and safety expertise to their member firms in their specific industrial sectors such as: construction, mining, forestry, manufacturing, health care, education, electrical utilities, farming, transportation and municipal.

The Occupational Health and Safety Act

The Occupational Health and Safety Act (**the Act**), proclaimed in 1978, arose out of a Royal Commission investigating labour's concerns over lung cancers in uranium mines. **The Act** established the internal responsibility system (IRS) as the foundation on which a broader occupational health and safety system was built. Under the IRS, responsibility for workplace health and safety is shared among management and workers. Under **the Act**, while the employer is ultimately responsible for workplace health and safety, every employee shares in that responsibility. It is the line organization; managers, supervisors and workers who have direct and primary responsibility for safety, productivity and quality in the workplace. **The Act** also established the joint health and safety committee (JHSC) as a key support mechanism in the operation of the IRS. This has sometimes led to the mistaken notion that the JHSC is the most important component of the IRS. A well-functioning committee can improve communications on health and safety issues within the workplace. It can be an effective joint problem-solving forum between

management and worker representatives. It can provide the employer with a vehicle to assess the effectiveness of their health and safety policies and programs. However, its role is to make recommendations to the employer. It is the employer, through its line organization, who has the responsibility, authority and accountability for a safe and healthy workplace.

In 1978, **the Act**, with its emphasis on internal responsibility, represented a revolutionary approach to legislating occupational health and safety in Ontario. **The Act** (with a few subsequent amendments to strengthen the IRS including the worker's right to know) and the occupational health and safety system that supports the IRS have served the province well. In the past twenty years, Ontario's workplace fatality rate has been cut in half and lost-time injuries have shown a significant and ongoing decline.

In 1997 the Ministry released a discussion paper⁵ on a review of **the Occupational Health and Safety Act**. The paper identified specific issues on which input was sought. It recognized that the existing legislative framework stresses process and procedure rather than outcomes. It emphasizes government involvement and does not adequately recognize the responsibility and accountability of the workplace parties. The intention was to use the input from discussions with stakeholders to create legislation that is clearer, easy to use and relevant to today's workplace. Important considerations were to strengthen the internal responsibility system in workplaces as the foundation of the legislation, enhance self-reliance, eliminate red-tape and duplication with other legislation, and permit workplaces to exercise greater discretion on how standards are met. Extensive consultations have taken place and the government is currently considering the input received.

In order to enable greater flexibility for workplaces on how they achieve compliance, Ontario would need to move from prescriptive to performance-based standards. Other jurisdictions have taken this approach. It is a significant change in direction and would require considerable effort in producing Codes of Practice or guidelines to support performance-based regulations. As well, there are concerns with the ability of the workplace parties and Ministry inspectors to work with "gray" regulations. Since there will be many ways employers could meet a standard, one has to be able to analyze and determine whether measures being taken in the workplace are adequate to meet the regulatory requirements. This may present particular challenges for small businesses since they do not often have the needed health and safety expertise and for the Ministry in ascertaining that inspectors consistently make the same determination.

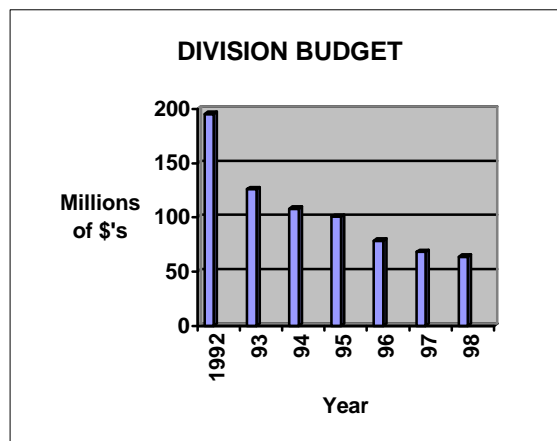
The Operations Division

The Operations Division of the Ministry of Labour is responsible for delivery of two of the Ministry's core businesses; occupational health & safety and employment standards.

