



# ANNUAL REPORT ON HEALTH AND SAFETY

2010

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Appendix I      York University Occupational Health and Safety Policy

## 1. Introduction

Under the *Occupational Health and Safety Act* and the University Occupational Health and Safety Policy, the University is committed to provide and maintain a healthy and safe workplace by adhering to all relevant health and safety legislation. To ensure that the University meets its obligations, the Board of Governors, through a designated Committee (Governance and Human Resources Committee), annually reviews the Occupational Health and Safety Policy, evaluates performance indicators of key areas and approves annual health and safety goals and objectives.

This report summarizes the health and safety activities undertaken at York University in 2010 and indicates the level of compliance with requirements of the applicable health and safety legislation. The report contains health and safety indicators that are quantitative measures of the University's performance. It also includes a report on achievements of goals and objectives set for the 2010 year, as well as the proposed goals and objectives for 2011. The Department of Occupational Health and Safety (DOHS) has prepared this report for review by the Board Governance and Human Resources Committee.

## 2. Highlights of the 2010 Year

- Major Health and Safety Issues/Program Developments in 2010

- Workplace Violence and Harassment Prevention Policies and Programs

The University developed and implemented workplace violence and harassment prevention policies and programs in 2010 in compliance with the amended *Occupational Health and Safety Act* which took effect on June 15, 2010. The program outlines the procedures for summoning immediate assistance when workplace violence or harassment occurs, for workers to report incidents and how the employer will respond to incidents. The University will review the policies and programs annually as required under the legislation.

- Medical Consultants as Retainers

In 2010, the University has retained two medical consultants, one with expertise in disability management and occupational health and the other in first aid and Automated External Defibrillators (AED) programs. The University is able to obtain instantaneous response from physicians for medical advice during an emergency (e.g., lead exposure assessment as a result of the fire in the Central Utilities Building). To date, the medical consultants assisted York in developing a AED usage and maintenance guideline, provided medical advice on disability and WSIB return to work cases, provided consultation on occupational health surveillance programs and assisted in the interpretation of medical test results.

- Environmental Emergencies

There two environmental emergencies in 2010:

1. Gas leak – Nov. 9, 2010

A contractor working at the Life Science Building construction site struck a gas line at approximately 2:15 p.m., resulting in an evacuation of about 10 buildings. No one was injured. Enbridge Gas repaired the rupture around 5:30 p.m. and everyone returned to the buildings by about 6:30 p.m.

2. Fire at Central Utilities Building - Dec. 13, 2010

There was a fire on December 13, 2010 caused by a contractor hitting a pipe containing fuel at one of the boilers in the Central Utilities Building (CUB). No one was injured. The campus was without heat for almost 10 hours on one of the coldest days of the winter. This caused the University to close on the afternoon of the fire and the following day. In January, during a part of the restoration planning activity, lead particulates were discovered in dust and soot in CUB probably due to the degradation of lead-containing paint during exposure to high temperatures. Lead air sampling did not indicate any airborne lead. As a result of the findings, additional lead testing of non-plant areas (to determine if cross-contamination occurred), emergency cleaning, hazard communication, employee exposure assessment (air sampling and serum lead test), environmental control (area isolation, special entry/exit procedure into contaminated area, use of personal protective equipment, etc.) were arranged immediately. Results from the employee exposure assessment indicated that all employees were within the "non-exposed range" and the environmental cleaning was successful. To date, the facility and plant restoration activity is still on-going.

- **Ministry of Labour (MOL) Visits (see Annual Indicator in Section 3 for detail)**

There were five visits by the Ministry in 2010. Two visits involved investigations into anonymous complaints, two were related to the CUB fire investigation and one was an investigation of an employee death, which subsequently was confirmed as not related to the workplace. Out of the five visits by the MOL, one order was issued requiring the University to provide a plan for labeling pipes in CUB that contains hazardous materials. A compliance plan has been submitted to the MOL.

- **Workplace Accident Statistics and Costs (see Annual Indicator 1 in Section 6)**

There was one critical injury to a York employee in 2010. The employee fainted while conducting a conditioning exercise with athletes causing a laceration above the right eye. The worker returned to work after 4 days and the MOL was notified.

There were 47 lost time accident cases which occurred in 2010 relative to 40 during 2009. Out of the 47 lost time accidents, 43% were less than 3 days in duration. The major lost time accidents in 2010 were caused by slips, trips and falls (17, 36%) followed by musculoskeletal disorders (16, 34%). Most of these slips and falls happened indoors.

The total days lost in 2010 (486 days) was higher than in 2009 (411 days). The days lost are mainly attributed to slips, trips and falls. Two cases contributed to about 80 days lost.

In 2010, the University was assessed a surcharge of \$164,095.50 by the WSIB. This is the New Experimental Experience Rating (NEER) assessment that applies to 2007, 2008 and 2009 case management performances. The surcharge was mainly the result of extended days lost that occurred in 2008 and carried over into 2009.

- **Comparison to other Ontario Universities and Industries**

Based on the September 2010 NEER statement from WSIB, York's performance index\*(P.I.) for 2010 was 0.89. A performance index of less than 1.0 indicates a potential rebate and a better than average performance. (\*P.I. = NEER cost divided by Expected cost)

York's average days lost per claim in 2010 was 10.3 days per claim (same as in 2009). WSIB data indicates that the average days lost per claim for all industries ranged from 13.5-14.3 days in the last 5 years. In 2010, York's average days lost per claim (10.3) was below the Ontario industrial average.

In 2010, the Lost Time Injuries (LTI) frequency -- i.e. the number of lost time claims per 100 workers -- was 0.53 for York and 0.35 for our rate group (consisting of universities, museums, libraries and schools). This means that York's LTI frequency rate is above the rate group. The LTI frequency is calculated based on 2010 accident claims only.

