

# IMPACT ACT

**CREATING**



**The successes of PSHSA  
are directly attributed  
to the depth and breadth of talent  
we employ and the environment  
of innovation and collaboration  
we support.**

**Ronald L. Kelusky**  
*President and CEO*

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**Ronald L. Kelusky**  
*President and CEO*



**Thomas Hayes**  
*Board Chair*

# LETTER FROM THE CEO

**As the Chair of the PSHSA Board and as President and CEO, we would like to take this opportunity to thank the staff, stakeholders, advisors and Board members for helping Public Services Health and Safety Association achieve another outstanding year in delivering health and safety services and solutions to Ontario's Public and Broader Public Sectors.**

**2016-2017** was the final year of a very successful three-year strategic plan. In 2014, we embarked on a journey to transform and reinvent our business. This transformation was based on extensive consultation with our stakeholders and staff who helped us challenge the status quo and point the organization in a new direction. We set an aggressive plan to increase our reach and reputation within our constituencies of Health and Community Care, Government and Public Safety, and Education and Culture. Building on the strengths of our legacy, and through innovation and collaboration both internally and externally, we not only met but exceeded our goals and expectations.

Our goal was to deliver products, services and solutions in ways that would address the ever growing fiscal and time constraints placed on our sectors. We wanted to provide opportunities for employers to become more self-sufficient, to lower costs and to move aggressively into the digital world. We embraced research and began to focus on systemic issues challenging our sectors. We balanced the one to one client-consultant relationship with the one to many approach which yielded a 300% increase in persons trained. In 2016-2017, over 78,000 people were trained and certified by PSHSA. All in all we are pleased with our accomplishments in meeting the needs of our stakeholders.

In 2016-2017, the Province of Ontario introduced two major health and safety initiatives: Bill 163, Supporting

Ontario's First Responders Act (Post-Traumatic Stress Disorder), 2016 and Bill 132, Sexual Violence and Harassment Action Plan Act, 2016. PSHSA was proud to have developed programs and solutions to help employers, unions and associations understand these changes and the new requirements under the Occupational Health and Safety Act.

Perhaps one of our greatest accomplishments in 2016-2017 was the support we provided to Ontario's Public Safety and Correctional Services organizations through the development of the FirstRespondersFirst.ca interactive portal. This innovative approach utilizing interactive technology enabled users to access information and resources to build their PTSD program to address this significant challenge. Working with mental health professionals, this program was designed to be a one-stop point of access for Ontario's Public Safety and Correctional Services organizations as well as any other sector that is impacted by traumatic and occupational stress. The success of this model is being extended to address workplace violence in healthcare where the latest tools and information will be available in an accessible and interactive format.

As you read our annual report, keep in mind that the successes of PSHSA are directly attributed to the depth and breadth of talent we employ and the environment of innovation and collaboration we support.



# CREATING IMPACT

ASKLISTENSOLVE

## Impact—The Effect of Strategy, Action and Innovation

These numbers reflect our three-year journey, which started with strategy, moved to action and ultimately led to the implementation of innovative market approaches to drive healthier and safer Ontario workplaces.



**2,700<sup>+</sup>**

firms engaged in 2016-17.

**78,000<sup>+</sup>**

workers trained and educated in 2016-17.

**150,000<sup>+</sup>**

workers trained over the last 3 years.



**This year's Annual Report is a celebration of our successes,**

acknowledgement of our future challenges and a renewal of our focus on addressing existing and emerging occupational health and safety hazards and risks.

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**JOIN**  
**US**

as we lend our expertise and leading practices in a variety of areas to assist you with your health and safety programs.

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# POST-TRAUMATIC STRESS DISORDER



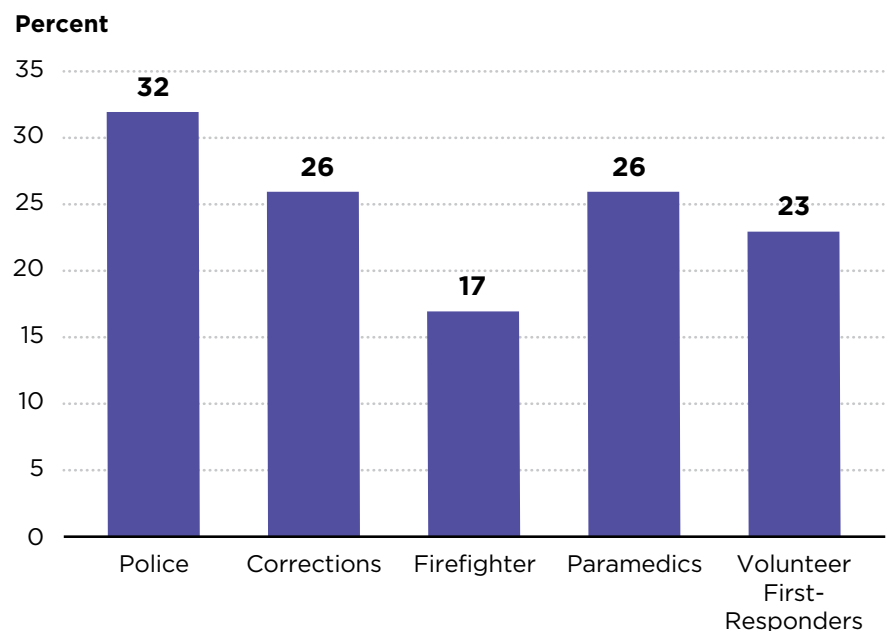
Post-Traumatic Stress Disorder

## POSITIVELY IMPACTING THE LIVES OF FIRST RESPONDERS

**The prevalence of Post-Traumatic Stress Disorder (PTSD)** among first responders is significant and of increasing concern due to the gravity of potential effects, symptoms and risk factors. In 2016, 48 first Canadian responders died by suicide caused by exposure to traumatic stressors (<https://www.tema.ca/inthenews>).

PTSD received significant profile in 2016 with the Province of Ontario passing the *Supporting Ontario's First Responders Act* on April 5, 2016. In Ontario, PTSD was not presumed to be work-related prior to this new legislation. The *Supporting Ontario's First Responders Act* acknowledged the roles and responsibilities workplaces have in preventing and mitigating risks related to PTSD in calling for the development of PTSD Prevention Plans from all organizations covered under the legislation.

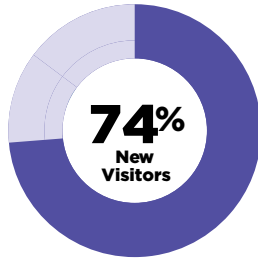
### Percentage Prevalence of PTSD in Public Safety in Canada



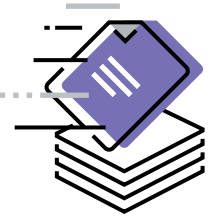
Source: <http://traumadoesntend.ca/>, <https://journalcswb.ca/index.php/cswb/article/view/6/30>

## Firstrespondersfirst.ca

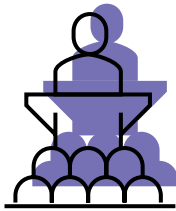
Home Page Views: **28,772**



# 540



documents provided to the Ontario **Ministry of Labour** outlining PTSD Prevention Plan details for First Responder workplaces.



## Over 14 conference sessions

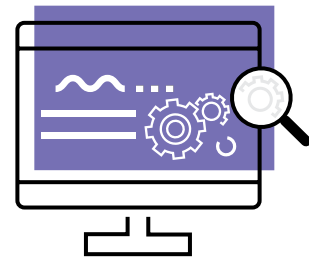
delivered to **key stakeholder groups**, including **employers, managers** and **supervisors** in the first three weeks of launch.