The Division has a staff of approximately 800 and a budget of \$50 million. Of that budget approximately \$39 million is spent on workplace health and safety. The Division employs some 250 health and safety officers who specialize in one of three sectors: construction, industrial and mining. In addition there are engineers, hygienists, ergonomists and physicians who also carry out field visits and provide professional specialized expertise to support enforcement.

The field staff report through twenty-nine district managers located in four regions within the province. District managers have on average twenty-two direct report staff consisting of health and safety, employment standards and administrative support staff.

There are two head office branches: the Occupational Health and Safety Branch (OHSB) and the Employment Practices Branch. The OHSB has four provincial coordinators, one for each of three sectors (construction, industrial and mining) and one for professional and specialized services. The



⁵ Review of the Occupational Health and Safety Act, Ministry of Labour - February 1997

Provincial Coordinators along with several provincial specialists are responsible for overall program direction, planning, standards, policy and procedure.

Economic Realities – A Driver of Change

In the early nineties, Ontario experienced a major economic recession. The government of the day responded to its suddenly increased expenditures and reduced revenues by imposing several consecutive budget reductions. In the case of the Operations Division the strategy to cope with these budget cuts was one of careful expenditure management and reducing the number of employees by 20%, largely relying on attrition.

In the spring of 1995, as the province was heading into an election, senior executives within the Ministry of Labour assessed the current and future environment and recognized that the economic situation would require any government to impose additional budget constraints. More importantly, it was recognized that the existing programs could no longer just be trimmed. Resources in some programs were at critical levels. Decisions would need to be made about which services or programs should be continue to be delivered by the Ministry of Labour and how these could be done more efficiently. The concept of focusing on core business was introduced.

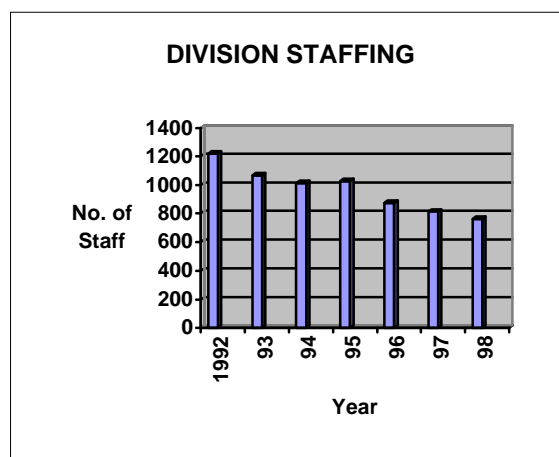
The existing programs and services were tested against three questions:

- Is this program or service consistent with the Ministry's goal of advancing safe, fair and harmonious workplaces? Is this program or service still needed?
- If so, can anyone else other than the Ministry deliver that service or program, and who?
- If the Ministry must deliver a specific program or service, can it be done better, cheaper?

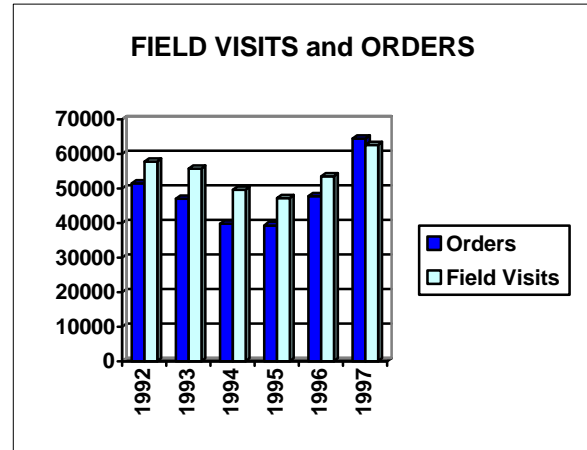
Out of those discussions the core business of the Operations Division narrowed to setting, communicating, and enforcing standards. Those programs or services fitting in this new definition were deemed to be the responsibility of the Ministry to deliver. All other programs and services were identified for possible divestment or elimination.

