Evolution of ODAP to Ontario's Occupational Illness Prevention Plan

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Occupational Illness Prevention Plan Members



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Occupational Health and Safety System and partners collaboration toward occupational illness prevention

ODAP to Occupational Illness Prevention

2017

Implementation Team

OD Awareness System Priority

Working groups start at different stages

Noise takes lead & sets model for INAD campaign, tools & KTE

2018

A&I Resources

Diesel & Noise Webinars

CARWH Conference Poster

OCRC OD Surveillance System (ODSS)

2019

Preventoccdisease.ca

Respiratory Hazards WG

Heathy Workers in Healthy Workplaces

OCRC ODSP

Auditor General Report Recommendation

2020

COVID-19 Workplace Safety Plan

Paul Demers Report

Physician/Clinician's Toolkit

OEL Adjust Tool

Action beyond Awareness

2021

Logic Model working group

New OH & S System Strategy:

Prevention

Works: systems

focus on occupational illness (July)

Occupational Illness

Prevention Steering

Committee

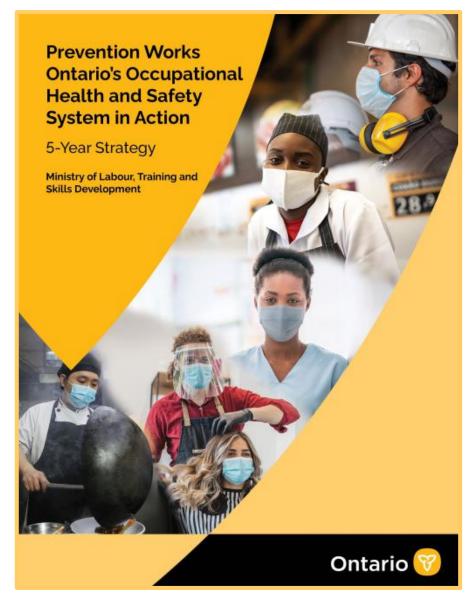
Collective Impact

Evidencedriven

Performance Measures

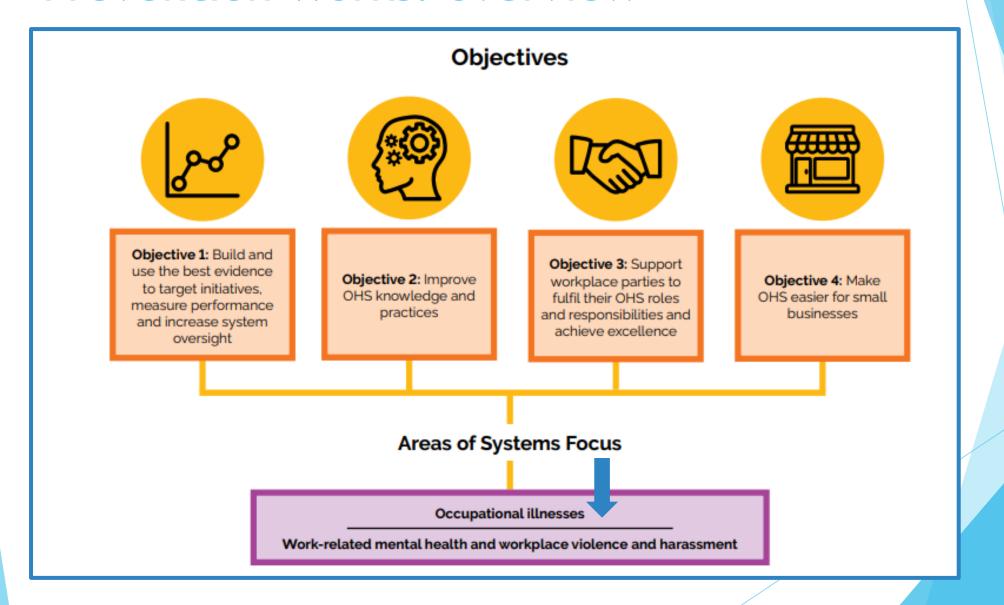
Prevention Works: context

- The 2021-2026 Occupational Health and Safety strategy – called <u>Prevention Works</u> – was released in July 2021.
- Prevention Works was developed based on:
 - Auditor General recommendations.
 - Province-wide consultations.
 - Extensive research and analysis of OHS data and other sources of evidence.
- Prevention Works was socialized extensively with stakeholders – with positive feedback – including:
 - The Canadian Federation of Independent Business (CFIB).
 - The Business Council on Occupational Health and Safety (BCOHS).
 - The Ontario Federation of Labour (OFL).
- It is a legislative requirement (OHSA S.22.3) of the Chief Prevention Officer to develop a Provincial OHS strategy and provide it to the minister.





