



ANNUAL REPORT ON HEALTH AND SAFETY

2012

Prepared by: Occupational Health and Safety

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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 2012 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 2012 year, as well as the proposed goals and objectives for 2013. The unit (OHS) has prepared this report for review by the Board Governance and Human Resources Committee.

2. **Highlights of the 2012 Year**

- **Major Health and Safety Issues/Program Developments in 2012**

- **Workplace Violence and Harassment Prevention Programs and Incidents**

Since the development of the Workplace Violence and Harassment Prevention programs and policies in 2010, the University has mandatory online training for all employees on both programs and has been responding to concerns related to workplace violence and harassment following the processes outlined in the program. The programs are annually reviewed in consultation with the Joint Health and Safety Committees. In 2012, the number of reported incidents had reduced compared to 2011 (from 19 to 4 for harassment and from 15 to 7 for workplace violence). Nine out of the 11 cases were internally resolved through early resolution.

- **Occupational Health and Safety System Audit**

In 2012, OHS audited the Faculty of Fine Arts, Faculty of Education and Osgoode Hall Law School (including Osgoode Professional Development at 1 Dundas Street West).

The audit focused on 4 major elements: health and safety communication, training/orientation, workplace inspection and accident response (including first aid protocol). Findings from the audit indicated that most Faculties/departments audited have Area Health and Safety Officers (HSOs) to coordinate health and safety activities in their workplaces and to monitor training. Most units also have well developed accident response and first aid protocols. Areas requiring improvements were mainly improving communication and monitoring training requirements for academic employees, and educating some supervisors in recognizing their health and safety responsibilities under the Act. Those responsibilities cannot be delegated to the Area HSOs. The auditor has received responses to recommendations that have been made from all units audited.

- **Ministry of Labour (MOL) Visits (see Indicator 3 in Section 6.3 for detail)**

There were 10 visits by the Ministry in 2012.

Four were incident investigations, four were complaint investigations (from two complaints) and two were regular inspections (MRI and X-ray source).

Eight out of the 10 visits did not result in any orders from the MOL. One visit resulted in an order to provide a lease agreement between York and the non-York facility inspected. The other visit resulted in seven orders related to the procedure for changing of outdoor lights using a boom truck.

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

There were four critical injuries to York employees in 2012. Three injuries were caused by trips and falls including tripping over objects (handbag, computer cable and concrete seating in a courtyard) and one involved a worker being found unconscious in a case following a motor vehicle accident (personal vehicle hitting the rear of a parked bus).

There were 38 lost time accident cases in 2012, compared to 33 during 2011. The major lost time accidents in 2012 were caused by slips, trips and falls (19 or 50%) and musculoskeletal disorders (12 or 32%). More than half of the trips and falls happened indoors.

The total days lost in 2012 (379.25 days) was lower than in 2011 (605 days). The days lost are mainly attributed to slips, trips and falls (56%).

In 2012, the New Experimental Experience Rating (NEER) assessment period for employers changed from a 3-year window to a 4-year window. This means that a claim that is four years old but is still active (i.e. incurring cost) will continue to impact the employer's NEER rating which drives some of the premium rate costs.

In 2012, the University had a surcharge of \$49,250.37 by the WSIB under NEER. This assessment applies to 2008, 2009, 2010 and 2011 case management performances. The surcharge was mainly due to a few claims from 2009 and 2010 that were re-opened for further medical care and costs.

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

Based on the September 2012 NEER statement from WSIB, York's performance index (P.I.) for 2012 is 2.10. At this point it is unlikely that the University will qualify for a rebate as the P.I. exceeds 1.0.

York's average days lost per claim in 2012 was 9.98 days per claim. WSIB data indicates that the average days lost per claim for all industries (Schedule 1 employers) ranged from 14.2 to 15.5 days in the last 5 years. In 2012, York's average days lost per claim (9.98) was below the Ontario industrial average (i.e. 14.8 days per claim).

In 2012, the Lost Time Injuries (LTI) frequency -- i.e. the number of lost time claims per 100 workers -- was 0.50 for York and 0.30 for our rate group (consisting of universities, museums, libraries and schools). This means that York's LTI frequency rate continues to be above the comparator group.