### 3. Achievements in 2010 in Relation to 2010 Goals and Objectives

2010 OBJECTIVES	ACHIEVEMENTS
<p>1. <b>General:</b> To achieve compliance and/or specified targets in respect of key health and safety performance indicators as outlined.</p> <p><b>Specific:</b></p> <p>1.1 Attain the Lost Time Injury (LTI) per 100 workers below the LTI for the rate group (i.e. educational facilities). The average LTI for the rate group in the last five years (2005-2009) is 0.45.</p> <p>1.2 Continue to monitor that the number of JHSC meetings is in 100% compliance with the OHS Act. Monitor workplace inspections to ensure that workplaces in the University are inspected.</p> <p>1.3 Continue to maintain 100% compliance with direction received from government agencies.</p> <p>1.4 Continue to provide education and awareness on legislatively required training.</p> <p>1.5 Continue to provide complete responses to all interventions.</p> <p>1.6 Continue to maintain 100% compliance with statutory testing.</p>	<p>1.1 Not attained. The LTI frequency in 2010 was 0.53 which was slightly above the average LTI (last 5 years) of 0.45 for the rate group (educational facilities).</p> <p>1.2 Attained substantially. One JHSC missed one meeting as their meeting date was scheduled on the date in December when the University was closed due to a fire. All committees conducted workplace inspections.</p> <p>1.3 Attained.</p> <p>1.4 Attained. DOHS provided and coordinated legislatively required training for supervisors and employees. It is the responsibility of front line managers to ensure that employees attend the required training.</p> <p>1.5 Attained.</p> <p>1.6 Attained.</p>
<p>2. <b>General:</b> Meet legislative requirements by ensuring the development and distribution of written Health and Safety programs and procedures to affected community members and conducting reviews of existing programs every two years.</p> <p><b>Specific:</b> Review Accident Response, Asbestos Management, Confined Space Entry, Laboratory Safety, Laser Safety, Mould Control, Radiation Safety and WHMIS.</p>	<p><b>Completed.</b> The following programs were reviewed and updated in consultation with the JHSCs: Accident Response, Asbestos Management, Confined Space Entry, Laboratory Safety, Laser Safety, Mould Control, Radiation Safety and WHMIS.</p>
<p>3. <b>General:</b> Continue to work with members of the York Community to ensure appropriate mechanisms are in place to promote the health and safety of York faculty, staff and students.</p> <p><b>Specific:</b> Continue to provide support to and development of area health and safety officers (e.g., maintain communication, organize safety talks or seminars, etc.) so as to strengthen the University's occupational health and safety management system.</p>	<p><b>Completed and ongoing:</b></p> <p>(a) Maintained communication with area health and safety officers. A half-day professional development session was organized for HSOs and 17 e-mails providing updates and information were sent in 2010 from DOHS,</p> <p>(b) Received annual reports from area health and safety officers</p> <p>(c) Continued to provide orientation training to new area health and safety officers.</p>
<p>4. <b>Specific:</b> Increase e-learning tools and offerings so that health and safety training is more accessible to employees.</p>	<p><b>Completed and ongoing:</b></p> <p>To date, 7 on-line training courses were developed; 3 of the 7 courses were refresher courses.</p>
<p>5. <b>Specific:</b> Implement specific programs for musculoskeletal disorders (MSDs) prevention for grounds and custodial workers.</p>	<p><b>Completed and in progress:</b></p> <p>Train-the-trainer program on back safety has been completed and a back injury prevention poster was developed which summarized class content. As a pilot, custodian supervisors have been trained on how to investigate MSDs and identify preventative measures. Procedures, with focus on MSD risk factors and controls, on specific tasks: e.g., litter pick-up, emptying garbage containers, etc. have been drafted and collection of workers' input is in progress.</p>
<p>6. <b>Specific:</b> Strengthen machine safety program to prevent injuries.</p>	<p><b>Completed.</b> DOHS conducted two machine safety inspections in the workshops of the Faculty of Fine Arts and the Faculty of Science &amp; Engineering. All recommendations have been implemented by the Faculties.</p>
<p>7. <b>Specific:</b> Provide leadership in the development and roll-out of new Workplace Violence and Harassment prevention programs jointly with the Department of Human Resources.</p>	<p><b>Completed.</b> Workplace violence and harassment policies and programs were developed and implemented in 2010. Information brochures were also distributed to employees for each program. Workplace violence risk assessments were conducted by each Faculty and department and copies of the completed assessments were sent to the Joint Health and Safety Committees.</p>
<p>8. <b>Specific:</b> Develop and introduce an annual program of auditing selected University departments/units or specific hazard categories to measure the level of compliance by the areas with the York University OHS Management system and/or control of hazards.</p>	<p><b>Completed and ongoing.</b></p> <p>An auditor has been trained and an audit program and process has been developed by DOHS. The audit process starts in 2011 beginning with the Department of Human Resources as a pilot.</p>

#### 4. York University Occupational Health and Safety (OHS) Management System

This system was developed and implemented to exercise “due diligence” in managing occupational health and safety. It defines an integrated set of health and safety responsibilities for all workplace parties.

The model requires the appointment of Area Health and Safety Officers (HSOs) to advise Vice-Presidents, Deans, Directors and others responsible for health and safety matters in their areas, to act as a link to the Department of Occupational Health and Safety (DOHS) and to disseminate health and safety information to employees in their areas.

The DOHS maintains regular communication with 82 HSOs. In 2010, eight new HSOs completed the DOHS orientation program, which includes an overview of their functions and the York University OHS Management System. All HSOs submitted an annual report to DOHS.

In 2011, the University will begin OHS management system audit of individual units and departments to ensure that local units have a system in place to manage health and safety.

#### 5. Changes in Legislation, Policies and Programs

##### 5.1 Review of the University Occupational Health and Safety Policy

The University consulted the five Joint Health and Safety Committees (JHSCs) in February 2011 on the review of the Occupational Health and Safety Policy (see Appendix I). There were no proposed changes to the Policy from the committees.

##### 5.2 Violence and Harassment in the Workplace – an amendment to the *Occupational Health and Safety Act (OHS Act)* of Ontario

Bill 168, an Act to amend the *OHS Act* with respect to violence and harassment in the workplace was passed on December 9, 2009 and came into force on June 15, 2010.

To comply with the legislation, the University:

- developed and implemented workplace violence and harassment prevention policies and programs;
- developed and distributed brochures to employees to provide information on the policy, definition and examples of harassment and workplace violence, to provide information on what one should do if they experience harassment or violence and to provide information on the University's response;
- developed training programs for all management supervisors on workplace violence prevention and workplace harassment prevention in order to familiarize them with the programs and their roles and responsibilities under the legislation;
- developed an workplace violence awareness e-learning program for all employees; and
- received workplace violence risk assessments from Faculties and departments with copies provided to the JHSCs.

The University will review the policies and the programs annually.

##### 5.3 York University Automated External Defibrillator (AED) Standards, Requirements and Procedures

In recognizing the benefit of the use of AEDs in saving lives for person suffering from sudden cardiac arrest and recognizing that more AEDs are publicly located, the University has developed and distributed a document entitled, “Automated External Defibrillator (AED) Standards, Requirements and Procedures.” This document was developed in consultation with a medical consultant and it provides information (e.g., standard, use, types, maintenance, signage, and training) on AEDs and outlines the related procedures.