## WEBINARS PROVIDED



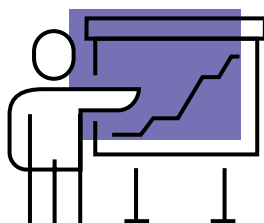
## PARTICIPANTS

with information on how to build PTSD Prevention Plans.



## eInteract

The digital toolkit (eInteract) has engaged other jurisdictions including first responders from British Columbia, Saskatchewan, Quebec and the US.



## 15 workshops

held enabling a total of **143 firms** and **267 participants** to work with experts on PTSD Prevention Plans.





In response to this serious issue, PSHSA worked collaboratively with Ontario's Ministry of Labour and Prevention Office as well as key leaders in the field of psychiatry to establish a prevention approach and launch *FirstRespondersFirst.ca*, an evidence-based digital toolkit that provides a step-by-step approach for workplaces to understand PTSD and how primary, secondary and tertiary prevention can be integrated into OHS programs. The eInteract site includes resources such as sample policies, templated program elements and project management tools to assess the readiness level, gaps and areas for intervention and additional work to support first responder organizations in the development of their PTSD Prevention Plans and related programs.

In collaboration with the Minister's Office, PSHSA drove significant traffic to *FirstRespondersFirst.ca*, resulting in over 7,000 unique page views and more than 3,000 impressions within the first week of launch and it profiles PSHSA's significant strength and capability of reaching our market with important information. The engagement of this community continues to date, having positively impacted 73,000 first responders in Ontario alone, and beyond in additional jurisdictions including British Columbia, Saskatchewan, Quebec and the United States.

**“[I am] looking to the future of this initiative in Ontario, and happy that PSHSA is developing PTSD and Anti-Stigma Awareness eLearning to further assist the first responder community. I commend PSHSA for their efforts in supporting Ontario's first responder community.”**

**George Gritziotis**

*Chief Prevention Officer and  
Associate Deputy Minister  
Ontario Ministry of Labour*

# WORKPLACE VIOLENCE IN HEALTHCARE



*Workplace Violence  
in Healthcare*



# IMPACTING CHANGE AND BUILDING SOLUTIONS

**With support from the Ministry of Labour, PSHSA** has engaged 75 health care stakeholders to address the pervasive and impactful issue of workplace violence in health care since 2014. This has resulted in the launch of a comprehensive resource for the health care sector: [www.workplace-violence.ca](http://www.workplace-violence.ca). This interactive platform houses a collection of tools and resources to provide employers with a consistent, scalable, evidence and consensus-based approach to addressing workplace violence.

The tools were developed with the intent to assist organizations in building comprehensive workplace violence programs or enhancing existing programs with new tools and resources. The eInteract site sets out five steps to building a workplace violence program. The easy step-by-step process includes interactive assessment tools and forms that help facilitate implementation and allow for customization to meet the unique needs of each workplace.

PSHSA's Executive Director of Health and Community Services, Henrietta Van hulle comments that: "We believe the successful model could also be repeated for other types of occupational injuries and illnesses".

Two initiatives have contributed to solutions for preventing the complex issue of Workplace Violence in health care. PSHSA developed five Violence, Aggression & Responsive Behaviour (VARB) toolkits and the Ministry of Labour and Ministry of Health & Long Term Care jointly initiated the Workplace Violence Prevention in Healthcare Project. Both projects were successful due to the willingness of stakeholders to work collaboratively to tackle one of the most pressing issues in health care, and included Ministries, labour unions, health care leaders, patient advocate representatives, safety experts, employer and professional associations, and policy makers.

The tools and resources produced through these initiatives will help workplaces systematically address workplace violence and take steps to change attitudes, provide support for prevention and make health care workplaces safer and more responsive to incidents of violence.

**This has resulted in:**

**ENGAGEMENT OF...**



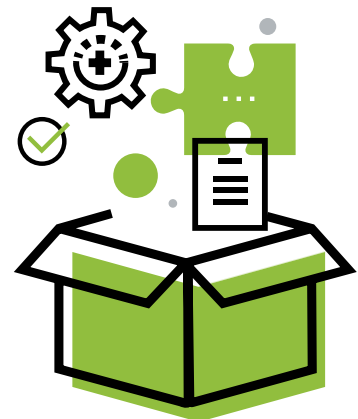
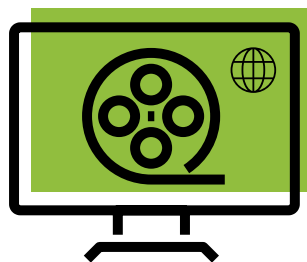
**75 key  
STAKEHOLDERS**



**12+ write-ups  
and articles**

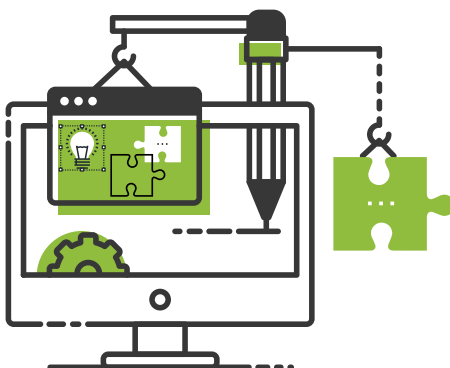
within notable health care sector publications building increased awareness of the issue.

Contribution of **subject matter expertise** for a Global 16x9 television documentary **on workplace violence in health care.**



**Launch of  
25 tools and  
resources**

to help workplaces recognize, assess and develop controls for workplace violence.



Support for the development and release of an additional **39 products** and joint Ministry workplace violence **Leadership Table** recommendations.

**PSHSA's work around violence prevention in the health care sector has gained significant recognition. In June 2017, the Minister of Labour announced that PSHSA will lead a similar initiative in the education sector to understand challenges, opportunities and leading practices for violence prevention in schools.**

The screenshot shows the PSHSA website with a navigation bar (Overview, Tools, Research, Newsroom, Contact) and a main headline: "34% of nurses reported physical assault from a patient over the past year in their workplace. (Stats Canada 2005)".

**Ontario's Workplace Violence Prevention Initiatives**

Ontario's occupational health and safety system has made notable progress over the past year. These advances were possible because the system had a common agenda - the province's integrated strategy.

Two initiatives have contributed to solutions for preventing the complex issue of Workplace Violence in healthcare. PSHSA developed 5 Violence Aggression & Responsive Behaviour (VARB) toolkits and the Ministry of Labour and Ministry of Health & Long Term Care jointly initiated The Workplace Violence Prevention in Healthcare Project.

Both projects were successful due to the willingness of stakeholders (Ministries, labour unions, healthcare leaders, patient advocate representatives, safety experts, associations, policy makers and more) to work collaboratively to tackle one of the most pressing issues in healthcare.

Access to the PSHSA VARB toolkits.

Access the Leadership Table Progress Report and Recommendations and Products to assist with managing Workplace Violence.

**Quick Links**

- Workplace Risk Assessment and Security Gap Analysis
- Client Risk Assessment
- Community Care Risk Assessment

**Addressing Workplace Violence in Healthcare**

The tools and resources found on this site will provide workplaces with a consistent, scalable and consensus-based approach that can be used to:

- Build a comprehensive program OR
- Enhance an existing program with new tools and resources.

To go to the Five Steps to Building your Workplace Violence Program, please click the graph below.

**The Five Steps to Building your Workplace Violence Program**

Public Services Health & Safety Association (PSHSA) works with Ontario's public and broader public sector workers and employers, providing occupational health and safety training, resources and consulting to reduce workplace risks and prevent workplace injuries and illnesses.