3. Achievements in 2012 in Relation to 2011 Goals and Objectives

2012 OBJECTIVES	ACHIEVEMENTS
<p>1. General: To achieve compliance and/or specified targets in respect of key health and safety performance indicators as outlined.</p> <p>Specific:</p> <p>1.1 Attain the Lost Time Injury (LTI) per 100 workers below the LTI for the rate group (i.e. educational facilities).</p> <p>1.2 Continue to monitor the number of JHSC meetings for compliance with the OHS Act. Monitor workplace inspections throughout the University are inspected.</p> <p>1.3 Continue to maintain compliance with direction received from government agencies.</p> <p>1.4 Continue to maintain education and awareness regarding compliance to mandatory training.</p> <p>1.5 Continue to provide complete responses to all interventions.</p> <p>1.6 Continue to maintain compliance with statutory testing.</p>	<p>1.1 Not achieved. The LTI frequency in 2012 was 0.50 which was slightly above the LTI of 0.30 for the rate group (educational facilities).</p> <p>1.2 Achieved substantially. One JHSC had to reschedule its meeting from December to January 2013 to meet quorum. All committees met at least once every 3 months and all committees conducted workplace inspections.</p> <p>1.3 Achieved.</p> <p>1.4 Achieved. OHS 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 Achieved.</p> <p>1.6 Achieved.</p>
<p>2. General: 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>Specific: Review Asbestos Safety, Compressed Gas Cylinder Safety, Confined Space, Laboratory Safety, Laser Safety, Radiation safety, WHMIS, Workplace Harassment Prevention and Workplace Violence Prevention.</p>	<p>Achieved. The following programs were reviewed and updated in consultation with the JHSCs: Asbestos Safety, Compressed Gas Cylinder Safety, Confined Space, Laboratory Safety, Laser Safety, Radiation Safety, WHMIS, Workplace Harassment Prevention and Workplace Violence Prevention.</p>
<p>3. General: 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>Specific: Continue to provide support to and development of area health and safety officers (e.g., maintain communication, organize forums/meetings, etc.) to strengthen the University's occupational health and safety management system.</p>	<p>Achieved and ongoing:</p> <p>(a) Maintained communication with Area Health and Safety Officers via:</p> <p>(i) HSO forums: three 2-hour professional development sessions were provided for the HSOs by OHS in 2012;</p> <p>(ii) Email communications: 16 communications were sent to the group in 2012.</p> <p>(b) Received annual checklists from Area Health and Safety Officers</p> <p>(c) Continued orientation training to new Area Health and Safety Officers by the OHS Director.</p>
<p>4. Specific: OHS System Audit: Conduct OHS System audits of Faculties/Departments following the established multi-year audit schedule.</p>	<p>Substantially Achieved and ongoing:</p> <p>(a) In 2012, the Faculty of Fine Arts, Education and Osgoode Hall Law School were audited for conformance with York's Occupational Health and Safety Management System.</p> <p>(b) The schedule was slightly behind due to the availability of the auditor in the last quarter.</p>
<p>5. Specific: Develop on-line training programs on Workplace Harassment Prevention for academic and non-academic employees.</p>	<p>Achieved:</p> <p>Two separate online training modules on Workplace Harassment Prevention for academic and non-academic employees were developed in 2012.</p>
<p>6. Specific: Establish partnership programs with relevant Faculties for occupational health and safety program improvement and resource sharing (e.g., engaging kinesiology students in job task physical demand analysis, ergonomic assessment etc.).</p>	<p>Achieved and ongoing:</p> <p>There were meetings with representatives of the School of Kinesiology and Health Science and the School of Nursing on student engagement resource sharing programs pertaining to OHS disciplines. Some progress was made, e.g., in 2012, a volunteer from Kinesiology worked with the OHS ergonomist on assessments and training programs, and a nursing student did a practicum with OHS, working with the Biosafety Officer.</p>

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

This system was developed and implemented to exercise “due diligence” in managing occupational health and safety. It includes 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 Occupational Health & Safety (OHS) and to disseminate health and safety information to employees in their areas.

The OHS maintains regular communication with about 80 HSOs. In 2012, four new HSOs completed the OHS orientation program, which includes an overview of their functions and the York University OHS Management System. All HSOs submitted an annual checklist to OHS.

In 2012, OHS audited the Faculty of Fine Arts, Faculty of Education and Osgoode Hall Law School (including the Osgoode Professional Development at 1 Dundas Street West) in respect of compliance with the OHS management system. The audit program allows University management to exercise due diligence under the *Occupational Health and Safety Act* by ensuring that an effective internal responsibility system is in place in managing occupational health and safety at all levels of the organization. The audit focuses on 4 major elements: health and safety communication, training/orientation, workplace inspection and accident response (including the presence of first aid protocol). Findings from the audit indicate that most Faculties/departments audited have health and safety officers to coordinate health and safety activities in their workplaces and to monitor training. Most units also have well developed accident response and first aid protocols. Areas requiring improvements were mainly improving communication and monitoring training requirements for academic employees, and educating some supervisors on their roles and responsibilities under the Act. The auditor received responses to recommendations from all units audited.

5. Changes in Legislation, Policies and Programs

5.1 Proposed Changes to Legislation Pertaining to Occupational Health and Safety with Potential Impact on York University

5.1.1 Changes to Federal Legislation

Regulations under the *Human Pathogens and Toxins Act*

New regulations are being developed under the *Human Pathogens and Toxins Act (2009)*. These are anticipated to be released in the fall of 2015. York’s Biosafety Officer, along with those from other Ontario universities, actively participated in the consultation process. These regulations will have significant impact on the research community, in particular, those using biological agents and animals, such as the Faculty of Health and Faculty of Science (affecting about 55 permit holders and 300 employees). Some of the proposed requirements include: the development of a permit system for the use of biological agents; inventory; regular inspection; medical surveillance; lab commissioning/decommissioning; incident management; and new design requirements for laboratories.

5.1.2 Changes to Provincial Legislation

Regulations under the amended *Occupational Health & Safety Act*

The Ontario *Occupational Health & Safety Act* was amended in May 2011 with all revisions to be proclaimed by April 2012 (effective dates differ for sections). For most of the changes, the impact on the University is small, except for proposed regulations on mandatory health and safety awareness training for all workers and frontline supervisors, to be effective in 2014. The Act may require the University to ensure that the current training for supervisors meets the new proposed standard, to

provide mandatory training to all non-supervisory employees and to establish a mechanism for the transfer of training records between employers/organizations.

5.2 Review of the University Occupational Health and Safety, Workplace Violence and Workplace Harassment Policies

The University consults the five Joint Health and Safety Committees (JHSCs) on the review of the Occupational Health and Safety Policy (see Appendix I) and the Workplace Violence and Harassment programs annually. In 2012 there were no proposed changes to the policies proposed by the Committees.