Currently there are 13 AEDs at York (11 at Keele campus and 2 at Glendon campus). The medical consultant will further review the location of the AEDs including whether they are installed at locations where high risks of sudden cardiac arrest may occur.

## 5.4 Health and Safety Programs and Guidelines

### List of York University Health and Safety Programs, 2010

1. Accident Response	13. LaserSafety
2. Asbestos Management	14. Lift Truck Safety
3. Compressed Gas Cylinder Safety ( <i>new</i> )	15. Medical Surveillance Program for Research Facilities
4. Confined Space Entry	16. Mould Control
5. First Aid	17. Radiation Safety
6. Hearing Conservation	18. Silica
7. Hepatitis A	19. Transportation of Dangerous Goods
8. Hepatitis B	20. Working Alone
9. Indoor Air Quality	21. Workplace Harassment Prevention Program ( <i>new</i> )
10. Industrial Hygiene	22. Workplace Violence Prevention Program ( <i>new</i> )
11. Laboratory Safety	23. Workplace Hazardous Materials Information System (WHMIS)
12. Ladder Safety	

### List of Safety Guidelines developed in 2010 and posted on DOHS website

1.	Electrical Equipment Certification
2.	Emergency Eyewash Stations and Safety Showers
3.	Handling Heat Stress
4.	Working in Cold Weather

## 6. Report on Key Health and Safety Performance Indicators

### 6.1 Workplace Safety and Insurance Board (WSIB) case management

The Employee Well Being Office (EWO) in the Department of Human Resources manages WSIB claims. DOHS is responsible for accident prevention and for overseeing the compliance with related safety legislation (i.e. Workplace Safety and Insurance Act, Occupational Health and Safety Act and First Aid Regulation).

The effectiveness of the University's management of Workplace Safety and Insurance Board (WSIB) cases is evaluated using the following indicators and the data are provided by the EWO:

#### Indicator 1a – Workplace Safety and Insurance Board (WSIB) Case Management

Indicator 1a measures the current year's performance in terms of annual WSIB claims, costs and days lost, against the University's performance in previous years:

- There was one critical injury to a York employee in 2010.
- Number of Lost time claims in 2010: 47 – an increase of 17.5% from 2009.
- Number of Days Lost in 2010 from 2010 claims: 486 – an increase of 18% from 2009.
- Number of Days Lost in 2010 per 2010 claim: 10.3 – no change from 2009.

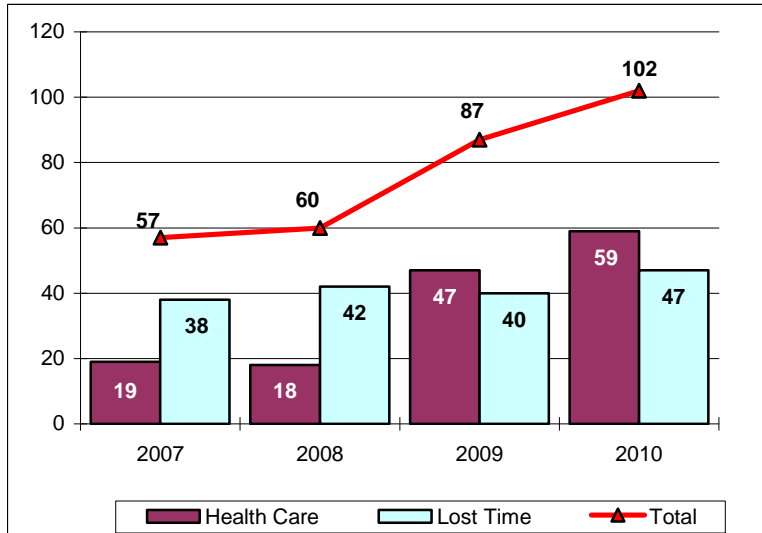
A critical injury is defined as one of a serious nature that:

- o Places life in jeopardy;
- o Produces unconsciousness;
- o Results in substantial loss of blood;
- o Involves the fracture of a leg or arm but not a finger or toe;
- o Involves the amputation of a leg, arm, hand or foot, but not a finger or toe;
- o Consists of burns to a major portion of the body; or
- o Causes the loss of sight in an eye.

# Annual Indicator 1a: Workplace Safety and Insurance Board Claims Management

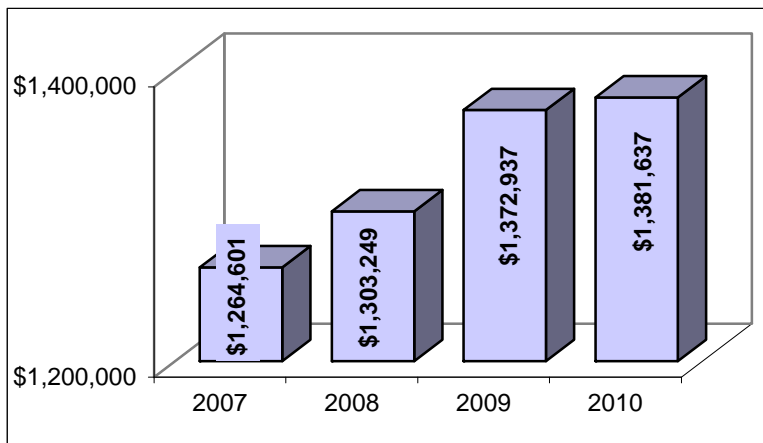
## Comparative Annual WSIB Claims, Costs and Days Lost

### WSIB CLAIMS



Comments: In 2010, the major lost time (LT) injuries were caused by slips, trips and falls (36%) and musculoskeletal disorders (34%). Forty-three percent of the total LT injuries were less than 3 days in duration. The number of healthcare claims increased likely due to increased awareness in reporting as well as injured workers being encouraged to seek medical attention following an incident.

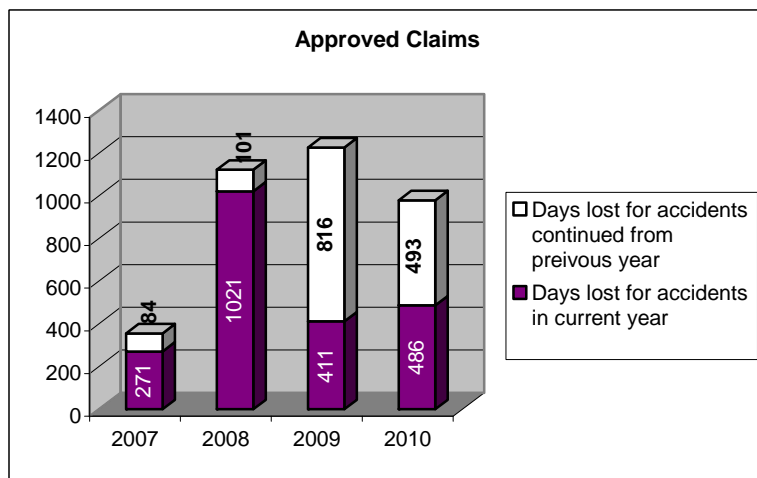
### WSIB PREMIUM (based on September NEER statement)



Comments:

The premium rate for 2010 is the same as in 2009, i.e. 34 cents per hundred dollars of payroll.

