

DISABLING INJURIES IN AHS WORKFORCE

Measure Definition:

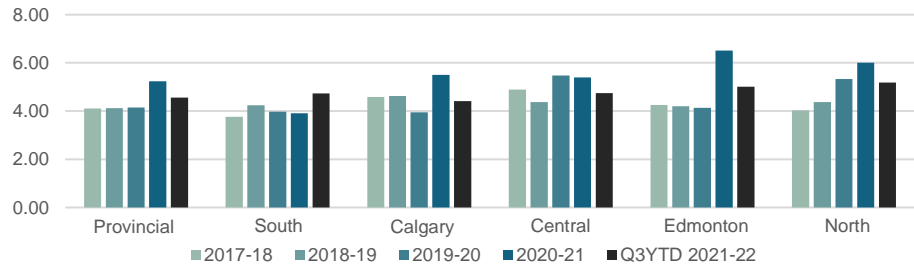
The number of AHS workers requiring modified work or time away from work per 200,000 paid hours (approximately 100 full time equivalent workers).

Why It's Important:

The disabling injury rate enables us to identify workplace health and safety programs that will provide AHS employees, volunteers and physicians with a safe and healthy work environment and keep them free from injury. The lower the rate the better, as it demonstrates fewer disabling injuries are occurring at work.

Performance Summary:

4.56
per 200,000 paid hours
Provincial
Q3YTD 2021-22
Result: **Improved**
(Compared to the same period last year)



Disabling Injury Rate - by AHS Portfolio

Level of Portfolio	Portfolio or Departments	2017-18	2018-19	2019-20	2020-21	Q3YTD 2020-21	Q3YTD 2021-22	Result
Province	Provincial	4.11	4.12	4.14	5.24	5.33	4.56	Improved
Zone	South Zone Clinical Operations	3.76	4.24	3.98	3.90	3.48	4.74	Deteriorated
	Calgary Zone Clinical Operations	4.59	4.62	3.94	5.50	5.78	4.42	Improved
	Central Zone Clinical Operations	4.90	4.37	5.48	5.39	4.95	4.74	Improved
	Edmonton Zone Clinical Operations	4.25	4.20	4.14	6.51	6.67	5.01	Improved
	North Zone Clinical Operations	4.02	4.38	5.32	6.00	6.18	5.19	Improved
Provincial Portfolios	Cancer Care Alberta	1.04	1.54	2.18	3.06	3.28	2.37	Improved
	Capital Management	2.26	2.48	2.83	3.56	3.02	2.54	Improved
	Clinical Workforce Strategy & Services (CWSS)	7.41	9.03	8.71	18.66	19.29	12.13	Improved
	Community Engagement & Communications	0.00	0.00	0.87	0.00	0.00	0.00	Stable
	Contracting, Procurement & Supply Chain Management	4.08	4.50	3.87	3.39	3.42	3.28	Improved
	Diagnostic Imaging	3.58	3.79	2.89	3.42	3.52	3.27	Improved
	Emergency Medical Services (EMS)	15.03	12.73	13.11	16.06	16.34	19.69	Deteriorated
	Finance	0.56	0.38	0.77	0.00	0.00	0.73	Deteriorated
	Human Resources	0.46	0.32	0.39	0.00	0.00	0.24	Deteriorated
	Information Technology	0.21	0.10	0.14	0.22	0.30	0.23	Improved
	Internal Audit & Enterprise Risk Management	0.00	0.00	2.13	0.00	0.00	0.00	Stable
	Legal & Privacy	0.00	0.00	1.14	0.00	0.00	0.00	Stable
	Nutrition, Food, Linen & Environment	6.39	6.51	6.84	6.59	6.89	6.25	Improved
	Office of CMO & Medical Affairs	0.89	0.81	0.78	1.31	1.35	0.89	Improved
	Pharmacy Services	1.22	1.14	1.40	1.59	1.63	1.39	Improved
	Protective Services	8.54	11.13	10.38	12.56	11.57	14.68	Deteriorated
	Provincial Clinical Excellence	0.58	0.71	0.41	0.68	0.64	0.71	Deteriorated
	Workforce Health & Safety	1.12	0.00	1.08	0.50	0.68	1.20	Deteriorated

Source: WCB Alberta and e-Manager Payroll Analytics (EPA). EPA 2017-21 YTD data as of June 2020. WCB data April-June 2020 as of September 2020. Data retrieval: April 28, 2022.

Notes:

- This measure is reported one quarter later to allow for more accurate reporting as injuries sustained within the quarter are often reported retroactively outside the quarter.
- Reporting of "0.00" is accurate and reflects these portfolios having no disabling injuries.
- Results are reported as "improved" if there is a 3% or greater relative change in a desirable direction when compared to the same time period last year; "deteriorated" if the 3% or greater relative change is in an undesirable direction; otherwise results are reported as "stable".

Goal 3: Improve the Experience and Safety of our People

Objective 7: Continue to implement 'Our People Strategy'.

Our People Strategy guides our efforts to enhance the experience of our people while sustaining safe, high-quality healthcare service delivery. 'Our People' refers to the employees, physicians, midwives and volunteers at AHS.

Actions and Achievements

Enhance the experience of our people

- The AHS *Respectful Workplaces and Prevention of Harassment and Violence* policy suite supports a workplace that is safe and healthy. As of March 31, 2022, 72,489 employees had completed the required Level 1 policy course and 14,455 employees had completed the Level 2 course.
- In 2021-22, AHS launched the Employee Development Program and Leadership Development Program which aim to deepen the understanding of AHS values and competencies and develop behaviours that help put those values into action. More than 100 leaders and 54 employees participated in these 12-week programs.