5.3 Health and Safety Programs and Guidelines

No new health and safety programs were developed in 2012. All existing programs (see list below) are reviewed in consultation with the Joint Health and Safety Committees once every two years.

Below is a list of York University Health and Safety Programs, 2012

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

Below is a list of Safety Guidelines which are posted on the OHS website

1.	AED Standards, Requirement and Procedures
2.	Electrical Equipment Certification
3.	Emergency Eyewash Stations and Safety Showers
4.	Handling Heat Stress
5.	Workplace Inspection
6.	Reportable Communicable Disease
7.	Scented Products
8.	Working in Cold Weather

6. Report on Key Health and Safety Performance Indicators

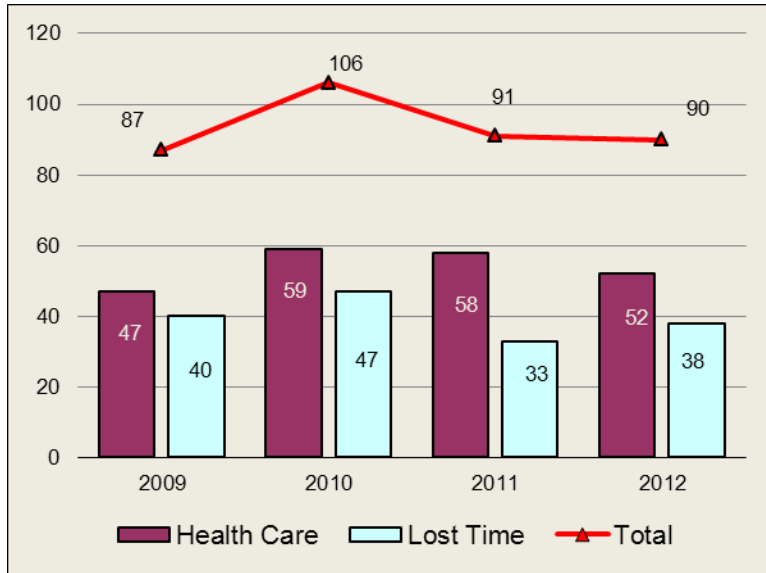
6.1 Workplace Safety and Insurance Board (WSIB) claims management

The OHS/Employee Well Being Office (EWO) in the Department of Human Resources manages WSIB claims. The OHS is responsible for accident prevention and for overseeing 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) claims is evaluated using the following indicators:

Annual Indicator 1a: Workplace Safety and Insurance Board Claims Management
 Comparative Annual WSIB Claims, Costs and Days Lost

Figure 2 WSIB CLAIMS

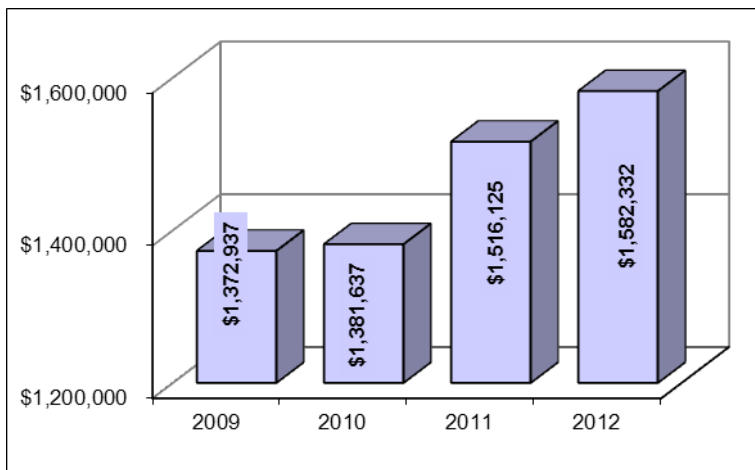


Comments:

In 2012, 50% of the lost time accidents was due to slips and falls (mostly indoors).

Note: Data for previous years were "frozen" for comparative purpose.

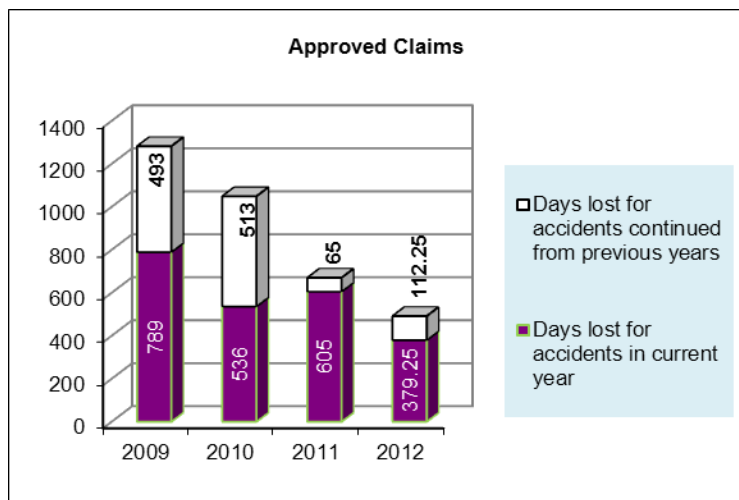
Figure 3 WSIB PREMIUM (based on September NEER Statement)



Comments:

The premium rate for 2012 was 36 cents per hundred dollars of payroll, which is unchanged from 2011.

Figure 4 WSIB - DAYS LOST



Comments:

In 2012, 56% of the days lost was due to slips, trips and falls.

Note: Date for previous years were adjusted as claims status changed.

