

AHS Report on Performance FY 2018-19

DISABLING INJURIES IN AHS WORKFORCE

This measure is defined as the number of injured AHS workers requiring modified work or time loss from work per 200,000 paid hours (approximately 100 full-time equivalent workers). Our disabling injury rate enables us to identify Workplace Health & Safety (WHS) programs that provide AHS employees, volunteers and physicians with a safe and healthy work environment and keep them free from injury. The lower the rate, the fewer disabling injuries are occurring at work.

Disabling Injury Rate: Q3YTD 2018-19



Provincial

2018-19 Target

Level of Portfolio	Portfolio or Departments	2015-16	2016-17	2017-18	Q3YTD 2017-18	Q3YTD 2018-19	Trend	2018-19 Target
Province	Provincial	3.57	3.85	4.11	3.97	3.85	↑	3.40
Zone	South Zone Clinical Operations	3.57	3.50	3.75	3.63	3.83	↓	3.40
	Calgary Zone Clinical Operations	3.56	3.88	4.57	4.24	4.32	⇒	3.40
	Central Zone Clinical Operations	3.88	4.12	4.91	5.16	3.91	↑	3.40
	Edmonton Zone Clinical Operations	3.48	3.73	4.11	3.94	4.00	⇒	3.40
	North Zone Clinical Operations	4.35	3.75	4.09	3.71	4.14	↓	3.40
Provincial Portfolios	Cancer Control	1.68	1.47	1.04	0.80	1.30	☆	3.40
	Capital Management	2.15	2.74	2.24	2.09	2.20	☆	3.40
	Community Engagement and Communications	0.00	0.00	0.00	0.00	0.00	☆	3.40
	Contracting, Procurement & Supply Management	2.61	3.85	3.24	3.33	3.20	☆	3.40
	Diagnostic Imaging Services	1.85	2.86	3.57	3.94	3.63	↑	3.40
	Emergency Medical Services	12.94	15.09	15.02	15.06	12.60	↑	3.40
	Finance	0.16	0.33	0.50	0.67	0.46	☆	3.40
	Health Information Management	1.25	2.19	1.80	1.50	1.23	☆	3.40
	Health Professions & Practice	7.47	6.58	7.73	8.20	7.15	↑	3.40
	Information Technology (IT)	0.26	0.17	0.21	0.14	0.13	☆	3.40
	Internal Audit and Enterprise Risk Management	0.00	0.00	0.00	0.00	0.00	☆	3.40
	Laboratory Services	1.26	1.63	2.30	1.75	2.25	☆	3.40
	Nutrition Food, Linen & Environmental Services	6.95	6.89	6.35	6.39	6.12	↑	3.40
	People, Legal, and Privacy	1.51	2.89	2.69	2.78	2.76	☆	3.40
	Pharmacy Services	1.05	1.69	1.22	1.18	1.01	☆	3.40
	Population Public & Indigenous Health	1.31	1.13	0.82	0.82	1.08	☆	3.40
	System Innovations and Programs	0.27	0.25	0.47	0.47	0.60	☆	3.40

Trend Legend: ☆Target Achieved ↑Improvement ⇒Stable: ≤3% relative change compared to the same period last year ↓Area requires additional focus

Source: WCB Alberta and e-Manager Payroll Analytics (EPA). EPA 2017-19 YTD data as of June, 2018. WCB data April-June, 2018 as of January 17, 2019; Data retrieval May 1, 2019

Notes:

- This measure is reported one quarter later as data continues to accumulate as individual employee cases are closed.
- Reporting of "0.00" is accurate and reflects these portfolios having very safe and healthy work environments.
- Starting Q2 2018-19, the Nutrition, Food, Linen & Environmental Services departments have been merged into one department.
- Accurate mapping of historical data is not possible as functional centre hierarchies have been recently revised. As a result, data in fiscal years 2014-15 to 2016-17 were not refreshed in this update to guarantee reporting consistency.

Improve the Experience and Safety of our People

Objective 10: Reducing disabling injuries in our workforce.

WHY THIS IS IMPORTANT

Safe, healthy workers contribute to improving patient care and safety. AHS is committed to providing a healthy and safe work environment for all. AHS' strategy for health and safety includes four areas of focus: physical safety, psychological safety, healthy and resilient employees, and safety culture. Through knowledgeable and actively engaged staff, physicians, and volunteers, we will reduce injuries across our organization.