Implementing Business Plans

1995/96 marked the first year the Ministry was required to develop a business plan. The complexity of producing a business plan, a new concept for the public service, was compounded by the massive changes in the nature, type of services, structure and staffing. In the case of occupational health and safety, the services and programs fitting the core business were identified. Non-core services such as operating laboratories, providing mediation services to resolve health and safety disputes, training of and providing consulting services to workplaces parties were determined to no longer fit the Division's mandate. Action was taken to begin the divestment of the four laboratories staffed and operated by the Ministry. All the mediators, sampling technicians and all occupational health nurses were given surplus notices. Other professional staff was reduced in number ensuring there were sufficient resources to support the inspection and investigative role of the Ministry. This resulted in substantially reducing the number of engineers and physicians. Legislation was changed to shift responsibility and work from the Ministry's professional staff to the private sector. For example, mine owners used to have to submit drawings and specifications for review by Ministry engineers to obtain permits for operating mine hoists and conveyances. These owners are now required by regulation to have an engineer certify that new hoisting installations comply with the regulations. Although there were extensive discussions with industry prior to the regulation change and the Ministry provided guidelines, there have been some concerns about private sector engineers satisfactorily taking on these new responsibilities. This continues to be an area requiring attention.



Consistent with the goal of reducing administrative costs by 30%, the Division downsized its management structure by 33% and changed it from a matrix to a direct line organization. The downsizing increased the average number of direct report subordinates from 17 to 22 staff while the restructuring clarified managers' accountability. In the new structure, only one manager was accountable for performance management of a work unit or individual staff member. The management changes were introduced in the year following the major downsizing ensuring there was sufficient management capacity to manage the transition. By then the Division had communicated the new directions, introduced a performance management system tied to the Ministry's business plan and Division's operational plans. Clear productivity goals were set, cascading from the Division's overall goals right down to specific objectives in each person's workplans. Progress on achieving the goals was monitored regularly. Although the first program goals were set by senior management, in last two years structures were put in place to give field staff and managers a say in program decisions. This results in better decisions, helps build buy-in, and reduces some of the effort needed by management to communicate and monitor performance.



The strategy to achieve a productive, effective, client focused organization is being phased in. The first phase was to ensure staff productivity did not deteriorate during the downsizing then focus on getting staff to target their efforts to poor performing workplaces. Initiatives are now underway to give staff tools to improve the quality of their interventions in the workplace.

There are specific regulations for each of three sectors which, along with **the Act**, are enforced by the inspectors. Inspectors typically spend 70% of their time on planned inspections targeted to workplaces that have poor injury or compliance records. Inspectors also investigate complaints, unresolved disputes between employers and workers related to workers refusing to do unsafe work, and incidents that cause critical injury or death of workers. Any trip into a workplace whether an inspection or investigation is recorded as a field visit. Inspector productivity increased during the upheaval within the organization, a time when morale and productivity would normally be expected to drop. Both field visits and orders increased - the latter due to better targeting of poor performing workplaces. This is believed to be attributable to the clearer accountabilities and effective performance management.

The Ministry has had a long-standing practice of enforcing compliance through writing of orders that require immediate compliance or within a specified timeframe. Where there is an immediate hazard to workers, an inspector will issue a "stop-work" order that must be complied with before work can resume. Prosecution of owners, employers, supervisors or workers is considered when:

- A contravention has resulted in a critical injury or death of a worker
- There is non-compliance with an inspector's order
- There is non-compliance with specified sections of **the Act** or related regulations which can cause serious injury to workers

The maximum fine that can be imposed by the courts against an employer is \$500,000 and \$25,000 against a person. In instances of worker death, it is not uncommon for the courts to impose fines exceeding \$100,000. The total fines levied by the courts amounted to \$4.2 Million in 1997/98 on 291 convictions. The larger fines have a significant deterrent effect not only in the specific firm but in industry in general, due to increased awareness from the media coverage given to high profile court cases. However, the down-side has been that the large fines have resulted in a more rigorous defence by the accused. That in turn has required the Ministry to be more proficient in its investigative techniques and expend more resources in training staff, in preparing for and prosecuting offenders. The prosecution policy ensures that only the most serious contraventions are pursued thereby limiting the resources devoted to legal proceedings. The Ministry has tried focused, time limited, zero-tolerance enforcement campaigns. A six-week campaign focused on falls of persons in the construction sector was run in 1997. The campaign was publicized in

advance. Inspectors were instructed to prosecute individual workers, supervisors as well as employers when workers were not adequately protected from falls from elevations. There were 369 prosecutions initiated and 3000 orders issued doubling the number of orders issued over the same period the previous year. In one community local suppliers of safety equipment sold out all their fall arrest systems after the inspectors initiated their first few prosecutions. The initiative raised awareness and increased compliance but whether these types of campaigns have any lasting effect is not known.