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

- There were four critical injuries to York employees in 2012.
- Number of Lost Time claims in 2012: 38 – an increase of 15% from 2011.
- Number of Days Lost in 2012: 379.25 – a decrease of 37% from 2011.
- Number of Days Lost in 2012 per 2012 claim: 9.98 – a decrease of 46% from 2011

There were four critical injuries to York employees in 2012. Three injuries were caused by trips and falls including tripping over objects (handbag, computer cable and concrete seating in a courtyard), and one involved a worker being found unconscious in a case following a motor vehicle accident (personal vehicle hitting the rear of a parked bus).

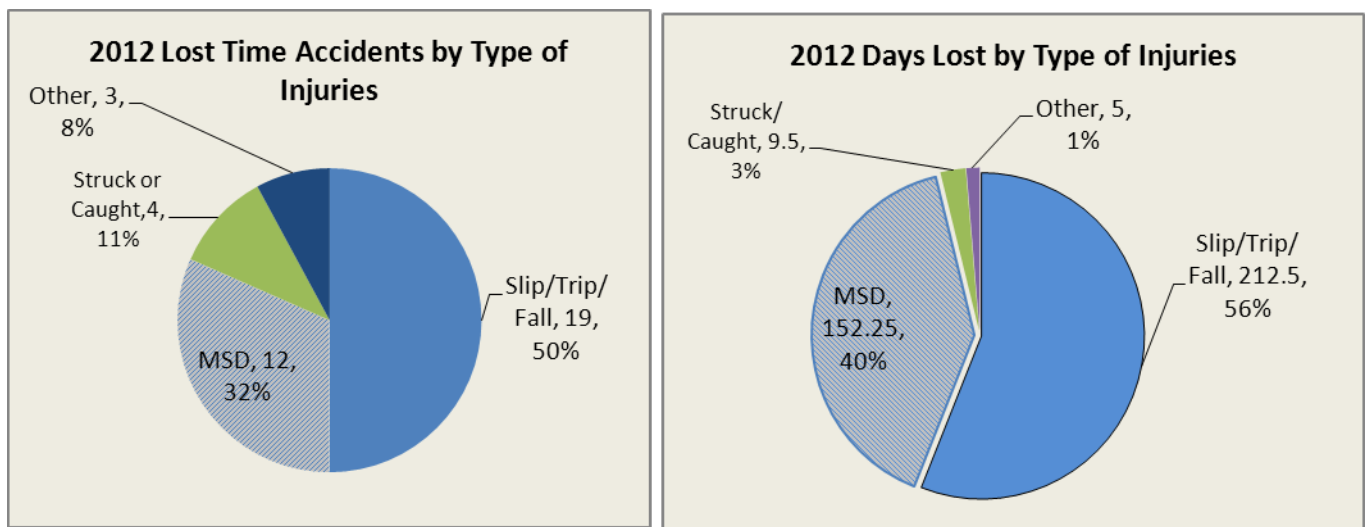
A critical injury is defined under the Act as one of a serious nature that:

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

There were **38 lost time accident cases** in 2012 compared to 33 in 2011. The lost time accidents in 2012 were caused primarily by slips, trips and falls (19 or 50%) or musculoskeletal disorders (12 or 32%). More than half of the trips and falls happened indoors.

The **total days lost for accidents in 2012 (379.25 days)** was lower than in 2011 (605 days), primarily due to slips, trips and falls (56%). Two cases resulted in 138.5 days lost (37%), which incurred significant cost.

Figure 5 - 2012 Lost Time Accidents and Days Lost by Type of Injuries



The **number of WSIB health care claims** (52 in total) was lower than in 2011 (59). These claims resulted from injured employees seeking medical attention following an accident.

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 \$49,250.37 was applied by WSIB in 2012 for the 2008, 2009, 2010 and 2011. The surcharge was mainly due to a few re-opened claims caused by accidents that happened in 2009 and 2010.

Figure 6: Detailed information on Indicator 1b – WSIB NEER Experience Rating (effective date: Sept., 30, 2012)

	2008	2009	2010	2011	2012
WSIB Health Care Claims	18	47	59	58	52
WSIB Lost Time Claims	42	40	47	33	38
WSIB Annual Premium *	\$1,303,249	\$1,372,937	\$1,381,637	\$1,516,125	\$1,582,332
NEER Rebate/(Surcharge)	\$221,226.54	(\$175,847.32)	(\$164,095.50)	\$249,561.71	(\$49,250.37)
Performance Index	2.50	1.39	0.89	0.96	2.10

Accommodation in Employment for Persons with Disabilities

The Employee Well Being Office (EWO) 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 employees’ respective unions.

An effective work accommodation program will decrease the amount of lost time by facilitating injured employees to return to work quickly and safely. The University maintains an Accommodation Fund to provide support to local units accommodating injured or ill employees in their early and safe return to work. In 2012, the Fund contributed to the cost of specialized equipment, workplace modifications and professional services associated with medically supported accommodation needs.

Page 12 is a summary of the number, type and cost of accommodations in 2012:

* The WSIB assessment rate per \$100 payroll was 34 cents in 2008, 2009 and 36 cents 2011 and 2012. 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, resulting in a potential rebate eligibility.