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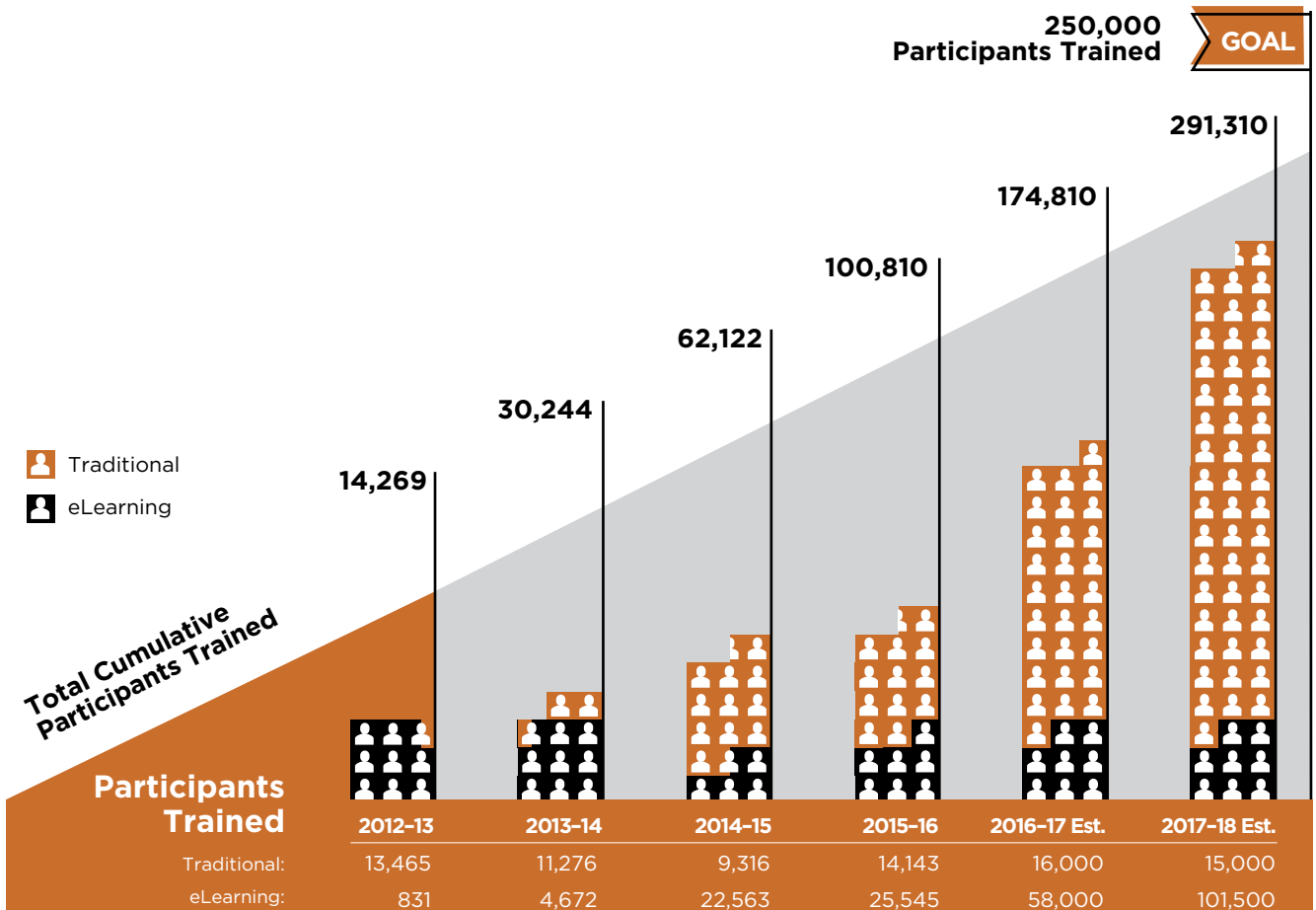


# SCALING DELIVERY

Scaling Delivery

# THE IMPACT OF FLEXIBLE AND ADAPTABLE APPROACHES

Prior to the launch of our 2014-2017 strategic plan, PSHSA trained an average of 15,100 people annually. In an effort to expand our impact, we set a goal of achieving 250,000 participants trained both in the classroom and via eLearning in 3-5 years. Based on current projections, it is anticipated that we will exceed this goal by the end of 2017-18.





**“We participated in the pilot PSHSA Health & Safety for Supervisors and Managers Blended Program in 2017. The Blended approach made training efficient and accessible for our staff. We now have practical on the job learning from the course to apply to our specific workplace. The staff who took part in the course left with an enhanced appreciation for their role, and fully understand their health and safety responsibilities in the workplace.”**

**Karen Suk-Patrick**

*Director, Organizational Development and Employee Health Services  
Guelph General Hospital*

## ELEARNING, BLENDED LEARNING AND LICENSING

As some employers have explained, it is not the cost of training that acts as a barrier to participation, but the cost of releasing and backfilling staff to attend the training. PSHSA understands the challenges employers in our sectors experience related to limited time and money. In response, PSHSA has developed a series of programs combining both traditional, in-class learning and eLearning components to form a blended offering. The eLearning module can help to reduce the cost of attending the classroom component by up to one full day.

This past year PSHSA piloted the blended Health and Safety Training for Managers and Supervisors training program. A lot of responsibility comes with being a supervisor or manager; while you are expected to provide guidance and support to your team, you must also understand the legal risks, requirements and processes related to occupational health and safety. This new course offers managers and supervisors a new way to receive this important training. The blended option allows for the more theoretical information to be completed online, which is then followed up with one day of classroom instruction which enables the learner to understand:



how this **information links** with other workplace parties;



the **more practical** components of inspections and investigations; and



how to improve safety culture by being a health and safety **leader** in the workplace.

## AFFILIATE PROGRAM

PSHSA solved our clients challenge of accessing up-to-date health and safety information through the Affiliate Program. This program integrates PSHSA's FREE products and solutions into our clients' existing websites and intranets, which are already accessed on a regular basis by employees and members as part of their business operations. This approach has appealed to our market, engaging over 20 associations and organizations as affiliate partners. Our affiliates custom select appropriate resources that close health and safety information gaps and align with the needs and culture of their staff or association membership.



**POOLING RESOURCES**

PSHSA continues to explore alternative ways to improve access to information and affordability of services and compliance. The prevalence of similar health and safety risks and hazards within like workplaces presents an opportunity for organizations within the same sector to pool their resources to reduce the cost and improve the quality of health and safety training and solutions. PSHSA is well-equipped to facilitate this type of solution for its clients.

An example of this is illustrated by Hastings-Quinte paramedics who participated in a pilot project with PSHSA to assess the practical and economic benefits of eLearning. Given the size of the county, the high cost for both routine and mandated training was proving to be unsustainable. A further complication was geography, as some paramedics often had to travel over 100km to attend traditional classroom training.

In April 2017, approximately 150 managers and paramedics were given free access to PSHSA's Learning Management System to complete three health and safety courses online: WHMIS 2015, Worker Awareness and Workplace Harassment. Approximately 80% completed the three courses within a 30 day period. Initial results indicate that eLearning can meet the needs of mobile workforces and provide significant cost savings.