Prevention Works: overview



Why Occupational Illness?



What problem are we trying to solve?

Ontario workers are exposed to occupational hazards at levels that cause illness, resulting in a high burden to the system, individuals and their families.

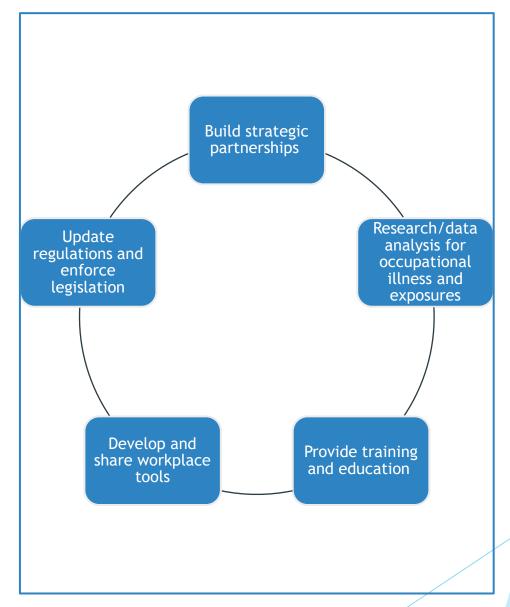
- Work-related illnesses result in over 75% of workplace fatalities; have a negative impact on the quality of life of Ontario workers and their families; and cost billions of dollars per year in health care expenditures and lost productivity.
 - Between 2010 and 2019, the WSIB allowed about 136,000 occupational disease claims, which made up over \$910 million in benefit costs.
 - However, these statistics greatly under-estimate the prevalence and burden of occupational illness due to under-recognition and underreporting

Consequences:

- Prevention opportunities, their impact and emerging issues are not identified
 - Workers do not receive compensation benefits
 - Health care costs are inappropriately borne by the public health insurance system

How can we solve this problem?

- Build Capacity of the OHS System and external partners to:
 - Improve the recognition and control of hazardous exposures in Ontario workplaces
 - Improve OI recognition among workplace parties and primary care providers
 - Improve reporting of OI by workplace parties and primary care providers



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Long-Term Priority Setting

Criteria for priority setting

- Need: where is the greatest need to focus prevention efforts?
 - Prevalence: defined as the # of illnesses and fatalities caused by an occupational exposure.
 - Severity: defined as an exposure to a hazard leading to a fatality or severe illness.
 - Economic burden: consider the economic burden posed by the related illness(es), as available
 - Relevance: consider our distinct role in the prevention and control of the exposure(s). Are we in a position to lead the related prevention efforts (e.g. due to our mandate), or would we play a supporting role?
- **Impact:** defined as the exposures with the greatest potential for impact from a prevention perspective.
 - Considering the plan as a "5-year plan" but also focusing on initiatives that can be implemented and have an
 impact right away ("low-hanging fruit")
- Innovation and Equity



Background

Burden of Occupational Disease

We have learned

- Approximately 3,000 cancers diagnosed each year in Ontario are due to occupational exposure to 16 carcinogens commonly found in the workplace
 - Solar radiation, asbestos, diesel engine exhaust & crystalline silica

We have more to learn

- Occupational disease fatalities have been approximately twice that of traumatic fatalities in each of the past ten years, however
- the number of work-related illness cases and related fatalities is much higher than compensation statistics indicate

Priorities of ODAP

- Hazards:
 - Noise
 - Allergens & Irritants (both skin & lung)
 - Diesel Exhaust Emissions
 - Respiratory Hazards
 - Asbestos, crystalline silica
 - Emerging Issues
 - Nanotechnology
- Data and Evidence:
 - Intelligence and Decision Support
- Special Focus:
 - Electronic Medical Records