Intervention by the MOL can be more positive. An important part of the MOL inspector's role is to provide support by informing the workplace parties about the legal requirements. Inspectors are encouraged to give feedback to the workplace parties on the effectiveness of their internal responsibility system. Inspectors also refer firms to other organizations that can provide the necessary technical assistance, information, training, or other expertise.

ONTARIO'S PREVENTION STRATEGY

Given the huge changes to structures, mandates and programs within the Ministry and the Workplace Safety and Insurance Board (the Board), extensive discussions ensued between the two organizations to develop a coordinated approach to workplace health and safety. These discussions resulted in the Ministry releasing a paper *Preventing Illness and Injury – A Better Health and Safety System for Ontario* January 1998⁶.

The paper addresses the change needed not in the parts of the occupational health and safety system - they are substantially in place - but in how those parts interact and the results in preventing workplace injuries. It must be emphasized that it is the responsibility of those in the workplace to ensure their safety and health. The health and safety system outside the workplace has a role in helping motivate and support workplaces. In Ontario this system consists of the Ministry of Labour, the Board, and the organizations funded by the Board (the sectoral Safe Workplace Associations, the Worker Health and Safety Centres and the Occupational Health and Safety Clinics, the Canadian Centre for Occupational Health and Safety). The *Prevention Strategy Paper* describes how the Board and the Ministry of Labour will pursue the goal of preventing injury and illness in Ontario in a coordinated way: the Board through prevention and promotion activities; the Ministry by standard-setting and enforcement.

To reach this goal four (4) key principles have been developed:

- the enhancement of workplace self-reliance,
- increased cooperation through the forging of strong partnerships,
- encouraging best practices and high performance
- effective enforcement targeting poor health and safety performers.

The strategy is to get poorly performing workplaces to emulate the achievements of high-performance, self-reliant firms with outstanding health and safety records.

High Performance Firms

It has been estimated that the health and safety performance of the top five percent of the Board's client firms is at least five times better than the average of their rate groups. Some are between 10 and 100 times better. The goal is to duplicate their performance in workplaces across the province. The result in occupational accident and illness rates could be a reduction of 80 to 90 percent.

Studies of these high-performance enterprises attribute their success to the integration of occupational health and safety into broader workplace management systems, with a goal of **continuous improvement**. For any workplace activity, employees in high-performance enterprises are expected to look for ways to achieve better safety, productivity and quality. Most important is the active commitment and involvement of senior management. Workplace safety is viewed as inseparable from, quality, productivity,

⁶ Preventing Illness & Injury - A Better Health and Safety System For Ontario Workplaces - Ministry of Labour, January 1998

and profitability. Workers have adequate training, feel empowered to participate and, most importantly, to take action when safety is compromised.

What is most important to note is that their success has been internally generated; high-performance firms are self-reliant.

Small Business a Major Challenge

Ontario has an employed workforce of approximately 5.6 million with the Board providing coverage for approximately 3.4 million workers. Small businesses constitute the majority of Ontario firms; over 90 percent have fewer than 50 employees. The service sector often employing part-time workers is growing. Individual employers are difficult to locate and to engage in injury prevention. The small business sector needs to be a primary target because awareness and motivation is frequently absent; small businesses lack resources and the health and safety performance of some firms in this sector is poor. Some reasons include:

- Although the rate of compensation claims may be the same in small firms as in business generally, workplace injury occurs only rarely in individual firms, leading to the erroneous perception in the "injury-free" firms that health and safety is not an important issue for them.
- Many small employers see health and safety as a workers' problem rather than an employer's responsibility.
- Small business is less likely to be reached by the system, with the result that many small employers may be unaware of health and safety and their legal obligations.
- Until recent changes to the Board's New Experimental Experience Rating (NEER) system, many smaller firms were unable to participate in experience rating and thus missed out on a direct financial incentive for improved health and safety performance.
- Small businesses are often marginal operations; this means that health and safety is given a low priority among more pressing concerns, such as the firm's survival.
- the problems are compounded for new businesses, which usually start out small.