### WSIB - DAYS LOST



Comments:

In 2010, the days lost were mainly the result of slips, trips and falls (36%).

The employee fainted and struck an area above the right eye causing laceration. The incident was reported to the MOL. The worker returned to work after 4 days and no investigation was conducted by the MOL.

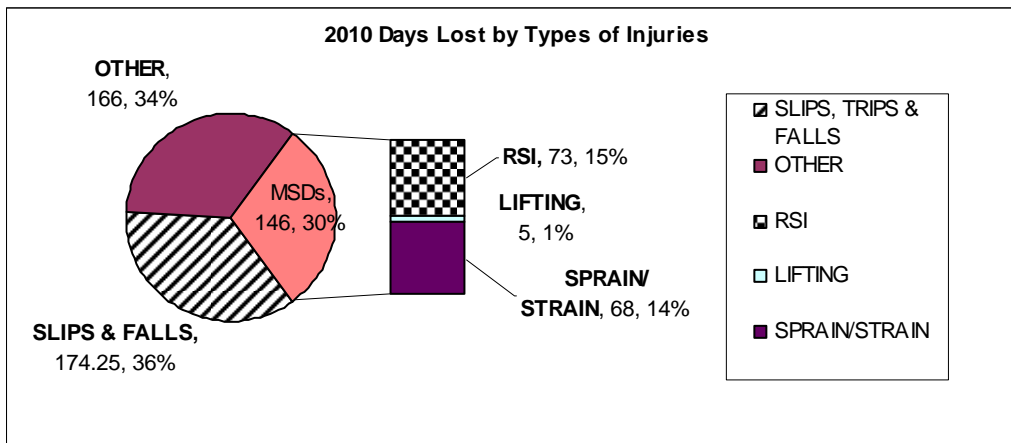
There were **47 lost time accident cases** which occurred in 2010 relative to 40 during 2009. Out of the 47 lost time accidents, 43% were less than 3 days in duration.

The major lost time accidents in 2010 were caused by slips, trips and falls (17, 36%) followed by musculoskeletal disorders (16, 34%). Most of the slips and falls happened indoors (10).

The **total days lost in 2010 for accidents that occurred in 2010 (486 days)** was higher than in 2009 (411 days). The days lost were mainly the result of slips, trips and falls. Two cases contributed to about 80 days lost, one was due to a slip on ice (no fall) causing a twist to the knee and the other was a trip indoors injuring the wrist.

In order to reduce the number of days lost, DOHS will focus more on repeated incidents at the same location, injuries from the same task, etc. to ensure that preventive measures are in place. The DOHS has a staff member who reviews each accident and conducts follow-up with the injured person's supervisor for preventive measures, where relevant. EWO continues to work closely with WSIB's account manager to facilitate return to work efforts.

**Fig. 5 – 2010 Days Lost by Type of Injuries**



The **number of WSIB health care claims** (59 in total) has increased in 2010 compared to 2009 (47 in total). This is likely due to increased awareness for reporting workplace injuries as well as injured workers being encouraged to seek medical attention following an incident.

### **Indicator 1b – WSIB New Experimental Experience Rating (NEER) Rating**

Indicator 1b measures York's comparative performance over time as reflected in the annual NEER performance index and the dollar amount of WSIB rebates received or surcharges levied.

**A NEER surcharge of \$164,095.50 was levied by WSIB in 2010 for the 2007 and 2008 and 2009 accident years.**

The surcharge was mainly the result of extended days lost from claims that occurred in 2008 and carried over into 2009.

Figure 6: Detailed information on Indicator 1b – WSIB NEER Experience Rating (effective date: Sept., 30, 2010)

	2007	2008	2009	2010
WSIB Health Care Claims	19	18	47	59
WSIB Lost Time Claims	38	42	40	47
WSIB Annual Premium*	\$1,264,601	\$1,303,249	\$1,372,937	\$1,381,637
NEER Rebate/(Surcharge)	(\$338,553.98)	\$221,226.54	(\$175,847.32)	(\$164,095.50)
Performance Index	1.03	2.50	1.39	0.89

\* The WSIB assessment rate per \$100 payroll was 35 cents in 2007 and 34 cents in 2008, 2009 and 2010. The Performance Index is the ratio between the NEER cost and WSIB's forecast cost. A Performance Index of less than 1.0 indicates better-than-average performance and potential rebate.

## Accommodation in Employment for Persons with Disabilities

The Employee Well Being Office (EWO) in the Department of Human Resources is responsible for the administration and implementation of accommodation guidelines and procedures, and arranges accommodation for employees returning from WSIB, long-term disability (LTD) or short-term disability (STD) absences in consultation with department managers and the appropriate unions.

In 2010, the number of accommodation requests increased from 93 to 160. The total EWO case load, including short term absences, long term disability return to work accommodations and at work accommodations, was actually 419, including accommodations that carried over from previous years. An effective work accommodation program will decrease the amount of lost time by facilitating injured employees to return- to-work quickly and safely. Below is a summary of the number, type and cost of accommodations in 2010:

Figure 7 – Number, Type and Cost of Accommodations in 2010:  
(Data provided by the EWO in the Department of Human Resources and the DOHS ergonomist)

Employee Group	Number of Requests	Type of Accommodation <sup>1</sup> Requested			Nature of Accommodation Requested					Disposition			Amount Spent <sup>2</sup>
		WSIB	LTD	OTHER	JR	EQ	HSS	MH	OTHER	O	S	U	
CASUAL	0	0	0	0	0	0	0	0	1	0	0	0	\$ -
CUPE 3903	3	0	0	3	0	0	0	0	4	1	2	0	\$ -
CUPE 1356	49	27	3	19	0	0	0	7	28	19	25	5	\$ 45.00
CUPE 1356-1	4	0	1	3	0	0	0	0	2	3	1	0	\$ -
CUPE 1356-2	1	0	0	1	0	0	0	0	0	1	0	0	\$ -
CPM	16	0	2	14	0	0	0	2	13	7	6	3	\$ 371.77
YUFA	24	0	2	22	0	0	0	0	29	18	6	0	\$ 20,325.88
YUSA	61	9	5	47	1	6	2	12	46	24	30	7	\$ 8,067.22
YUDC	0	0	0	0	0	0	0	0	1	0	0	0	\$ -
Research Associates	1	0	0	1	0	0	0	0	0	0	1	0	\$ -
Workstudy Students	1	1	0	0	1	0	0	0	0	0	1	0	\$ -
OPSEU	0	0	0	0	0	0	0	0	1	0	0	0	\$ -
<b>TOTAL 2010</b>	<b>160 (419*)</b>	<b>37</b>	<b>13</b>	<b>110</b>	<b>2</b>	<b>0</b>	<b>2</b>	<b>21</b>	<b>125</b>	<b>73</b>	<b>72</b>	<b>15</b>	<b>\$ 28,809.87</b>
TOTAL 2009	93	41	4	57	58	3	3	45	0	29	54	7	\$ 7,640.00