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Need and Impact Rankings

Need

- Noise
- 2. Allergens and irritants
- 3. Biological hazards
- 4. Crystalline Silica
- 5. Shift work
- Heat stress
- 7. Diesel engine exhaust
- 8. Solar UV radiation
- Asbestos
- 10. Vibration
- 11. Radiation (ionized and non-ionized)
- 12. Organic solvents
- 13. Nano-technology

Impact

- 1. Biological hazards
- 2. Noise
- 3. Crystalline Silica and Asbestos (tie)
- 4. Heat stress
- 5. Allergens and irritants
- 6. Solar UV radiation
- 7. Diesel engine exhaust
- 8. Vibration
- 9. Shift work
- 10. Organic solvents
- 11. Radiation (ionized and non-ionized)
- 12. Nano-technology

*Welding fumes was only ranked by 2 respondents



Overall rankings

- . Noise
- 2. Biological hazards
- 3. Crystalline silica and Allergens & irritants (tie)
- 4. Heat stress
- 5. Asbestos
- 6. Diesel engine exhaust
- 7. Solar UV radiation
- 8. Shift work
- Vibration
- 10. Organic solvents
- 11. Radiation (ionized and non-ionized)
- 12. Nano-technology



Occupational Illness Prevention

Prevention Works Strategy Improve the recognition and control of hazardous exposures in Ontario workplaces and the recognition and reporting of occupational illnesses Regulations and **Education and** Research and **Build Strategic** Workplace Tools **Training** Legislation **Partnerships** Data Activity **Potential** Activity Project: JHSC Activity: **Electronic Medical** Project: Silicosis Surveillance training review Ongoing Records Inventory and Regulatory evaluate OI impact workplace tools assessments -Activity: ECHO OEM **OELs** pilot **Potential Project** Silica Control **Tool Pilot** OHCOW, CCOHS, IHSA/ **BCCSA**

Long-term Outcome: Reduced incidence and burden of occupational illness

Questions

 Do these exposure priorities resonate with you?

- 2. What is the something your workplace might be able to action to reduce exposures that may cause occupational illness and /or help with underreporting /under recognition?
 - a. Discuss with JHSC
 - b. Review Occupational Illness reports
 - c. Sign up to participate in Silica Tool pilot
 - d. Review stats <u>www.occdiseasestats.ca</u>

- 1. Noise
- 2. Biological hazards
- 3. Crystalline silica
- 3. Allergens & irritants (tied with silica)
- 4. Heat stress
- 5. Asbestos
- 5. Diesel engine exhaust
- Solar UV radiation
- 8. Shift work
- Vibration
- 10. Organic solvents
- 11. Radiation (ionized and non-ionized)
- Nano-technologyWelding fumes (ranked only by 2 people)

Occ-omplishments (highlights 2020/21)

- COVID
 - Workplace Safety Plan Builder
 - Workplace Safety Prevention Services (WSPS) developed a <u>Prevent COVID-19</u> <u>at Work</u> free mobile App
 - (IHSA) produced over 40 guidance resources & developed 13 on-demand <u>COVID-19 awareness webinars</u>
 - OHCOW Occ-COVID Webinars, <u>COVID Regional Risk Tool, Ventilation Checklist</u>
- OCRC Occupational Disease Stats Database
- (CREOD) created a <u>Skin Health at Work toolbox</u>
- OHCOW OEL Adjust Tool which allows workplace parties to calculate the adjusted workplace exposure limit for an unusual or extended work shift in support of the MLTSD Occupational Health Regulatory Modernization Amendments.
- ► The Occupational Disease Labour-Management Committee, supported by the Infrastructure Health and Safety Association (IHSA), held a seminar, attended by 70 stakeholders, on Regulation 33: Control of Exposure to Biological or Chemical Agents, featuring Paul Demers, who shared the results from their study on strategies to reduce <u>future burden of cancer in the Ontario construction industry</u>.
- Occ-tober Event & OHCOW Winter Webinar Series
- ► OHCOW, CCOHS, IHSA/BCCSA- Silica Control Tool Pilot Program

For More Information, Tools and Resources on Occupational Disease Prevention

preventoccdisease.ca