The *Injury Prevention Strategy* identifies initiatives that are underway to build greater awareness, increased health and safety training and education, and improved access to support services. Key strategies are:

- outreach to new businesses when they first register their business to make them aware of health and safety resources available to them
- a safety incentive program which gives rebates to groups of small businesses that participate in local Safe Communities projects. The rebate is 75% of the savings the group of small businesses achieves over their projected compensation costs. As a condition of participation; the business owners must take a course on occupational health and safety. The results have been outstanding. Several groups of businesses involved in Safe Communities projects have reduced their compensation costs by over 50% and injury frequencies up to 20% in a one-year period.
- Promotional campaigns in the media, at schools and other community-based organizations will raise awareness. This includes initiatives targeted toward young workers such as incorporating health and safety into the school curriculum
- Target Ministry enforcement to small businesses that have poor injury or compliance records
- High-performance firms are being encouraged to assist businesses with poor health and safety performance. The Minister of Labour launched a program "Safe Workplaces – Sound Business" where the chief executive officers of high performing workplaces are being recruited to speak to other employers about health and safety
- Promoting sector based approaches to raising awareness of effective safety and health practices. The sawmill sector worked with the Ministry, the Board and the Ontario Forestry Safe Workplace Association (OFSWA) to develop and implement a program "Safe Workplace Ontario – Sawmill Sector". Twenty-one elements of a good health and safety program common to sawmills were identified. These include things such as machine guarding, use of lock-outs, and confined space entry. Sawmills that sign up get access to safe procedures, training materials and

expertise. Once they have put in place the necessary policies and procedures, and trained their workers they are audited by an OFSWA field consultant. If 100% of all the elements are in place the sawmill gets certified. Thirty-seven percent of sawmills have signed onto the program. Those firms that have registered in the program have reduced their lost time injuries by 19% in the past year.

Motivation

Strategies involving social marketing need to be devised so that the perception of workplace injuries will be seen as socially unacceptable rather than just part of the job. As this belief becomes more widespread it will gain power as a motivator, expressed as peer and community pressure and recognition. The drop in public acceptance of smoking and of driving vehicles while intoxicated are two noteworthy examples of a shift in society's values.

For employers, the most effective motivator is direct financial gain. Financial motivation is either positive (gaining rewards) or negative (avoiding penalties). The Board's experience rating systems offer refunds or surcharges, based on a firm's cost experience in comparison to what is expected for members of its rate group. However, to be an effective motivator, an experience rating system should be seen as rewarding improved performance rather than an incentive for not reporting injuries. As well, employers are motivated to prevent accidents by their financial costs in terms of lost production time and equipment damage. Similarly, avoidance of the costs of the Ministry's enforcement activities is a significant motivator, at least for employers with a poor performance record.

Workers are motivated by visibly demonstrated senior-management commitment to health and safety.

Support

The objective is to help firms deal with specific short-term problems but more importantly, to build an ongoing internal capacity and competence that will allow each workplace to fulfill its health and safety responsibilities, and become self-reliant.

The support takes many forms and is provided by different parts of the system at various levels: the workplace, community, sector and provincial. In general, support activities include the following:

- establishment and promotion of clear health and safety standards
- education and training of workplace parties
- provision of technical and professional support
- development and dissemination of promotion and injury prevention information
- dissemination of current research findings
- promotion and facilitation of information-sharing among workplaces
- identification of workplaces that need support and appropriate intervention.

It is important to co-ordinate these activities and those involved in them to minimize duplication and inconsistencies, and to avoid confusing those whom the system is trying to help. Recent thinking is that getting the attention and commitment of owners and senior management in improving health and safety in their workplace is the key. They are the people who command the resources to ensure their employees know the law, workplace hazards and the means of controlling those hazards. Certification of joint health and safety committee members upon having completed a standardized training program was introduced several years ago. It was a good start in improving health and safety knowledge in the larger workplaces that have committees. However, the objective is to have everyone in the workplace keenly aware of and active in resolving hazardous situations.