Figure 7 – Number, Type and Cost of Accommodations in 2012:
(Data provided by the EWO)

Employee Group	Number of Requests	Type of Accommodation ¹			Nature of Accommodation Requested					Disposition			Amount Spent ²
		WSIB	LTD	OTHER	JR	EQ	SS	MH	OTHER	O	S	U	
CASUAL	2	2			2						2		
CUPE 3903	2			2	2						2		
CUPE 1356	48	21	1	26	39	1		9	1	19	29		\$7,949
CUPE 1356-1	5	1		4	4			1		1	4		\$2,700
CUPE 1356-2	0												
CPM	7	1		6	3	2		2		1	6		\$5,668
IUOE	2	2			2						2		
YUFA	10	2	1	7	6	3		1	1		10		\$1,435
YUSA ³	36	4		32	32	2		3	1	1	25		\$11,389
OPSEU	0												
TOTAL 2012	112	33	2	77	90	8	0	16	3	22	80	0	\$ 29,141
TOTAL 2011	121	23	1	95	4	6	0	9	94	32	63	11	\$ 44,162

Footnotes:

1. To qualify for accommodation, an employee must be under a physician's care for a specific disability.
2. Is exclusive of first \$1000 paid by the department for accommodation items.
3. Includes salary estimate for permanent job accommodation.

Legend

Requests for Accommodation

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

Nature of Accommodation

JR Job Redesign
EQ Equipment using funds
SS Support Services
MH Modified Hours
OTHER e.g., IME, professional services

Disposition

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

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 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. There is one Health and Safety Representative for employees of the York University English Language Institute (YUELI) and members of the Ontario Public Service Employees Union (OPSEU), Local 578, as the department is too small to form a JHSC.

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, MOL reports, etc.) are copied to the relevant JHSC(s). Members of the JHSC review accident summary reports at every meeting.

In 2012, the University took the following steps in response to concerns raised by the various JHSCs:

- Addressed health and safety concerns (signage of fire extinguishers, location of safety showers etc.) in the Life Science Building;
- Reviewed security response procedures;
- Reviewed operating procedures on the use of slow moving vehicles (e.g., golf cart) on campus walkways;
- Installed an animal bedding disposal unit in the vivarium in the Farquharson Life Sciences Building;
- Provided a statistical summary of workplace harassment and violence incidents; and
- Removed obstructions from a loading dock at the Health, Nursing and Environmental Studies Building.

Indicator 2a – JHSC Meetings for 2012

The number of JHSC meetings for 2012 was in compliance with the OHS Act.

The *Occupational Health and Safety Act* requires JHSCs to meet at least once every three months. All committees met as required except YUFA JHSC, which had to reschedule its December meeting to January 2013 to ensure quorum.

Figure 8: Detailed Information on Indicator 2a – JHSC Meetings in 2012

JHSC Meetings¹ 2012		
JHSC	No. of Meetings 2012	No. of Meetings 2011
CUPE 1356,1356-1²	9	6
CUPE 3903³	6	5
YUFA⁴	3	5
YUSA⁵	8	10
IUOE⁶	4	4
Footnotes:		
1. <i>OH&S Act</i> requires committees to meet once every three months.		
2. CUPE 1356,1356-1= Canadian Union of Public Employees, Local 1356, 1356-1		
3. CUPE 3903 = Canadian Union of Public Employees, Local 3903		
4. YUFA = York University Faculty Association		
5. YUSA = York University Staff Association		
6. IUOE = International Union of Operating Engineers		

Indicator 2b – JHSC Workplace Inspections in 2012

All committees conducted workplace inspections in 2012.

All JHSCs conducted workplace inspections as scheduled in 2012. In addition to worker members conducting workplace inspections, managers and/or supervisors also conduct annual inspections.

Figure 9: Detailed Information on Indicator Number 2b – JHSC Workplace Inspections in 2012

JHSC	2012		2011	
	Inspections Completed	Person Hours	Inspections Completed	Person Hours
CUPE 1356, 1356-1	51	37.25	26	23.5
CUPE 3903	10	17.5	0	0
YUFA	12	35	3	14
YUSA	13	126	22	61
IUOE	11	49	8	12
YUELI	3	1.15	3	1.5
University Totals	100	265.9	62	112

Indicator 2c – JHSC Recommendations

There was one formal recommendation sent to the VP Finance and Administration from the Joint Health and Safety Committees in 2012

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. 2012 - Dec. 2012								
Recommendation by	Date	Recommendation to	Type of Recommendation	Nature of Response				Timeliness of Response
				Agree	Disagree	Further study	No response	
JHSC-YUSA	Nov. 8, 2012	VP-Finance & Administration	Recommend the implementation of the "Final Report on the Management of Soiled Animal Bedding".	Yes				Within 21 days

Indicator 2d – Radiation Safety Committee Compliance

The University was in compliance with the Canadian Nuclear Safety Commission (CNSC) requirements in 2012. The University renewed its consolidated license in 2012 and submitted an annual report to the CNSC as required by York's licensing conditions.

The University's Radiation Safety Committee is responsible for establishing criteria for the use of nuclear substances 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 2012.

In 2012, the University completed a lengthy process to renew its consolidated licence, which included submitting its inventory, operating procedures, Radiation Safety Program, list of user and usage location and training content. The University issued 28 internal radioisotope permits as of December 2012. The University Radiation Safety Program is reviewed by the Committee once every two years.

Other radiation sources on campus, including X-ray equipment and Magnetic Resonance Imaging (MRI) facilities were inspected in 2012 by the University's Radiation Safety Officer. There were no reported incidents.

Indicator 3 – Government Contacts

The University was in compliance with direction received from government agencies in 2012.

This indicator is a measure of compliance with direction received from regulatory agencies.

There were ten visits by the Ontario Ministry of Labour (MOL) in 2012. Four were incident investigations, four were complaint investigations (from two complaints) and two were regular inspections (MRI and X-ray source).