AHS PERFORMANCE MEASURE

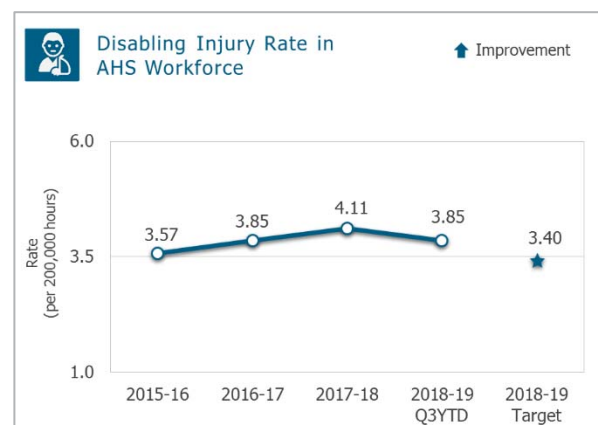
Disabling Injury Rate (DIR) is defined as the number of AHS workers injured seriously enough to require modified work or time loss from work per 200,000 paid hours (approximately 100 full time equivalent workers).

UNDERSTANDING THE MEASURE

Our disabling injury rate indicates the extent to which AHS experiences injury in the workplace. This enables us to identify the effectiveness of health and safety programs that actively engage our people in creating a safe, healthy and inclusive workplace.

The lower the rate, the better the performance, as it indicates fewer disabling injuries occurring at work.

HOW WE ARE DOING



Source: AHS Workplace Health and Safety

Comparable to other health organizations, the majority of AHS' disabling injuries are musculoskeletal injuries arising from client and material handling. This trend has held steady for many years and the injury rate is relatively stable. However, AHS did not meet the DIR target of 3.40 for 2018-19.

The top 5 causes of injuries reported to the Workers Compensation Board (WCB) include: patient handling, manual material handling, ergonomic risk factors, slips and falls and physical workplace violence. Musculoskeletal and other injury types continue to increase, despite concerted and ongoing efforts to prevent injuries. Changes to the Workers Compensation Board (WCB) Act, as well as the promotion of incident reporting and de-stigmatization of

psychological harm, have increased the scope of claims accepted by WCB.

Violent incidents in AHS workplaces continue to be reported at a higher rate year over year. This trend is expected to continue as AHS continues to promote the reporting of violence incidents.

WHAT WE ARE DOING

Efforts to improve DIR include targeted interventions to impact common causes of injuries in high-risk areas and enhancing programs and processes related to physical safety, such as patient handling and manual material handling.

- AHS is investing in culturally-based initiatives that take time to impact metrics such as injury rates but foster more sustainable change: core safety training for all leaders (60% completed); focused implementation of the 2018 Occupational Health and Safety Act (OHSA); enhancing collaboration with internal operational teams and Patient Quality and Safety; and enhancing linkages with external stakeholders such as unions and Alberta Labour.
- AHS supports operational areas to ensure staff are appropriately trained on **It's Your Move** and **Move Safe** ergonomic programs, which aim to prevent lifting and handling injuries.
- To highlight ergonomic requirements for workers and prevent injuries, the **Safe Client Handling Functional Transfer** record will be included as one of the alerts in Connect Care. This record communicates individual client mobility limitations so that the care team can put the appropriate lift and transfer supports in place.
- Further strengthening of AHS' Safety Culture are expected to occur through the improvements being made as a result of changes made to the WCB Act and the OHS Act. Implementation of changes continues with a focus on accommodation requirements, joint worksite health and safety committees, and prevention of violence and harassment. AHS completed and implemented the Workplace Accommodation Policy in order to meet legislative changes.

AHS strives to provide a healthy and safe work environment with a focus on physical safety, psychological safety, healthy and resilient employees and safety culture.

- All new leaders are required to complete Leading Health and Safety in the Workplace: Fundamentals training. This course supports Our People Strategy by equipping leaders with the knowledge to create safe, healthy, and inclusive workplaces. As of March 31, 2019, 60% of AHS leaders have completed the course.