PERFORMANCE MEASUREMENT IS ESSENTIAL

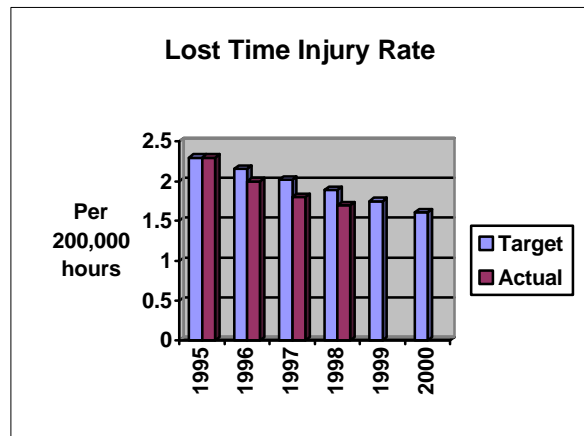
The occupational health and safety system has to be performance-based and that performance has to be measured and evaluated. While the development of common policy goals, the establishment of coordinated strategic directions, and the encouragement of collaboration and co-operation among the various parts of the system are necessary they do not guarantee success. Nor should performance measurement be based solely on the number of Ministry field visits or orders, the quantity of training programs developed and delivered or the lowering of compensation costs, important as these all are. At the end of the day, the only one outcome that really matters is the reduction of workplace injury and illness.

The most complete, comprehensive and up-to-date source of workplace injury statistics is the Board's data. These statistics will be used to monitor system-wide trends, target priority sectors and firms, set performance objectives and determine whether these objectives are met. The following are being considered as measures of the health and safety system's performance:

- fatalities
- amputations and permanent disabilities
- lost-time injuries
- total injury frequencies
- measures of injury severity (days lost/ or cost/claim).

Injury compensation costs are also an important success indicator but they are not as directly related to the objective of injury and illness prevention as are the other performance measures.

With agreement on a set of performance outcomes, these measures can be used to establish a standard with which to evaluate the province's health and safety performance and to which the various parts of the system can be held accountable. An example is the Ministry's commitment to an average 6% yearly reduction in the rate of lost-time injuries, as part of an overall reduction target of 30% over five years. Having this kind of shared and measurable goal is enhancing co-operation among the various parts of the system.



CONCLUSION

Workplace injury and illness exert a multi-billion dollar annual drain on the Ontario economy and a cost in human pain and suffering that is inestimable. This is a situation that is unacceptable not just because the price is so high but because it is preventable. What is required is a new commitment to occupational health and safety among the under-achieving majority of firms and their development of the competence and capacity necessary to equal the accomplishments of the high-performing minority.

It is the role of the health and safety system to provide motivation and support through education and training activities, financial incentives and standards-enforcement, and providing technical support and advice where needed. The problem is that there is insufficient capacity to reach every workplace this way. Even with greater collaboration and co-operation among organizations within the system, improvement of health and safety performance at individual workplaces cannot be dependent on direct intervention from the system.

What is required is a change in the culture of the workplace; a culture that raises safety to the same plane as the pursuit for continuous improvement in quality, productivity, and profitability. The workplace parties must view any occupational injury or illness as unacceptable and be committed to prevention. Firms with this kind of commitment become effectively self-motivating and self-reliant. They free up system

resources from the Ministry, the Board and Safe Workplace Associations to be focused on firms that require attention.

Ontario has developed an occupational illness and injury prevention strategy. The organizations in the health and safety system are working together to implement that strategy. The overall injury experience is improving with some initiatives showing dramatic results. The challenge is to find the best ways to help workplaces become injury free.

THEMES FOR BRUSSELS WORKSHOP: ROLE OF GOVERNMENT

Standard setting: Government has sole responsibility for setting minimum standards through its legislation. There are several options.