### Footnotes:

- To qualify for accommodation, an employee must be under a physician's care for a specific disability.
  - Exclusive of first \$500 paid by the department for accommodation items.
- \* Total accommodation cases. Includes accommodations that continued and carried over from previous year.

### Legend

#### Type Of Accommodation

WSIB Workplace Safety & Insurance Board  
LTD Long Term Disability  
Other e.g. employees on short term disability or no lost time or no income

#### Nature of Accommodation

JR Job Redesign  
EQ Equipment  
HSS Human Support Services  
MH Modified Hours

#### Disposition

O - Ongoing, at work, not performing full duties  
S - Successful, at work, performing full duties  
U - Unsuccessful, the employee not at work

The University's Accommodation Fund supports the cost of specialized equipment or minor renovations and payment of independent medical examinations to accommodate persons with disabilities or injuries. The Fund is administered by the EWO. The department applying for assistance in the purchase of accommodation items must pay the first \$500. In 2010, the total cost of accommodations had significantly increased due to specialized complex assessments and accommodation interventions involving technical aids and devices.

## 6.2 Safety Committees

### Indicators 2a, 2b, 2c, 2d – Joint Health and Safety Committee Meetings, Workplace Inspections and Recommendations

Joint Health and Safety Committees (JHSCs) assist in the creation and maintenance of a safe and healthy work environment. It is therefore incumbent on management, in the exercise of due diligence, to ensure that the structure and functions of the JHSCs comply with legislated requirements. Indicators 2a, 2b, 2c and 2d measure the University's performance in meeting key legislated requirements.

The University has five JHSCs, including a new committee which was formed in 2010 consisting of worker members from the International Union of Operating Engineers (IUOE), Local 772. There is one Health and Safety Representative for an employee group that is too small to form a JHSC, the employees of the York University English Language Institute (YUELI), who are members of the Ontario Public Service Employees Union (OPSEU), Local 578.

JHSCs are consulted in the review of the University's Occupational Health and Safety Policy as well as in the development and review of health and safety programs. Occupational hygiene reports (e.g. indoor air quality assessments, chemical spills incident reports, etc.) are copied to relevant JHSCs. Members of the JHSC review accident summary reports at every meeting. Minutes of the meetings are distributed to relevant department heads.

In 2010, the University took the following major actions in response to concerns raised by the various JHSCs:

- Conducted an ergonomic assessment on the force required to move heavily loaded garbage bins by workers and implemented hazard control measures to reduce the risk of the task;
- Developed and distributed a procedure on what to do "In case of an emergency in an elevator";
- Redistributed safety notices on "Falls from Chairs" and "Filing Cabinets Hazards"
- Developed and communicated the "Procedure for Communicating Reports Respecting Occupational Health and Safety".
- Developed a health and safety resource website named "Health and Safety Information for Faculty at York University", the website consists of information on occupational hazards, hazard reporting, accident investigation, work refusal under the *OHS Act* and safety training

#### Indicator 2a – JHSC Meetings in 2010

**The number of JHSC meetings in 2010 was in compliance with the OHS Act – except one meeting of the YUFA JHSC was cancelled due to the closure of the University in response to a fire.**

The *Occupational Health and Safety Act* requires JHSCs to meet at least once every three months. All committees had 4 or more meetings in 2010 except for the YUFA JHSC in which a meeting in December was cancelled due to the closure of the University as a result of a fire in the Central Utilities Building.

Figure 8: Detailed Information on Indicator 2a – JHSC Meetings in 2010

JHSC Meetings <sup>1</sup> 2010		
JHSC	No. of Meetings 2010	No. of Meetings 2009
CUPE 1356,1356-1 <sup>4</sup>	5	11
CUPE 3903 <sup>5</sup>	6	3
YUFA <sup>2</sup>	3	4
YUSA <sup>3</sup>	9	10
IUOE (new) <sup>7</sup>	1	n/ap
<b>University Totals</b>	<b>24</b>	<b>28</b>
Footnotes: 1. OH&S Act requires committees to meet once every three months. 2. YUFA = York University Faculty Association; one meeting was cancelled due to University closure 3. YUSA = York University Staff Association 4. CUPE 1356, 1356-1 = Canadian Union of Public Employees, Local 1356, 1356-1 5. CUPE 3903 = Canadian Union of Public Employees, Local 3903 6. IUOE= International Union of Operating Engineers 7. The committee was formed in 2010.		

### Indicator 2b – JHSC Workplace Inspections in 2010

**All committees conducted workplace inspections in 2010.**

All JHSCs prepared annual inspection schedules and conducted workplace inspections in 2010. Reports of workplace inspections conducted by the JHSCs were sent to the relevant department heads or Area HSOs for corrective action.

It should be noted that, in addition to worker members conducting workplace inspections, managers and/or supervisors also conducted annual inspections.

Figure 9: Detailed Information on Indicator Number 2b – JHSC Workplace Inspections in 2010

Joint Health and Safety Committees	Inspections Completed 2010	Person Hours	Inspections Completed 2009	Person Hours
CUPE 1356,1356-1	19	20.5	43	55
CUPE 3903 <sup>2</sup>	18	45.5	0	0
YUFA	8	14	10	42
YUSA	28	193.5	42	479.5
IUOE <sup>3</sup>	5	6	n/ap	n/ap
YUELI <sup>1</sup>	5	1.25	3	0.75
<b>University Totals</b>	<b>83</b>	<b>280.75</b>	<b>98</b>	<b>577.25</b>
Footnotes: 1. YUELI/OPSEU has a Health and Safety Representative. 2. Worker members were on strike from Nov. 6, 2008 to Feb. 2009 and there was significant turnover of the committee's worker membership since the strike ended. 3. IUOE JHSC was formed in 2010.				