Continue our commitment to diversity, inclusion, cultural competency and sensitivity

- AHS launched its *Anti-Racism Position Statement* on June 30, 2021, as part of continued efforts to combat racism and promote diversity and inclusion across the organization.

- AHS continued to develop new Change the Conversation resources which empower our workforce to engage in dialogue on challenging topics by providing the necessary language and tools. This year, resources were launched on topics including neurodiversity, disability, Black history in Canada and trauma.

Increase psychological safety and mental health and wellness supports

- Not Myself Today is an initiative offered by the Canadian Mental Health Association that works towards building greater employee awareness and understanding of mental health, reducing stigma and fostering safe and supportive cultures. AHS rolled out the program across the organization in September 2021.
- In collaboration with the Employee and Family Assistance Program (EFAP), AHS offers weekly wellness seminars on a variety of topics, including sessions focused on pandemic-related challenges such as stress, fatigue and crisis management. In 2021-22, more than 6,500 employees attended 193 seminars.
- The *Headversity* EFAP App proactively builds mental health resiliency. In 2021, more than 1,600 users used the app, completing more than 2,900 total hours of training.
- The Provincial Addiction & Mental Health Curricula and Experiential Skills (PACES) Learning Pathway launched in fall 2021 and advances learners through core-competency development and skill-training opportunities for practitioners who interact with adult populations experiencing concurrent disorders.

- AHS is offering the Canadian Crisis and Trauma Resource Institute's Trauma Informed Leadership workshop to promote awareness and interest within medical leadership to bring a trauma-informed approach to their leadership. Since its launch in Q3, approximately 415 medical leaders have participated in the workshop.

Reduce musculoskeletal injuries in our workforce

- An Office Ergonomics course was developed and includes an Alternate Working Arrangement hazard identification assessment and control document to support improved risk management while working from home. As of March 31, 2022, more than 1,500 workers had completed the course.
- Staff in emergency departments and urgent care centres experience some of the highest rates of harassment and violence in the workplace. Harassment and violence prevention plans are in development for approximately 25 sites across the province. Two sites implemented plans in 2021-22.
- AHS launched the *Violence Aggression Screening Tool (VAST)* which gives healthcare teams a way to identify and address patient behavioural safety concerns. The tool is part of the Behavioural Safety Program and is currently available through Connect Care for Launch 1-3 sites.

Build Indigenous workforce representation and supports

- An Indigenous recruitment and retention engagement strategy is in the early stages of development. Workforce demographics data is being gathered and analyzed.
- A dedicated e-mail address (Indigenous.talent@ahs.ca) was created to support Indigenous job seekers experiencing barriers to employment at AHS by providing coaching and advice. An Indigenous Applications section was also added to the AHS careers webpage (www.ahs.ca/careers/Page13096.aspx).

- AHS has partnered with the Rupertsland Institute to offer summer employment through the Métis Youth Summer Student Employment Program which helps Métis youth investigate different career options in healthcare.

Optimize staffing models through evidence-based approaches

- In alignment with *AHS Performance Review* recommendations, AHS is using provincial overtime guidelines to ensure a consistent approach to approving and tracking overtime across the organization.
- AHS developed and validated the *Nursing Workload Acuity Tool* in Connect Care which will be used to inform real-time staffing decisions based on the intensity of care required by a given patient population.
- AHS is in the process of transitioning scheduling activities into a provincial model called Provincial Staffing Services which enables fair and equitable practices through standardization and automation. In 2021-22, more than 8,200 new users were added to the environment for scheduling personnel.

Optimize organizational design

- In alignment with recommendations from the *AHS Performance Review*, the AHS Management Review aims to identify organizational design improvements by conducting a portfolio-by-portfolio assessment of management roles. Implementation timelines continue to be impacted by pandemic response demands. Changes are being made through attrition where feasible.

Performance Results Summary

AHS Workforce Engagement

2016-17	2019-20
3.46	3.57

Source: AHS People portfolio.

- Workforce engagement rate is specific to AHS Employees only, and excludes physicians, volunteers, and midwives.

- This measure monitors our workforce's average responses to the AHS Our People Survey, which uses a five-point rating scale. The rate shows our workforce's commitment to AHS, their work and their colleagues. The **higher the rate the better**, as it demonstrates that more employees feel positive about their work and workplace. High engagement leads to higher productivity, safer patient care, and increased willingness to give discretionary effort at work.
- The 2019-20 workforce engagement rate was 3.57 out of 5. The next survey is expected to be completed in 2022-23.

Disabling Injuries in AHS Workforce

2017-18	2018-19	2019-20	2020-21	Q3YTD 2020-21	Q3YTD 2021-22
4.11	4.12	4.14	5.24	5.33	4.56

Source: WCB Alberta and e-Manager Payroll Analytics (EPA). EPA 2017-21 YTD data as of June 2020. WCB data April-June 2020 as of September 2020. Data retrieval: April 28, 2022.

- This measure monitors 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 this rate enables the organization to identify workplace health and safety programs that will provide AHS employees, volunteers and physicians with a safe and healthy work environment and keep them free from injury. The **lower the rate the better**, as it indicates fewer disabling injuries are occurring at work.
- As of Q3YTD, the disabling injury rate (4.56) **improved** by 14 per cent compared to the same period last year (5.33). This measure is reported one quarter later to allow for more accurate reporting as injuries sustained within the quarter are often reported retroactively outside the quarter.
- AHS employees reported fewer injuries overall with notable decreases in respiratory injury/illness and dermatitis. However, employees continued to report injuries related to anxiety, stress and fatigue, as well as psychological trauma, which is partially attributable to the high demands of the ongoing pandemic response.