**PSHSA's business model aims to reduce the cost of health and safety for our clients, while increasing access to knowledge and information available. This approach has transformed the way that we do business and enhanced our ability to reach workers and employers with important health and safety messaging.**

**We are delivering important health and safety information to over:**

**20+ AFFILIATE PARTNERS**



**500,000 WORKERS**



**A TARGETED APPROACH TO  
TRADESHOWS  
AND CONFERENCES**

**4**

*A Targeted Approach to  
Tradeshows and Conferences*

# IMPACT

## OF THE PSHSA BRAND

**PSHSA has significantly raised the bar** when it comes to our brand experience, ensuring that we create an ecosystem of integrated products, services and information, both tangible and digital. PSHSA has focused branding efforts to increase visibility, promote new and existing products, generate leads, and drive sales of health and safety training through our targeted approach to exhibiting at conferences and tradeshows. These events and speaking opportunities provide valuable opportunities to enhance PSHSA's presence across our various sectors, and have been integral in assisting us in staying current by better understanding industry trends, gaining competitive insights, maintaining key sector contacts and establishing new relationships.

**42**



**TRADESHOWS  
ATTENDED**

**5,000**



**PROMOTIONAL  
PRODUCTS DISTRIBUTED**

PSHSA attends over 40 tradeshows and conferences annually. Each show is handpicked according to a set of criteria, and held against key objectives within the particular sector. This proven approach has allowed us to:



**Assess and Evaluate** region, booth size and location to identify our best options and optimize the overall budget.



**Learn and Discover** what attendees across sectors are looking for. What do booth visitors need? What do they want to know and learn? How can we help? Information, promotional products, handbooks, assessments and more are all considerations around key learnings.



**Engage and Act** on opportunities that best fit the PSHSA brand after engaging with contacts and building new relationships.

PSHSA is also utilizing our tradeshow strategy to enhance advertising campaigns. In February 2017, we attended the Human Resources Professional Association (HRPA) Annual tradeshow with our Blended Campaign - **“Try It and Buy It”** - to augment conversations we were having with customers and prospects. This allows booth visitors to experience the PSHSA brand in an immediate way, have more meaningful conversations and increase our overall corporate image.





# FOCUSING ON THE PREVENTION PRIORITIES

*Focusing on the  
Prevention Priorities*

# IMPACT OF COLLABORATION

**Collaboration with clients, stakeholders and partners** is foundational to how PSHSA approaches the market. We believe that through collaboration and engagement we are able to collectively address health and safety challenges within Ontario workplaces.

As the Ontario health and safety system continues to evolve, we actively participate, engage and lead collaboration opportunities as we are all working towards building a strong and innovative health and safety system.

Collaboration and coordination can achieve many things. It can help minimize repetition among the products, training and services developed and delivered by system partners, while still maintaining the sector specificity workers and workplaces require. Mutually beneficial opportunities are key in order to work together to ensure the system is operating efficiently and moving prevention forward.

In collaboration with Q5 Systems we launched our new Health and Safety Self-Assessment Tool which allows organizations to evaluate existing health and safety programs in order to identify opportunities to strengthen performance and potentially reduce premiums.

This partnership introduced a software solution to meet and improve upon Health and Safety Management System (HSMS) record keeping requirements. By working with our clients, the Health and Safety Self-Assessment Tool will help organizations to do more with less, and increase compliance, safety and quality through an in-house, self-managed solution. Collaborations of this nature allow PSHSA to go beyond traditional means to offer clients specialized services.

As part of system collaboration, in 2016–2017 PSHSA participated in five Ministry of Labour working groups. The working groups allow system partners to come together to create a common message, optimize reach and maximize the effectiveness of prevention efforts. The system priority areas included:



**Ergonomics/MSD  
Prevention Month**



**Stop Falls**



**Occupational  
Disease**



**Young Workers**



**Mental Health**

**As a whole, collaboration efforts look to coordinate research efforts as well as ensure there is sustained knowledge transfer and uptake in programs and service delivery.**

**ERGONOMIC INTEGRATED PLANNING ADVISORY COMMITTEE (EIPAC) AND ERGONOMICS/MSD PREVENTION MONTH**

In Ontario, musculoskeletal disorders (MSD) are considered a high hazard, accounting for approximately 40% of workplace lost time injuries. PSHSA collaborated with system partners to better understand MSD issues in the workplace as well as barriers and facilitators to MSD prevention and workplace ergonomics. PSHSA sits on the Ergonomic Integrated Planning Advisory Committee (EIPAC) which oversees the provincial MSD/Ergonomic Action Plan. PSHSA supported system efforts by encouraging our client organizations to complete the OHS system MSD and Ergonomic Survey distributed in 2016. Along with various field consultant activities at a regional level, PSHSA participated in additional prevention efforts such as:

- RSI Day
- Ergo Month - #workshouldnthurt campaign
- OHS System Ergo Conference
- OHS System Ergonomist Consultants Training Day
- Evidence-based Practice Series

During the month of October, PSHSA provided information and awareness activities in support of Ergonomics across these channels :

- Website
- eNewsletter
- Social Media - #workshouldnthurt and #worksafeON
- Public Relations

**#workshouldnthurt**



**Twitter** profile visits during the campaign.

**Earned top media tweet for the month of October with:**

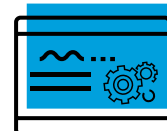
**1962 + 32**

**impressions**

**re-tweets**

**3,092** **LinkedIn** Impressions

**364** **LANDING PAGE VIEWS**



**217** **VEWS FOR "How to Conduct an Ergo Assessment"**

**65** **VEWS TO "eLearning Office Ergo"**



## STOP FALLS – SLIPS, TRIPS AND FALLS AWARENESS

Slips, trips and falls are among the leading causes of injuries resulting in workers missing time at work in Ontario. Preventing such injuries is a key goal of every safe and healthy workplace.

In support of the Ministry of Labour’s workplace enforcement blitz on falls from October 2 to November 30, 2016 PSHSA worked with fellow Health and Safety Associations to support messaging for the “Stop Falls” campaign. Using our Slips, Trips and Falls infographic, PSHSA promoted training through marketing channels using Ministry of Labour supplied logos and taglines. As well, PSHSA had article placements across vertical publications on ladder safety. By joining forces across all Health and Safety Associations, we can optimize reach and increase efficiency. Thinking and marketing strategically as a collective ensures consistent knowledge transfer and aligned campaign timing for mass impact.

## OCCUPATIONAL DISEASE

PSHSA has been working on occupational health and disease prevention in conjunction with the Ministry of Labour and other system partners. Alignment among key partners has been integral in order to build awareness and recognition of the magnitude of occupational disease. Efforts are focused on aligning priorities with respect to occupational disease, collecting and understanding relevant data, and building reliable and accessible sources of information on the location of occupational disease exposures.

A prevention strategy is most effective when there is buy in from all workplace parties. PSHSA is committed to providing appropriate job safety training, participating in targeted consultations and supporting research prevention efforts and approaches in identified priority areas to determine which are most effective.

As part of our occupational disease efforts, PSHSA is collaborating across the system to build awareness on noise, diesel and allergens/irritants.



**“Collaborative system efforts are important to assist Health and Safety Associations and other system partners in maximizing our funding and resources by ensuring the greatest return on investment.”**

### **Monica Szabo**

*Executive Director, Government, Municipal and Public Safety*  
Public Services Health & Safety Association

### International Noise Awareness Day

Between 2006 and 2015, approximately 30,000 Ontario workers were compensated for noise-induced hearing loss (NIHL). Unfortunately the true number of workers affected by NIHL is likely much higher. Hearing loss is a widespread occupational disease causing communication challenges resulting in mental and physical health concerns, and serious safety risks.

On April 26, 2017 Ontario's health and safety system partners joined together in marking International Noise Awareness Day for the first time. PSHSA participated by distributing our Noise Assessment, Noise Control and Noise Exposure resources and used our various marketing channels along with system created resources to get the word out.