## Indicator 2c – JHSC Recommendations

**There was one formal recommendation received by the VP Finance and Administration from the Joint Health and Safety Committees in 2010**

JHSCs often provide recommendations to supervisors/managers to address health and safety concerns including findings from workplace inspections. On occasion, formal written recommendations are sent to the Vice-President Finance and Administration (VPFA) for employer response.

Figure 10: Detailed Information on Indicator 2c – Joint Health and Safety Committee Recommendations

Joint Health and Safety Committee Recommendations, Jan. 2010 - Dec. 2010									
Recommendation by	Recommendation to	Type of Recommendation	Nature of Response				Timeliness of Response		
			Agree	Disagree	Further study	No response	On Time	Late	No Response
YUFA JHSC (June-10)	VP-Finance & Administration	Creation of a smoke-free environment on the University campus.	.		DOHS to provide update on the work of the Pink Lung Committee.		Yes		

## Indicator 2d – Radiation Safety Committee Compliance

**The University was 100% in compliance with the Canadian Nuclear Safety Commission (CNSC) requirements in 2010. The University submitted an annual report to the CNSC as required within York's licensing conditions.**

The University's Radiation Safety Committee is responsible for establishing criteria for the use of nuclear substances or radioisotopes at the University within the licensing conditions designated by the CNSC. The Committee meets quarterly and also inspects all areas of radioisotope use at least once a year. An annual activity report was submitted by the Committee to the CNSC in 2010.

In 2010, there was a leak of nuclear substance (sodium-22) from a sealed source within an experimental chamber. No persons were exposed. The CNSC was notified and the leaking source was subsequently disposed of by a licensed radioactive waste disposal contractor.

The University issued 30 internal radioisotope permits under its CNSC consolidated radioisotope license as of December 2010. The University Radiation Safety Program is reviewed by the Committee once every two years. All active X-ray equipment and devices containing sealed radioactive sources were leak tested in 2010 and no leakages were detected.

## 6.3 Indicator 3 – Government Contacts

**The University was 100% in compliance with direction received from government agencies in 2010.**

Indicator Number 3 is a measure of compliance with direction received from regulatory agencies. There were 5 visits by the Ontario Ministry of Labour (MOL) in 2010.

One order from the MOL was received by the University. The order required the University to provide a plan for the labeling of pipes containing hazardous materials in the Central Utilities Building. The University provided a plan, however, due to the discovery of lead dust and soot from flaking lead paint and the subsequent emergency clean up requirement, the plan has to be delayed. The University has requested for an extension of the plan which was accepted by the MOL.

Figure 11: Detailed Information on Indicator 3 – Government Contacts 2010

<b>Detailed Information on Indicator 3 - Government Contacts, 2010</b>				
<b>Date</b>	<b>Government</b>	<b>Reason for Contact</b>	<b>Government Response</b>	<b>University Response</b>
	<b>Agency</b>			
23-Apr-10	MOL	Investigation of anonymous complaint regarding concerns about the University's handling of recent sexual attacks.	No orders issued. According to the inspector "The JHSC worker representative agreed that the employer provides information with regard to health, safety and security to the YU community at large on an ongoing basis."	The University provided information to the inspector on the draft Workplace Violence Prevention policy and program, closed circuit TV, safety phones in buildings, emergency messaging systems, student escort services, OHS manual for new staff etc.
Nov. 25, 2010	MOL	Investigation of employee death	No orders issued. Employee passed away at the workplace due to medical condition.	
Dec. 14-15, 2010	MOL	CUB-Fire Investigation	One order issued to the University. The order required the labelling of pipes containing hazardous materials. The inspector requested a compliance plan.	A compliance plan was sent to the MOL on Jan. 4, 2011. A request for extension was sent to the MOL in Feb., 2011.
Dec. 15, 2010	MOL	Anonymous complaint indicating that a worker was made to work while the University was closed without heat.	No order was issued. Inspector was made aware that heating resumed on the same night of the fire and custodial workers were also provided with coats.	
Dec. 20, 2010	MOL	MOL contacted by TSSA concerning a small fire in CUB on Dec. 18, 2010. The fire was put out by a worker using a fire extinguisher.	No order issued. MOL inspectors interviewed the worker that witnessed and put out the fire.	

CUB - Central Utilities Building  
 JHSC - Joint Health and Safety Committee  
 MOL - Ontario Ministry of Labour  
 TSSA - Technical Standards & Safety Authority

#### 6.4 Indicator 4 – Education/Awareness

**In 2010, the University informed all supervisors of legislatively required training and developed relevant training programs for employees.**

Figure 12 below illustrates DOHS education and awareness initiatives (legislated, mandated by University Policy, and discretionary) in 2010.

All senior officers received mandatory due diligence and health and safety training. New senior officers, as part of health and safety orientation, are required to meet with the Director of DOHS to receive an overview of the University's OHS Management System within the first month of arrival and to attend an on-line due diligence health and safety training.

In 2010, there was a substantial increase in the number of employees trained on Back Safety (247 employees) compared to 2009 (82 employees). This was because Custodial Services organized a group training for all its employees and 128 employees attended the training.

Fig. 12: Detailed Information on Indicator 4 - Training Courses Provided by DOHS 2010

Courses	Number of Sessions	Duration of Each Session (Hrs)	Trained 2010	Trained 2009
<b>Legislatively Required Training</b>				
Asbestos Safety	1	6	11	25
Asbestos Practical	1	2.5	12	9
Asbestos Type 3 Emergency Entry & Exit** (new)	2	2	8	0
Confined Space Rescue Refresher	3	8	37	0
First Aid <sup>1</sup>	11	16	107	146
First Aid Emergency	1	6	12	0
First Aid Refresher	6	6	35	0
Due Diligence for Senior Executives	5	2	5	25
Fork Lift	1	8	4	0
JHSC - Certification Part 1*	3	7	3	0
JHSC - Certification Part 2*	6	7	7	0
Laser Safety	3	3	3	19
Lift Truck Training	2	8	12	7
Occupational Health and Safety Act	21	2	184	179
Radiation Safety for Users <sup>2</sup>	14	4	40	49
Respiratory Fit Testing	7	1	10	13
Scissor Lift**	1	2	26	36
Transportation of Dangerous Goods*	3	8	19	1
Violence Prevention in the Workplace (on-line) (new)	n/ap	n/ap	4924	0
WHMIS I <sup>3</sup>	7	1	1310	646
WHMIS II <sup>4</sup>	19	3	311	602
X-Ray Safety (new)	2	1.5	6	0
Zoom Boom Training**	1	2	27	0
<b>Mandated by Internal Policy and Procedures</b>				
Accident Investigation	15	2	108	132
Biosafety Training	11	3	143	102
Biological Hazards	2	1	66	75
Compressed Gas Cylinder Safety	4	2	55	63
Fine Arts TA***	1	5	35	56
Mould Control	1	1	12	52
Science TA****	1	5	109	131
Student Workers Orientation <sup>5</sup>	5	4	151	35
Workplace Inspections	14	1.5	108	106
<b>Discretionary Based upon Identified Need or Requests</b>				
Back Safety	30	2	247	82
Chemical Handling, Volatile Storage Rooms****	4	1	21	28
Computer Workstation Safety	13	2	61	80
Electrical Safety Awareness	1	2	36	51
Fall Arrest Awareness *	4	4	66	50
Health & Safety for 2nd and 4th Year Engineering Students	2	3	36	17
Laboratory Fire Safety (new)****	3	1	132	0
Ladder Safety	1	1	21	3
Occupational Health & Safety for CUPE 1356	1	2	12	116
Radiation Safety Awareness	4	1	7	39