Eight of the ten visits did not result in any orders from the MOL. One visit resulted in an order to provide a lease agreement between York and the non-York facility inspected. Another resulted in seven orders related to the procedure for changing of outdoor lights using a boom truck.

Detailed Information on Indicator 3 - Government Contacts, 2012

Date	Government Agency	Reason for Contact	Government Response	University Response
16-Jan-12	MOE	Inspection of Hazardous Waste Storage/Manifests (in Grounds, Faculty of Science & Engineering).	Issued a report with findings. Over all University compliant except for one type of hazardous waste not stored properly.	Proper storage has been arranged by Grounds.
08-Feb-12	MOE	Follow up visit to inspect the completion of the proper storage for hazardous waste.	Confirmed compliance	Compliance achieved.
19-Jun-12	MOL	Investigation. While installing a new light post, the boom arm on the boom truck was struck by a YRT bus and the top of the bus was damaged. No workers were injured.	Seven orders were issued (including items related to SOPs, signage, traffic control person, traffic protection plan, personal protective equipment)	University responded and complied with all the orders.
3-Jul-12	MOL	Investigation of motor vehicle accident.	No order issued	None required.
24-Sep-12	MOL	Investigation. A glass wall collapsed at West Office Building. No workers were injured.	No order issued.	The University immediately cleaned up the broken glass and barricaded the area with dry wall.
24-Sep-12	MOL	Investigation of a trip and fall over a computer cord injuring the hip of a worker.	No order issued.	A safety awareness notice on workplace house-keeping was issued to Area Health and Safety Officers for distribution.
24-Sep-12	MOL	Complaint investigation. A worker filed a complaint pertaining to ergonomic concerns related to the set up of a workplace.	No order issued.	Engaged University Ergonomist to work with the manager and workers to address ergonomic concerns.
18-Oct-12	MOL	Original purpose was to respond to a complaint from staff in the Toronto Track and Field Centre about not receiving workplace harassment and violence prevention training. During the visit the inspector gave verbal orders to York.	Verbal orders were given to correct items including the guarding of fan belts, replacing lights, locking electrical panels, repairing damaged insulation and checking gas valves (Embridge Gas).	Corrective action completed. The valves used by Embridge Gas were found to be acceptable.
24-Oct-12	MOL	Follow-up investigation of the complaint from Track and Field Centre on Oct. 18, 2012.	One order issued. The University was to send a copy of the lease agreement (between York University and the City of Toronto) to the MOL.	University has complied with the order on the same day.
25-Oct-13	MOL	Continue investigation of the complaint filed on Oct. 18, 2012.	No order issued. University to set up meetings with Track and Field Centre staff to discuss training and formation of a JHSC.	York staff met with the City of Toronto staff on Nov. 08, 2012 and Jan. 25, 2013. City of Toronto to set up first JHSC meeting.
17-Nov-12	OMAFRA	Inspection of Animal Facilities.	Provided report concerning a list of issues found within the facilities, the University had already started a process to address them.	Members of the Animal Care Committee are continuing to address issues outlined in the report.
22-Nov-12	CCAC	Audit of Animal Facilities and Animal Research Programs.	Team of Federal Auditors performed full day on-site inspection of programs and facilities	Members of the Animal Care Committee along with AVP Research & Innovation, toured animal facilities and answered questions regarding animal research programs.
29-Nov-12	MOL	MRI Safety Inspection.	No order issued.	None required.
29-Nov-12	MOL	Cabinet X-ray source registration and site inspection.	No order issued.	None required.
6-Dec-12	CNSC	Annual inspection.	Requested the University to lock and secure a roof moisture meter containing a radiation source.	University has complied with the request.

CCAC = Canadian Council of Animal Care

CNSC= Canadian Nuclear Safety Commission

MRI = Magnetic Resonance Imaging

MOL = Ontario Ministry of Labour

OMAFRA = Ontario Ministry of Agricultural, Food and Rural Affairs

WSIB = Workplace Safety Insurance Board

6.2 Indicator 4 – Education/Awareness

In 2012, the University informed all supervisors of legislatively mandated training, and developed relevant training programs for employees.

Figure 12 below illustrates OHS mandatory education and awareness initiatives undertaken in 2012.

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

Fig. 12: Detailed Information on Indicator 4 - Training Courses Provided by OHS in 2012

Courses	Number of Sessions	Trained 2012	Trained 2011
Legislatively Required Training			
Asbestos Safety	1	5	14
Biosafety	20	136	136
Confined Space Awareness (once every 2 years)	3	42	-
Confined Space Rescue Refresher	3	21	-
First Aid ¹	13	139	87
Due Diligence for Senior Executives	1	1	2
Fork Lift (once every 2 years)	0	0	0
JHSC - Certification Part 1*	1	6	9
JHSC - Certification Part 2*	2	3	8
Laser Safety	5	7	14
Occupational Health and Safety Act (includes on-line training)	n/ap	144	110
Radiation Safety for Users ²	12	43	46
Respiratory Fit Testing	17	31	13
Transportation of Dangerous Goods* (once every 3 years)	2	2	2
Violence Prevention in the Workplace (on-line)	n/ap	772	781
WHMIS I ³ (includes on-line training)	n/ap	1594	1172
WHMIS II ⁴ (includes WHMIS II modified training)	29	805	427
Workplace Harassment Train-the-Trainer	0	0	49
Workplace Harassment Prevention(online)	n/ap	223	601
X-Ray Safety	2	14	8
Mandated by Internal Policy and Procedures			
Accident Investigation	11	102	77
Blood Borne Pathogens	4	50	78
Compressed Gas Cylinder Safety	4	43	72
Health and Safety Officer Orientation	3	4	6
Ladder Safety	1	2	9
Mould Control	1	5	14
Science TA***	3	126	81
Safety Orientation for New Employees (completed checklists)	n/ap	388	311
Student Workers Orientation ⁵	5	146	130
Workplace Inspections (includes on-line training)	5	149	93
Discretionary Based upon Identified Need or Requests			
Back Safety Introduction (2 hours)	11	26	8
Back Safety Supplement/Refresher (1 hour)	15	202	147
Chainsaw Operator (<i>new</i>)	2	13	-