**1610** **LinkedIn** Impressions

**1915** **Twitter** Impressions

### MENTAL HEALTH

Workplace mental health was identified as one of the five key priorities for the health and safety system. This has resulted in the formation of a Workplace Mental Health Working Group, led by the Prevention Office of the Ministry of Labour. The working group has focused on addressing fundamental needs within the health and safety system, such as building capacity, understanding workplace mental health and increasing awareness among employers and workers in Ontario. The team has established an action plan to drive awareness, build capacity and ensure that we are meeting the goal of ensuring workplace mental health has a prevention focus.

Overall PSHSA has participated in:



**Delivering** a conference on workplace mental health



Supporting the development of a comprehensive general mental health resource website and Post-Traumatic Stress Disorder-specific website:

**FirstRespondersFirst.ca**



**Surveying system staff** to identify gaps in knowledge to ensure we can build capacity within the system to engage clients in conversation

## HEALTHY WORKPLACES, HEALTHY CULTURE

PSHSA recognizes that the workplace can play a significant role in a person's life and has an impact on overall health and wellness. Many Canadians are or have been affected by mental health issues or illness, either personally or through friends or family members. The stigma around mental health remains a huge barrier to people getting the help they need. Internally, PSHSA has formed a Psychological Health & Safety Committee (PHS). In support of workplace mental health and Mental Health Week in May, the PHS Committee researched and recommended participation in the Not Myself Today® 2017 program. This initiative, developed by the national charity Partners for Mental Health, aims to engage workplaces across Canada to support mental health and those who may be facing challenges. At PSHSA, we want to ensure a healthy environment and help all employees perform at their best. Not Myself Today® provides information, tools and resources to raise awareness and understanding of mental health, reduce stigma and help build a psychologically safe and supportive work culture.

In addition, PSHSA supported the Canadian Mental Health Association's #GETLOUD about Mental Health campaign during Mental Health Awareness Week by using resources supplied from their toolkit. We all have a role to play in building a mentally healthy workplace and PSHSA looks forward to continuing its participation in the working group as well as providing internal support for all staff.

## PSHSA SUPPORTING SECRETARIAT PARTNERSHIP FOR BOTH EDUCATION AND HEALTHCARE VIOLENCE PREVENTION

PSHSA is actively involved in leading the way for workplace violence prevention in the education sector. As part of the Ministry of Labour's mandate to reduce and eliminate violence in the workplace, PSHSA is pleased to apply our proven model for bringing stakeholders to the table to resolve complex system-wide health and safety issues. In 2015, PSHSA made a commitment to the Ministry of Labour that we would leverage the learnings acquired during the Violence and Responsive Behaviours Project in Healthcare, and develop similar programs for the education sector. As a result, PSHSA consulted over 20 education sector stakeholder groups in two discovery workshops in 2016. The workshops focused on key stakeholders that were directly at risk and/or impacted by violent workplace incidents, such as teachers, education assistants and principals, as well as a shared understanding of stakeholders' respective needs in the prevention of workplace violence within the school community. PSHSA completed a review of leading practices and identified prevention strategies as a result. By working with education stakeholders, PSHSA prioritized intervention priorities and identified corresponding resources to address current gaps in resources.

Additionally, as a member of the Secretariat with the Ministry of Labour and Ministry of Education, PSHSA will support the working groups to develop a Ministry of Labour guidance document, communication strategy and evaluation plan.



**“PSHSA looks forward to continued strong relationships with employer and employee associations and community organizations to transform Ontario school environments into the safest learning and working environments.”**

**Kim Litchfield**

*Executive Director, Education and Culture*  
Public Services Health & Safety Association

# YOUNG AND VULNERABLE WORKERS





# IMPACTING

## YOUNG AND VULNERABLE WORKERS

**By creating opportunities for young professionals, we are providing significant benefits to young workers, PSHSA and our clients within Ontario's public and broader public sector communities.**

Ready. Set. Work. It sounds simple enough, but youth employment continues to be a challenge, with employment rates falling substantially over the past four decades (Statistics Canada, 2016). In response the Provincial and Federal governments renewed their focus on youth employment strategies by investing in youth skills development and training, as well as encouraging companies to hire young Canadians.

PSHSA is working to address the challenge of youth employment head on, and has integrated innovative employment and product development models to move workplace health and safety forward.

PSHSA's largest investment has been through internships and graduate program engagement. This has included an internship program through the Collaborative Learning of Usability Experiences (CLUE) program funded by NSERC, the University of Toronto Dalla

Lana School of Public Health and the Master of Management and Professional Accounting program at the University of Toronto Mississauga. PSHSA also offered a marketing and communications internship to a recent graduate of the University of Ottawa, and hired a Masters student from the University of Ontario Institute of Technology to work on a research project. The interns have worked on a number of high profile projects, including assisting with the development of high hazard training for fire services (for which PSHSA won an award), antineoplastic resources for the health and community services sector and occupational hygiene consulting services to clients such as the Toronto Zoo and Good Shephard.

Going beyond traditional employment, PSHSA invested in additional youth initiatives such as young worker contests and challenges, and supported

a Ministry-funded program to explore alternative approaches to reaching young people with health and safety messaging through Newcomer Peel. Through this program we have delivered over 13 training sessions to new immigrant youth in Peel region, reaching over 152 young people under the age of 24.

There are currently over **900,000** workers aged **15-24** in Ontario's workforce. There are approximately **600,000** secondary students, and **625,000** post-secondary students joining and moving throughout the workforce. In Ontario, it's increasingly important for youth to:



Have opportunities for **meaningful** employment experiences;



Have the **skills** and resources needed to develop a successful career or business; and



Be **safe** and **supported** at work

Through partnerships, education, collaboration and communication, PSHSA is working to strengthen occupational health and safety among vulnerable workers. In 2016-2017 PSHSA continued to educate employers about vulnerable workers, who they are and what they need. This includes communicating the importance of worker orientation and job-specific training.



**“#StudentChallenge is building our network within the young worker segment and setting the stage for future programs. We are committed to speaking about health and safety to future generations and look to a future that supports youth not only with job placement, but also with providing a safe and informed work environment.”**

**Glenn Cullen**

*Vice President, Corporate Programs and Product Development  
Public Services Health & Safety Association*

## YOUNG WORKER ON THE JOB HEALTH AND SAFETY

From a health and safety perspective, not only is there a wealth of potential career opportunities within the field, young workers in general are particularly vulnerable to workplace injury since they are often involved in seasonal, contract or part-time work. According to the Ministry of Labour, *“by law, young workers have the right to: know about hazards in the workplace and how to protect your health and safety; participate in resolving workplace health and safety concerns; and refuse safe work”* (MOL, 2013). However, many young workers lack the necessary resources and information to understand their rights and responsibilities at work. In response, PSHSA implemented the OHS for Young Workers #StudentChallenge to engage and educate students about the risks associated with work. Who better to design health and safety resources for young workers than young workers themselves? This has resulted in the identification of engaging and interactive training methods and resources beyond traditional fact sheets and handbooks.

## ABOUT THE OHS FOR YOUNG WORKERS #STUDENTCHALLENGE

In September 2016, PSHSA launched the OHS for Young Workers #StudentChallenge, whereby Ontario post-secondary students conceptualized innovative and creative solutions, resources or services for increasing OHS awareness and reducing workplace injuries and illnesses among young workers. PSHSA reached out to over 70 post-secondary program directors of related disciplines across Ontario to build program awareness. The winning prize for #StudentChallenge was a paid full-time internship at PSHSA, where the successful student is currently working to implement their winning concept with access to PSHSA's resources. #StudentChallenge offered students the opportunity to make a difference in Ontario's workforce, and help fellow young workers stay safe while on the job.