**Footnotes:**

\*Courses organized/coordinated by DOHS and provided by external trainer.

\*\*Courses organized by CSBO

\*\*\*Courses organized by Faculty of Fine Arts

\*\*\*\*Courses organized by Faculty of Science & Engineering

1. First Aid certification is valid for 3 years (includes Security Officers and Designated First Aiders).

2. Radiation Safety for Users, some employees received training through independent study package with completion of quiz.

3. WHMIS I is for employees who work in the proximity of where hazardous materials are used, including training for Security Officers.

4. WHMIS II is for employees who work with hazardous materials.

5. Training for CSBO and Student Services (Dons and RLCs) student workers. Training includes Back Safety, WHMIS, OHSA, Sharps, Blood and Bodily Fluids, Harassment Awareness, Workplace Violence Prevention, AODA

## 6.5 Indicator 5 – Advice and Counsel

The total number of DOHS interventions in 2010 was slightly higher than in 2009.

Figure 13 provides a statistical summary of the range of DOHS interventions providing professional advice and counsel to members of the University community during 2010 to assist them in making decisions and taking action to fulfill statutory responsibilities.

In 2010, there was significant consultation and training to individual units on conducting workplace violence risk assessment by DOHS. Each academic and non-academic department has to assess the risk of workplace violence to employees, to design and implement measures to control the identified risk, and to provide the appropriate training to employees.

There was no chemical spill in 2010.

Figure 13: Detained Information on Indicator 5 – Advice and Counsel 2010

Type Of Issue	Number of Interventions 2010	No. of Interventions on Same Issues 2009
Asbestos	35	54
Access York Committee for Persons with Disabilities	9	15
Accident Prevention	82	67
Biosafety	21	1
Biosafety Certificate (Research) New	10	22
Biosafety Certificate (Research) Renewal	29	44
Biocontainment Cabinets and Laminar Flow Hoods Certification	35	33
Biohazardous Waste Disposal	3	7
Biosafety Laboratory Inspection & Commissioning	11	16
Biological Spills/Exposure	5	6
Chemical Spills/Fumes/Odours	72	72
Confined Space	21	24
Emergency Preparedness Advisory Committee	3	3
Emergency Response Warden Evacuation	5	6
Environmental	5	3
Ergonomics <sup>1</sup>	81	131
First Aid Supplies	70	69
Flu Pandemic Planning (H1N1 prevention)	1	22
General Safety	56	68
Hazardous Waste Disposal	27	20
Health and Safety Program Review	7	3
Indoor Air Quality <sup>2</sup>	79	50
Joint Health and Safety Committee	18	6
Joint Health and Safety Committee Member Orientation	2	1
Laboratory Decommissioning and Renovation	4	1
Laboratory Safety	50	43
Medical Consultant Meetings	14	7
Mould	18	15
Noise	4	16
OHS Management System: New Area Health & Safety Officer Orientation	6	9
PCB	2	6
Public Health	4	9
Radiation Safety (including MRI)	19	13
Research Enquiries	2	2
Return to Work Meeting with Employee Well Being Office	4	7
Safety Inspection & Assessment (new building)	3	5
Safety Orientation Checklist	288	234
Security Advisory Council / Community Safety Council	4	4
Senior Executive Occupational Health & Safety Orientation Meetings ( <i>new</i> )	6	0
Sharps (Pick-up and Disposal)	4	10
Smoking	7	6
Subway Construction	3	0
Violence in Workplace Program	28	1
Water Contamination & Sampling	9	6
Work Permit Approvals	44	49
Work Refusal - Internally Resolved	1	1
<b>Totals</b>	<b>1211</b>	<b>1187</b>

**Footnotes:**

1. Individuals or departments who received ergonomics advice only but did not receive site visits.
2. Indoor air quality consultation e.g. by phone.

## 6.6 Indicator 6 – Occupational Health and Safety Assessment and Testing

### Indicator 6a – Occupational Hygiene Testing

In 2010, the University was 100% in compliance with the requirement for statutory testing.

In accordance with relevant legislation and internal policy and procedures, the DOHS conducts or arranges selected environmental testing, testing of equipment and ergonomic assessment. The testing could be in response to employee concerns, odour, proactive monitoring or to comply with legislative requirements (e.g., leak testing of radiation sources and biocontainment cabinets).

There was a significant increase in hygiene testing of hazardous gases and vapour, because in 2010, DOHS hygienists instituted the use of a multi-gas detector to check for the presence of hazardous gases as part of odour investigation.

Figure 14: Detailed Information on Indicator 6a – Occupational Hygiene Testing

Type of Tests	Required/ Requested 2010	Tests Conducted 2010	Required/ Requested 2009	Tests Conducted 2009
<b>Statutory Testing</b>				
Biocontainment Cabinets/Laminar Flow Hoods <sup>1</sup>	36	35	34	33
Radioactive Sealed Sources Leak Testing	5	5	9	9
Radioisotope Laboratories Monitoring	21	29	25	21
X-RAY Machine Leak Testing	2	2	2	2
<b>Mandated by Internal Policy and Procedures</b>				
DOHS Equipment Calibration	9	9	8	8
Laboratory Inspections <sup>2</sup>	36	36	14	14
Indoor Air Quality	38	38	42	42
Indoor Mould Assessment	19	19	8	8
Other Hygiene testing <sup>3</sup>	104	104	65	65
Workplace Noise Testing of Areas >85dBA	2	2	9	9
<b>Discretionary Based upon Identified Need or Requests</b>				
Ergonomics <sup>4</sup>	30	30	38	38
Ergonomics (for Accommodations)	32	32	12	12

**Footnotes:**

1. DOHS coordinated the annual certification of biosafety cabinets which is done by an external firm.
2. Inspection of scientific laboratories in the Faculties of Pure & Applied Science, Health and Liberal Arts & Professional Studies.
3. Includes testing for hazardous gases and vapours in response to odour and spills, e.g., flammables, organic vapour, carbon monoxide, hydrogen sulphide, etc.
4. Number of individuals or departments who received at least one visit. Multiple visits of an individual will be consulted just once.  
This indicator did not include assessments for accommodations.