Chemical Handling, Volatile Storage Rooms***	4	53	24
Computer Workstation Safety	12	86	48
Electrical Safety for Maintenance Workers (<i>new</i>)	1	25	-
Health & Safety for 2nd and 4th Year Engineering Students	1	43	34
Laboratory Fire Safety***	2	44	47
Machine Guarding Awareness (<i>new</i>)	2	54	-
Radiation Safety Awareness	3	15	2
Vivaria Standard Operating Procedure (<i>new</i>)	2	22	-
Vivaria BSB Health and Safety for Maintenance Workers	1	15	-
Footnotes:	Total= 204 sessions		
<p>*Courses organized by OHS and provided by external trainer.</p> <p>**Courses organized by CSBO</p> <p>***Courses organized by Faculty of Science & Engineering</p> <ol style="list-style-type: none"> 1. First Aid certification is valid for 3 years (includes Security Officials and Designated First Aiders). 2. Radiation Safety for Users, some employees received training through independent study package with completion of a quiz. 3. WHMIS I is for employees who work in proximity to hazardous materials, including training for Security Officers. 4. WHMIS II is for employees who work with hazardous materials. 5. Training for CSBO and Student Services (Don's and RLC's) employees. includes: Back Safety, WHMIS, Occupational Health & Safety Act, Sharps, Blood and Bodily Fluids, Harassment Awareness, Violence Prevention, AODA 			

6.5 Indicator 5 – Advice and Counsel

The total number of OHS interventions in 2012 was slightly higher than in 2011.

Figure 13 provides a statistical summary of the range of OHS interventions providing professional advice and counsel to members of the University community during 2012 to assist them in making decisions and taking action to fulfill statutory health and safety responsibilities.

In 2012, there was an increase in response to complaints of chemical fumes/spills and odours. The odours/fumes come from natural gas, burning, chemical, animal base etc. OHS occupational hygienists provided immediate investigative response.

There were 5 minor chemical spills in 2012. Two involved mercury (from a broken thermometer and an old gauge), others involved spills from a septic drain, spill of chemicals containing naphtha from a digital media lab and a spill from a broken flask containing biological agents. OHS safety officers assisted in the response and clean up.

Figure 13: Detained Information on Indicator 5 – Advice and Counsel 2012

Type Of Issue	No. of Interventions 2012	No. of Interventions on Same Issues 2011
Asbestos	38	40
Accessibility	0	5
Accident Prevention	39	24
Animal Care	3	0
Biohazardous Waste Disposal	9	3
Biological Spills/Exposure	6	10
Chemical Spills/Fumes/Odours	110	80
Confined Space	20	25
Diving Research	1	2
Emergency Preparedness	8	0
Emergency Response Warden Evacuation	1	2
Environmental	5	6
Ergonomics ¹	98	89
Ergonomic Committee	1	2
First Aid Supplies	85	51
Furniture RFP	0	10
General Safety	194	122
Hazardous Waste Disposal	30	25
Health and Safety Program Review	10	12
Indoor Air Quality ²	97	90
Joint Health and Safety Committee (including meetings with co-chairs)	18	20
Joint Health and Safety Committee Member Orientation	2	3
Laboratory Decommissioning and Renovation	7	5
Laboratory Safety	60	64
Medical Consultant Meetings	10	7
Mould	50	40
Noise	12	10
OHS System: New Area Health & Safety Officer Orientation	4	6
PCB	2	3
Public Health	4	10
Radiation Safety (including MRI)	9	11
Research Enquiries & Meetings	2	2
Return to Work Meeting with Employee Well Being Office	0	4
Safety Inspection & Assessment (new building)	12	10
Senior Executive Occupational Health & Safety Orientation Meetings	2	3
Sharps (Pick-up and Disposal)	2	3
Smoking	21	16
Subway Construction	5	4
Violence/Harassment in Workplace Program	10	29
Water Contamination & Sampling	10	8
Work Permit Approvals	37	36
Work Refusal - Internally Resolved	0	2
Totals	1034	894
Footnotes:		
1. Individuals or departments who received ergonomics advice but no 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 Assessment and Testing

In 2012, the University was in compliance with the requirement for statutory testing.

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

There was an overall decrease in occupational hygiene testing as most of the enquiries or concerns were addressed through verbal advice or consultation (note: the amount of advice provided increased in 2012 as shown in indicator #5). The only testing that increased was ergonomic assessment. This is likely as a result of an increase of computer users and an increased awareness of musculoskeletal hazards and the benefit of early reporting.