The 2016 winner is now working on her project submission on site at PSHSA. Her submission involves a gaming application that will be a fit across the education sector in particular, and has the potential to be integrated into the instructional design of our training programs.

## PARTNERING FOR IMPACT AND FUTURE OPPORTUNITY - CLUE

PSHSA has recently partnered with the Collaborative Learning of Usability Experiences (CLUE), a Natural Sciences and Engineering Research Council (NSERC) funded industry-based Collaborative Research and Training Experience (CREATE) program offered through three universities and more than 30 industry participants. The PSHSA-CLUE partnership will help achieve job creation in the health and safety field, making careers more accessible for students. Working with a CLUE program coordinator, PSHSA has welcomed our first intern as part of the initiative. Internship interviews and post-internship workshops are part of CLUE requirements which contribute to the applied learning approach to help enhance job prospects, as practical experience is a valuable asset in securing a job. Ultimately these types of internships greatly enhance job prospects as participants gain additional diversified knowledge along with practical work experience in the field and overall competency in navigating the actual work environment. PSHSA looks forward to welcoming CLUE placements in 2017 for a continuous 29-week duration.



**“During my time with PSHSA, I have been able to further cultivate my knowledge in occupational health and safety and also gain vital field experience when meeting with clientele. I have truly appreciated all the guidance this organization has provided me with for the many projects I have been able to work on. I look forward to additionally contributing my knowledge and skills to future assignments with PSHSA.”**

### Villy Anchor

*Health & Safety Intern*

Public Services Health & Safety Association

## AN INNOVATIVE AND SUPPORTIVE OHS ENVIRONMENT

Developing knowledge on ancillary related work environment topics is also key, and PSHSA has rounded out their youth internship program by partnering with the University of Toronto for students studying at the Dalla Lana School of Public Health. Through 2016-2017, PSHSA has hired four student interns from the Master of Public Health, Occupational and Environmental Health program. During their time at PSHSA, interns have the opportunity to gain valuable on-the-job experience in an innovative and supportive OHS environment that is dedicated to personal and professional growth. Interns are given the chance to gain exposure to key stakeholders and engage with public and broader public sector partners. PSHSA's interns also have the opportunity to contribute to leading edge health and safety research, and develop advanced prevention products and training programs.

PSHSA has committed to actively engaging interns in projects and initiatives that are relevant to their career goals.

PSHSA believes the benefits of an internship program are widespread. Not only will the program provide a future pipeline for talent, but it will also contribute to business growth and assist with accomplishing current objectives. Fresh ideas and specialized skill sets are all part of the advantages of partnering for a highly skilled workforce.

## PSHSA AND ENACTUS CANADA

In keeping with the theme of supporting young workers, PSHSA partnered with Enactus Canada in 2016. The Enactus Canada program encompasses colleges and universities across the country, including 27 campuses in Ontario. Enactus Canada is shaping generations of entrepreneurial leaders who are passionate about advancing the economic, social and environmental health of Canada. The aim of the Enactus-PSHSA Wellness at Work project partnership was to provide students with the opportunity to apply to receive funding and mentorship to support the development of projects focused addressing psychosocial workplace hazards among young workers. This initiative aimed to empower students to deliver innovative and effective programs with far

reaching impacts, while providing PSHSA the opportunity to foster relationships with enterprising youth and mobilize these emerging leaders to tackle a province-wide priority.

## PSHSA SCHOLARSHIP

PSHSA has also partnered with the Dalla Lana School of Public Health at the University of Toronto to reestablish an endowed academic award. On an annual basis, the award will be given to a second-year Master of Public Health - Occupational and Environmental Health student in the occupational hygiene professional training stream. This is a merit award on the basis of academic excellence (highest GPA) in their first year in the program. Each year the award will support the student recipient with \$2500 towards their tuition payments.

PSHSA has also worked with the Dalla Lana School of Public Health to offer a one-time, needs-based entrance scholarship to two incoming students in the same program mentioned above. The scholarships will provide \$6000 towards the tuition of each of the students over the next two years, offering financial relief so that they can focus on their studies.



**“Through this internship, I’ve gained valuable experience** in translating technical knowledge into educational material to support the health and safety of public service workers in Ontario. Working with the Product Development team at PSHSA has allowed me the opportunity to see my research and ideas come to life and be used in ways that directly impact the health and safety of our clients. My time here so far has given me invaluable insight into the health and community services sector, which I hope to join following the completion of my degree.”

### Adeeba Ahmed

*Health & Safety Intern*

Public Services Health & Safety Association



## THE FUTURE OF HEALTH AND SAFETY IN ONTARIO



PSHSA sees valuable opportunities in investing in and empowering young professionals. By taking a leadership stance to enhance student education, PSHSA can contribute to the highly skilled workforce that is part of Ontario's mandate moving forward. Quality, practical job exposure will diversify and add to the attractiveness of graduates throughout Ontario. Creating jobs and inclusive growth is part of Ontario's four-part economic plan. PSHSA will continue to support the mandate by continuing to forge partnerships in support of young workers to make a genuine difference in people's lives. Collaboration remains at the heart of what PSHSA undertakes to contribute to a highly skilled workforce and the health and safety of Ontario's young workers.

**“The support of interns and young workers has greatly impacted product development at PSHSA in that we now have access to diversified solutions and ideas that students bring to the table.**

They are courageous and engaged, they ask great questions and challenge us to think differently, providing a valuable glimpse into the future of health and safety. It has been a very rewarding experience for me as a leader.

### **Kim Slade**

*Director, Product Development and Research  
Public Services Health & Safety Association*

## IMPACTING THE PODIUM!

### **Ontario Association of Fire Chiefs Award in Support of the Fire Service**

At the Ontario Association of Fire Chiefs (O AFC) Annual Awards Dinner and Reception held on May 8th at the Toronto Congress Center, PSHSA was presented with an award for their work in support of Ontario fire service. The award was presented by Huntsville Fire Chief and President of the Ontario Association of Fire Chiefs, Steve Hernen. In attendance was Executive Director of the O AFC Richard Boyes, Minister of Labour Kevin Flynn, Acting Fire Marshal Ross Nichols and Minister of Community Safety and Correctional Services Marie-France Lalonde.

### **Canadian Society of Safety Engineers - National Special Project Award**

PSHSA was awarded the 2017 National Award for Special Projects. The award was for the development of *FirstRespondersFirst.ca* and the resources and tools produced to support organizations in building their PTSD prevention plans. This award is presented to a one-time special project that advances the profession, provides research and development opportunities, or promotes health and safety to the OHS community, employers and/or the community at large. PSHSA will receive the award at the National Conference in Halifax held in September 2017.

### **Canadian Society of Safety Engineers - Regional Outstanding Achievement Award**

PSHSA received this award from the CSSE Toronto Chapter for implementing blended health and safety learning. Blended learning is an education program that combines online learning with traditional classroom methods. As the first health and safety association in Ontario to offer a blended training option, PSHSA was recognized for innovating and driving change within the public sector.

# THANK YOU

**We would like to thank our clients** who have supported the following new product launches. We value our colleagues' knowledge, hard work and dedication to the advancement of occupational health and safety in Ontario. Thank you for your important contributions over the past year. Together, we are making a real difference.