- When is it appropriate for government to step in and regulate? What factors should be considered in making this decision?
- Should the legislation be prescriptive or performance-based? What are the pros and cons for clients (small business, sophisticated organizations)? For enforcement officers?
- How much consultation with stakeholders should occur in the development or amendment of standards? Is consensus possible or necessary? How can the expectations of stakeholder who are consulted be managed?
- How can one assess the cost/benefit of a proposed regulation?
- How important is the comparability to standards in other jurisdictions? Is comparison to some jurisdictions more important than others?
- What is the role of “industry best practices” and practical guides? Who should be responsible for initiating, producing and communicating them? How can their effectiveness be measured?

Enforcement: One of the roles of government is to enforce compliance with legislated standards. However, the criteria to define what an effective enforcement program should be are not clear. Questions such as:

- What is the current compliance level? Does it vary by industrial sector, by size or nature of workplace? Why?
 - Are some contraventions more serious than others? Why?
 - Does the level of compliance correlate to the prevention of injuries?
 - Are there benchmarks for measuring compliance levels?
 - How would one go about establishing a benchmark?
- If enforcement includes any intervention which results in the government “forcing” compliance with legislated standards:
- which tone (helpful, strict enforcement) is more effective in building commitment to achieving and maintaining compliance without requiring ongoing government intervention?
- Does the tone need to vary? Who decides?
- How would the knowledge or skill levels of staff need to change to reflect the “tone” desired?
- Can an inspector be both an enforcer and a helper?
- What is the “right” amount of resources to commit to enforcement?
 - Does a high level of government enforcement activity increase reliance on government? Will this result in the public attaching more blame to government for workplace tragedies?
 - What criteria would be appropriate for establishing what is a minimum level of enforcement effort? The maximum level of enforcement effort?
- What purpose do prosecutions have? To punish, to deter?
 - What factors might determine how effective a deterrence prosecutions are?
 - What are the resourcing implications?
 - How does the threat of prosecutions affect the information flow between the investigator and the client? Can this be overcome? How?
- Some jurisdictions are delegating the enforcement of safety issues to non-government agencies. Government retains the responsibility for setting standards and for ensuring there is effective

enforcement through service contracts. What are the pros and cons of having enforcement in government? Of delegating it? How can the cons be overcome?

Inspection: The need to enforce standards can arise when contraventions are found during investigations or during planned inspections.

- What is the purpose of a planned inspection?
 - Is it to inspect the entire workplace or audit parts of it for compliance?
 - Is it to assess the effectiveness of health & safety policies and programs? Of management policies and systems?
 - Is an inspection about finding out what is wrong or what is right?
- What information is needed to target inspections to workplaces where they have the greatest potential for effecting improvement in health and safety performance?
- What background information does the inspector need to carry out an effective inspection?
- How can the effectiveness of an inspection be measured?
- What are the core competencies of a competent, effective inspector? Are they changing?
- Should an inspector give advice about how an employer can comply with the law? What happens if this advice is flawed and an injury results?

Prevention: Increasing the commitment to health and safety, competence, and capacity of the workplace parties in improving their health and safety performance will lever the government's resources.

- When attempting to increase commitment to health and safety, what strategies work best? When?
 - Targeting the chief operating officer and/or owner
 - Financial incentives/penalties
 - Peer pressure
 - Media campaigns
 - Peer or public recognition
 - Enforcement
 - Other???
- Is there a different strategy needed for small business versus larger businesses? Which prevention strategies have the greatest impact? What factors might determine this?
 - Education
 - Providing information. Should it be customized to small business?
 - Providing technical guidance
 - Financial incentives
 - Enforcement
 - Other?
- How important is educating students in health and safety in school before they join the workforce? What should they be taught? How would you measure its effectiveness?
- How important is it to change social attitudes to occupational health and safety? What factors influence attitudes and behaviour? How can these be changed?

Self-Reliance: By consciously interacting with clients in ways that increase their desire to be self-reliant, government can shift resources to workplaces needing its intervention.

- How can government wean clients from complaining to and relying on government to help resolve their internal health and safety disputes?

- How can inspections be used to build self-reliance? What about investigations?
- Which kinds of legislated standards strengthen self-reliance?
- What kind of information/expertise will assist clients in becoming self-reliant?
- What are other strategies which can be used on national, sectoral, community levels?
- Does the education system have a role to play in building the ability of young people to be self-reliant? How?