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

Type of Tests	Tests Conducted 2012	Tests Conducted 2011
Statutory Testing		
Biocontainment Cabinets/Laminar Flow Hoods ¹	46	47
Radioactive Sealed Sources Leak Testing	4	9
Radioisotope Laboratories Monitoring	19	22
X-RAY Machine Leak Testing	1	1
Mandated by Internal Policy and Procedures		
Biosafety Laboratory Inspection & Commissioning	10	14
OHS Equipment Calibration	6	2
Ergonomics ²	43	25
Ergonomics (referred by Employee Well Being Office)	28	30
Laboratory Inspections ³	43	52
Indoor Air Quality	56	70
Indoor Mould Assessment	20	30
Other Hygiene ⁴	105	110
Workplace Noise Testing of Areas >85dBA	6	5
Footnotes:		
1. OHS coordinated the annual certification of biosafety cabinets which is done by an external firm.		
2. Number of individuals or departments who received at least one visit. Multiple visits of an individual will be counted just once.		
3. Inspection of scientific laboratories in the Faculties of Science and Engineering, Health, Liberal Arts and Professional Studies.		
4. Includes testing for hazardous gases and vapours in response to odours and spills (e.g. flammables, organic vapour, carbon monoxide and hydrogen sulphide, etc.)		

Indicator 6b - Occupational Health and Disease Prevention

York University protects employees from hearing loss and exposure to chemical and biological hazards through its medical surveillance and biosafety programs.

Medical Surveillance Program

The medical surveillance programs (e.g., for exposure to biological hazards, respiratory protection, hearing conservation, etc.) establishes the initial health status (baseline) of a person and ensure adequate safety measures are enacted for the hazards present in the workplace. For example, audiometric or hearing tests are conducted annually for workers exposed to high noise levels to monitor the effectiveness of hearing protection. In addition, workers who may be exposed to biological hazards are required to complete a medical questionnaire and be assessed by a medical practitioner to ensure that various immunizations and medical tests (e.g., TB tests) are completed before work begins, and annually for specific work activities.

Biosafety Program

New regulations are being developed under the *Human Pathogens and Toxins Act (2009)*. These anticipated to be released in the fall of 2015. York's Biosafety Officer, with counterparts from other Ontario universities, actively participated in the consultation process. These regulations will have significant impact for the research community, in particular, those using biological agents and animals, such as, the Faculty of Health and Faculty of Science and Engineering (affecting about 55 permit holders and 300 employees). Some proposed requirements include: the development of a permit system for the use of biological agents; inventory; regular inspection; medical surveillance; lab commissioning and decommissioning; incident management; and, design requirements for laboratories.

The Biosafety Program, managed by the University Biosafety Officer (BSO), has progressively grown since it was formally established in 2010. A permitting/certification system is in place for all biological research, which began with 11 certificates in 2003, increasing to 55 by 2012. The BSO, with the University's Biosafety Committee, actively inspects, commissions/decommissions labs, and develops procedures/guidelines on safe handling, emergency/spill response, disinfection and biohazardous waste disposal. In 2012, 136 employees received biosafety training.

The BSO also provides expert advice to the York community regarding exposure to biohazardous materials (including reportable, communicable diseases) by liaising with OHS medical consultants and government authorities.

Below is a summary of biosafety and medical surveillance activities in 2012.

Figure 15: Indicator 6b - Summary of Biosafety and Medical Surveillance Activities in 2012

	No. of Tests/Participants	
	2012	2011
Biosafety Program		
Biosafety Certificate Approval - New	9	3
Biosafety Certificate - Renewal	26	20
Biocontainment Cabinets and Laminar Flow Hoods Certification	46	47
Medical Surveillance Programs		
Animal Care Workers and other biohazards ¹	45	35
Audiometric Testing	131	124
Vision Screening for New Laser Workers	7	17
Note: 1. OHS provides employees with instructions for completing the health assessment form.		

2013 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	Achieve the Lost Time Injury (LTI) per 100 workers below the LTI for the rate group (i.e. educational facilities).
6.2	Safety Committees	Continue to monitor that the number of JHSC meetings is in compliance with the OHS Act. Monitor workplace inspections to ensure that workplaces in the University are inspected.
6.3	Government Contacts	Continue to maintain 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 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. In 2013, the following programs will be reviewed: Accident Investigation, First Aid, Indoor Air Quality, Transportation of Dangerous Goods, Working Alone, Lift Truck, Ladder Safety, Medical Surveillance Protocol, Workplace Harassment Prevention and Workplace Violence Prevention.
3. Maintain communication with and the engagement of Area Health and Safety Officers (HSOs) to support and strengthen their roles in the University's Occupational Health and Safety Management System.

New Projects

1. Conduct Occupational Health and Safety System audits of Faculties/Departments following the established multi-year audit schedule. In 2013, Campus Services and Business Operations (CSBO), the Faculty of Liberal Arts and Professional Studies, three VP Offices, and Sports and Recreation will be audited.
2. Develop a York University laboratory design guide incorporating relevant standards. This guide will be provided to CSBO Project Coordinators who will ensure that contractors incorporate these standards prior to the design construction or major renovation of buildings containing laboratories. The guide will also include references to special laboratories (e.g., laboratories using nuclear substance, biological agents, lasers etc.) that have specific requirements.
3. Enhance compliance using technology. For example, automated training data upload, access to training records through intranet for both employees and managers, regular unit-specific accident statistics communication to managers, and automated online training registration form, etc.

4. Evaluate the adequacy of automated external defibrillators (AEDs) on campus in consultation with the in-house medical consultant. Determine the number of AEDs to be added by considering risk groups, accessibility and resources to maintain the AED's.

Appendix I

University Policies, Procedures & Regulations Database

University Policy

Occupational Health and Safety

: Pol 008

Description:

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, 2011/06/20, 2012/06/25
Date Effective: 1991/05/13; *This policy must be approved annually by the Board of Governors.*

Approval Authority: Board of Governors

Signature: "M. Shoukri"

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 Code of Student Rights and Responsibilities.

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.