## **REGIONAL TRAINING SITES**

Fort Erie  
Eastern Ontario Fire Academy  
WRESTREC  
Thunder Bay Fire Rescue  
Centre Wellington  
Orillia  
Georgina  
Mississauga

## **BLENDED TRAINING**

Covenant House  
Craiglee Nursing Home  
County of Dufferin  
Salvation Army Meighen Health Centre  
Just Eat Canada  
Shalom Manor  
Muskoka Algonquin Health Care  
World Travel Protection Canada Inc.  
Newcon International Ltd.  
Adjuvatnz Inc.  
Emond Publishing

Verve Senior Living  
County of Bruce  
Oakville Endoscopy Centre  
Burgundy Asset Management Ltd.  
Ina Grafton Gage Home  
Kenora Catholic District School Board  
Arcadis Canada Inc.  
City of Niagara Falls-Fire  
Surrey Place Centre  
Textile Museum of Canada  
Tillsonburg District Memorial Hospital  
Umbrella Family & Child Care Centres-HQ  
Upper Grand Family Health Team-Fergus  
Township of Wainfleet  
Mission Services of Hamilton  
Ivan Franko Home  
Ontario College of Family Physicians  
Basilian Fathers of Toronto, The Hazelton Place Retirement Residence

Art Gallery of Ontario  
 Avon Maitland District School Board  
 Brant Haldimand Norfolk Catholic District School Board  
 Windsor-Essex Catholic District School Board  
 WSP Canada  
 Trafalgar Castle School  
 Wilson Project Management Ltd.  
 T. Harris Environmental Management Inc.  
 Full Service Electric Inc.  
 Gas Powered Solutions  
 Simcoe Muskoka Catholic District School Board  
 Tillsonburg District Memorial Hospital  
 Upper Canada District School Board

### **OWN THE PROGRAM**

Protech  
 City of Windsor  
 County of Wellington  
 University of Toronto  
 McMaster University  
 City of Ottawa

### **CLIENTS WITH PSHSA E-LEARNING ON THEIR LEARNING MANAGEMENT SYSTEM (LMS)**

Bob Rumball Association for the Deaf  
 Fanshaw College  
 Humber College  
 Lambton College  
 Canadian Mental Health Association - Thunder Bay  
 St. Clair College  
 City of Hamilton  
 Durham Community Health Centre  
 Hastings and Prince Edward District School Board

Community Living Prince Edward  
 Brant Haldemans Norfolk Catholic District School Board  
 Western University  
 Ontario Association of Community Care Access Centres (OACCAC)  
 OLG  
 Brampton Public Library (BPL)  
 Region of Peel  
 Region of Durham  
 Baycrest Health Sciences  
 Region of Waterloo  
 City of Sault St Marie  
 St. Joseph's Healthcare Hamilton  
 Loyalist College  
 Toronto Hydro (Utilities)  
 Toronto Hydro (Executives)  
 Toronto Hydro  
 Brock University  
 Lakehead University  
 Peel Police  
 McMaster University  
 REVERA  
 Institute for Radiation Safety  
 MCSS/OASIS  
 Nipissing University  
 Trent University  
 Canadian Red Cross  
 University of Waterloo  
 York University

### **AFFILIATE MEMBERS**

Human Resources Professionals Association (HRPA)  
 Colleges of Ontario Occupational Safety and Health Administrators (COOSHA)  
 Ontario Recreation Facilities Association (ORFA)  
 Napanee Chamber of Commerce  
 Ontario Municipal Management Institute (OMMI)

Orangeville Small Business Enterprise Centre  
 Ontario Good Roads Association (OGRA)  
 Hospice Palliative Care Ontario (HPCO)  
 First Reference  
 Ontario Building Officials Association (OBOA)  
 Salvation Army  
 Ontario Municipal Human Resources Association (OMHRA)  
 Ontario Agencies Supporting Individuals with Special Needs (OASIS)  
 Southern Ontario Library Service (SOLS)  
 AdvantAge Ontario  
 Dental Office Consulting Services (DOCS)  
 Ontario Long Term Care Association (OLTCA)  
 Ontario Retirement Communities Association (ORCA)  
 SEIU Health Care  
 Ontario Non-Profit Housing Association  
 Association of Family Health Teams of Ontario

## GOVERNANCE & GUIDANCE

We continue to receive excellent support as we work toward our common objectives. We would like to express our sincere appreciation to our Board of Directors, Voting Members, Advisory Council members and Partners for their assistance and encouragement over the past year. Our work is truly collaborative, and we could not have realized our many achievements without your help.

## 2016–2017 BOARD OF DIRECTORS

Christopher Beveridge  
Tom Bursey  
Nick Dzudz  
Kim Froats  
Mary Guise  
Claude Haw  
Thomas Hayes  
Dan Hutt  
Glenn Hymers  
Normand Lavallee  
Pam Mancuso  
Anne Marie Malek  
Nina Resnikova  
Chris White  
Sheldon Wolfson

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Tannis Khan  
John Milton  
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Lynda Robson  
Derrick Stein  
Chris Sutton  
Peggy Van Mierlo-West  
Debra Wight  
Vivien Wharton-Szatan  
Susan Wood

## OUR VOTING MEMBERS

AdvantAge Ontario  
Association des conseils scolaires des écoles publiques de l'Ontario  
Association franco-ontarienne des conseils scolaires catholiques  
Association of College of Applied Arts and Technologies of Ontario  
Association of Local Public Health Agencies  
Association of Municipal Managers Clerks and Treasurers of Ontario  
Canadian Mental Health Association, Ontario Division  
Canadian Union of Public Employees  
Council of Ontario Universities  
Health Shared Services Ontario  
Independent School Associations of Ontario  
Ontario Association of Medical Laboratories  
Ontario Association of Chiefs of Police  
Ontario Association of Fire Chiefs  
Ontario Association of Medical Radiation Sciences  
Ontario Association of Paramedic Chiefs  
Ontario Catholic School Trustees' Association  
Ontario Community Support Association  
Ontario Home Care Association  
Ontario Hospital Association  
Ontario Library Association  
Ontario Long Term Care Association  
Ontario Medical Association  
Ontario Municipal Administrators Association  
Ontario Municipal Health and Safety Representative Association  
Ontario Municipal Human Resource Association

Ontario Museums Association  
 Ontario Nurses Association  
 Ontario Professional Firefighters Association  
 Ontario Public School Boards' Association  
 Ontario Recreation Facilities Association Inc.  
 Ontario Public Service Employees Union  
 Ottawa-Carlton Association for Persons with Developmental Disabilities  
 Police Association of Ontario  
 Service Employees International Union

### OUR PARTNERS

CRE-MSD  
 CRE-OD  
 CROSH  
 Infrastructure Health and Safety Association  
 Institute for Work and Health  
 Ministry of Health and Long Term Care  
 Ministry of Labour  
 Ontario Association of Fire Chiefs  
 Occupational Health Clinics for Ontario Workers Inc.  
 Radiation Safety Institute  
 Workers Health and Safety Centre  
 Workplace Safety and Prevention Services  
 Workplace Safety North

### PSHSA EMPLOYEES

Rita Abuyuan  
 Ryan Adam  
 Adeeba Ahmed  
 Amanda Allan  
 Villy Anchor  
 Mike Atkinson  
 Suthan Balasubramaniam  
 Réanne Belisle  
 Ernie Beltran  
 Kurt Bohme

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 Richard Chung  
 Joanne Clark  
 Patricia Clausen  
 Christy Conte  
 Jose Costa  
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 Mark Handy  
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 Shelly Hurry  
 Cassandra Ibrahim  
 Lotoya Jackson  
 Christine Joli-Coeur  
 Emad Karras  
 Ronald Kelusky  
 Mathew Kennedy  
 Chris Kirolous  
 Hillarie Klass  
 Breanne Knowles  
 Jill Kovacs  
 Blaine Larock  
 Alicia Li  
 Connie Limnidis  
 Kimberley Litchfield  
 Shibo Liu  
 Linda Lorenzetti  
 Christina Machowski  
 Hasan Makansi