## Indicator 6b - Occupational Health and Disease Prevention

York University offers medical surveillance programs for workers who may be exposed to certain biological (e.g., viruses) and physical agents (e.g., laser, noise). These programs involve initial baseline and ongoing testing of related workers' health status. The ongoing surveillance allows early detection of diseases so that preventive measures (e.g., medical intervention or workplace process review and hazard control) can be put in place immediately to prevent progression of the disease.

Worker participation in medical surveillance programs is voluntary as prescribed in the legislation. The University offers Hepatitis A and B immunization for workers who may be exposed to blood and body fluids.

Vision screening for laser workers and Hepatitis A and B medical surveillance programs are only required for new workers (no annual retesting or monitoring required).

Figure 15: Indicator 6b - Summary of Medical Surveillance and Immunization Programs in 2010

<b>Medical Surveillance Programs</b>	<b>Number of Participants</b>	
	<b>2010</b>	<b>2009</b>
Animal Care Workers <sup>1</sup>	47	52
Audiometric Testing	124	158
Vision Screening for laser workers	1	2
<b>Immunization Programs</b>	<b>Number of Participants</b>	
	<b>2010</b>	<b>2009</b>
Hepatitis A & B	2	9

Note: 1. The DOHS provides employees with instructions for completing the health assessment form.

## 2011 Goals and Objectives

### Ongoing Activities

1. Achieve compliance and/or specified targets with respect to key health and safety performance indicators as outlined below:

Indicator #	Indicator	Target
6.1	WSIB Lost Time Injury Frequency	Attain the Lost Time Injury (LTI) per 100 workers below the LTI for the rate group (i.e. educational facilities). The average LTI for the rate group in the last five years (2005-2009) is 0.43.
6.2	Safety Committees	Continue to monitor that the number of JHSC meetings is in 100% compliance with the OHS Act. Monitor workplace inspections to ensure that workplaces in the University are inspected.
6.3	Government Contacts	Continue to maintain 100% compliance with direction received from government agencies.
6.4	Education/Awareness	Continue to provide education and awareness on legislatively required training.
6.5	Advice and Counsel	Continue to provide complete responses to all interventions.
6.6	OHS Assessment and Testing	Continue to maintain 100% compliance with statutory testing.

2. Meet legislative requirements by ensuring the development and distribution of written Health and Safety programs and procedures to affected community members and by conducting reviews of existing programs every two years. Review Working Alone, Lift Truck, Indoor Air Quality, Hearing Conservation, Transportation of Dangerous Goods, Ladder Safety, Silica, Workplace Harassment Prevention and Workplace Violence Prevention programs.
3. Maintain communication with and the engagement of Area Health and Safety Officers (HSOs), so as to support their roles as health and safety resources/promoters and disseminators of information within their units. The establishment of Area HSOs is one of the key elements in the University's Occupational Health and Safety Management System.

### New Projects

1. Upon completion of the pilot, full roll-out and implementation of the OHS management system audit initiative. Post the audit checklist on the website; develop and implement an audit schedule; communicate audit results and conduct follow up, as required.
2. Provide additional training on workplace harassment program to employees by developing an instructor's package to HSOs and managers of units in order to train their employees. The training program will be developed in consultation with the Joint Health and Safety Committees.
3. Prepare task specific multimedia MSD prevention instructional modules for employees in Campus Services and Business Operations (mainly for Grounds and Custodial employees).
4. Increase communication and outreach to the York community on health and safety information, e.g., develop newsletter, safety notices or guidelines etc. to enhance safety awareness and culture.

## Appendix I

### *University Policies, Procedures & Regulations Database*

#### University Policy

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##### **Occupational Health and Safety**

# : Pol 008

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##### **Description:**

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**Notes:** Approved by UEC: 1996/09/16; Re-Approved by the Board of Governors: 1991/05/13; 1992/10/26; 1993/10/18, 1995/04/10; 1996/10/07; 1997/03/03; 1998/01/26; Approved and Revised by Board Audit Committee: 1998/12/08; Approved by the Board of Governors: 1998/12/14, Re-Approved by the Board of Governors: 1999/12/06, 2001/06/25, 2002/04/29, 2003/04/28, 2004/04/26, 2005/05/02, 2006/05/01, 2007/04/30, 2008/06/23, 2009/06/23, 2010/06/21  
Date Effective: 1991/05/13; *This policy must be approved annually by the Board of Governors.*

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**Approval Authority:** Board of Governors

**Signature:** "M. Shoukri"

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##### **Policy**

York University is committed to the prevention of illness and injury through the provision and maintenance of healthy and safe conditions on its premises. The University endeavours to provide a hazard free environment and minimize risks by adherence to all relevant legislation, and where appropriate, through development and implementation of additional internal standards, programs and procedures.

York University requires that health and safety be a primary objective in every area of operation and that all persons utilizing University premises comply with procedures, regulations and standards relating to health and safety.

##### **Occupational Health and Safety**

Persons who are supervisors as defined by the Occupational Health and Safety Act shall ensure that persons under their direction are made aware of and comply with all applicable requirements and procedures adherent to this policy. Supervisors shall investigate all hazards of which they become aware and shall take appropriate corrective action.

The University shall acquaint its employees with such components of legislation, regulations, standards, practices and procedures as pertain to the elimination, control and management of hazards in their work and work environment. Employees shall work safely and comply with the requirements of legislation, internal regulations, standards and programs and shall report hazards to someone in authority, in the interests of the health and safety of all members of the community.

## **Students**

Students are responsible for conducting themselves in a manner which is consistent with their health and safety and that of others. Failure to do so may be considered a breach of Presidential Regulations governing student conduct.

## **Tenants and Contractors**

The University will make its commercial tenants and contractors aware of its Occupational Health and Safety Policy and of the requirement that all persons working on its premises conduct their business in accordance with the Occupational Health and Safety Act.

This Health and Safety Policy is promulgated by the Board of Governors and the administration thereof is delegated to the Vice-President Finance and Administration.

Failure to abide by this policy or the requirements, regulations, standards or procedures contemplated herein will result in appropriate discipline or sanctions.