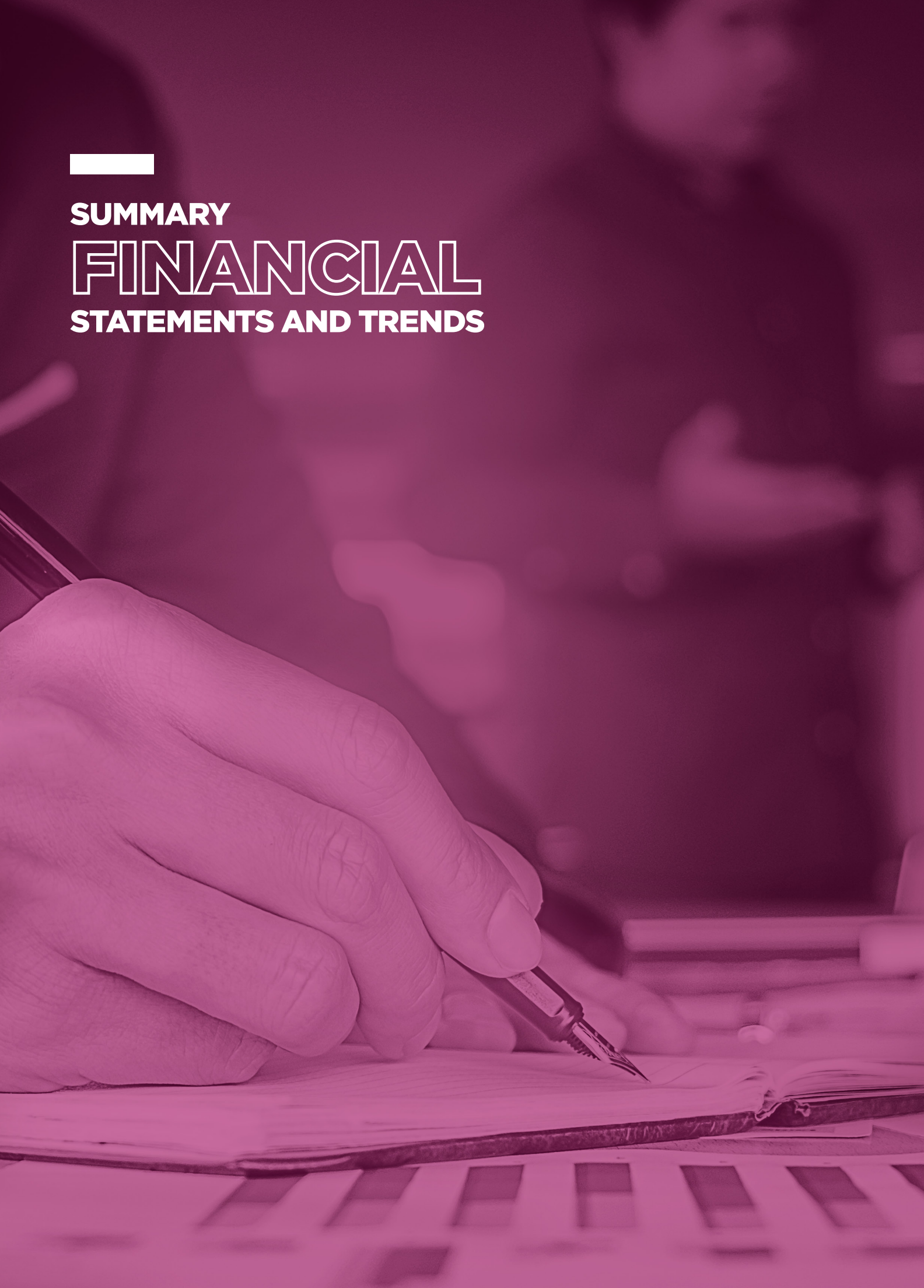
Hanna Mayer  
 Wayne Mc Isaac  
 Bruce McCullagh  
 Neil McDermott  
 Tim Metcalfe  
 Omar Mohamed  
 Olivia Monk-Saigal  
 Derek Morgan  
 Tanya Morose  
 Farhan Nasir  
 Jim Ogilvie  
 Robert Oliver  
 Jeff Pajot  
 Jenny Parsons  
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 Seema Sharma  
 Bill Sisler  
 Liz Sisolak  
 Kim Slade  
 Tegan Slot  
 Jayne Smith  
 Susan Sun  
 Monica Szabo  
 Kim Takata  
 Richard Tang  
 Henrietta Van hulle  
 Adrian Varao  
 Brett Webb  
 Sarah Webber  
 Allison Whyte  
 Marla Wolfe  
 Weiyu Yang  
 Frances Ziesmann



**SUMMARY**

# **FINANCIAL**

**STATEMENTS AND TRENDS**



## INDEPENDENT AUDITOR'S REPORT

### To the Members of Public Services Health & Safety Association

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2017 and the summary statement of operations for the year then ended, and the related note, are derived from the audited financial statements of Public Services Health & Safety Association for the year ended March 31, 2017. We expressed an unmodified audit opinion on those financial statements in our report dated July 6, 2017.

The summary financial statements do not contain all of the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of Public Services Health & Safety Association.

#### Management's responsibility for the summary financial statements

Management is responsible for the preparation of a summary of the audited financial statements on the basis described in the note.

#### Auditor's responsibility

Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, Engagements to Report on Summary Financial Statements.

#### Opinion

In our opinion, the summary financial statements derived from the audited financial statements of Public Services Health & Safety Association for the year ended March 31, 2017 are a fair summary of those financial statements, on the basis described in the note.

*PricewaterhouseCoopers LLP*

#### Chartered Professional Accountants, Licensed Public Accountants

PricewaterhouseCoopers LLP  
PwC Tower, 18 York Street, Suite 2600, Toronto, Ontario, Canada M5J 0B2  
T: +1 416 863 1133, F: +1 416 365 8215

**SUMMARY STATEMENT OF FINANCIAL POSITION****As at March 31, 2017**

	<b>2017 (\$)</b>	<b>2016 (\$)</b>
<b>Assets</b>		
<b>Current assets</b>		
Cash	633,912	267,223
Short-term investments	4,596,293	4,079,504
Accounts receivable	521,161	471,876
Inventory	11,407	46,741
Prepaid expenses	58,310	86,799
	5,821,083	4,952,143
<b>Investments</b>	205,065	204,303
<b>Capital assets</b>	112,007	123,412
	6,138,155	5,279,858
<b>Liabilities</b>		
<b>Current liabilities</b>		
Accounts payable and accrued liabilities	1,649,055	999,092
Customer deposits	176,794	40,784
Deferred revenue	1,030,340	703,236
	2,856,189	1,743,112
<b>Deferred lease inducement</b>	47,003	21,692
<b>Deferred capital contributions</b>	71,999	112,971
<b>Employee future benefits</b>	2,666,700	2,264,600
	5,641,891	4,142,375
<b>Net assets</b>		
<b>Restricted</b>	330,326	930,533
<b>Unrestricted</b>	165,938	206,950
	496,264	1,137,483
	6,138,155	5,279,858



**SUMMARY STATEMENT OF OPERATIONS****For the year ended March 31, 2017**

	<b>2017 (\$)</b>	<b>2016 (\$)</b>
<b>Revenue</b>		
Ministry of Labour funding	8,663,169	8,006,937
Training and publication recoveries	2,426,694	2,583,036
Special projects and other income	67,120	327,541
Amortization of deferred capital contributions	40,972	76,409
Investment income	48,727	39,197
	<b>11,246,682</b>	<b>11,033,120</b>
<b>Expenditures</b>		
Personnel costs	8,439,284	7,885,224
Program delivery	991,148	896,700
Occupancy costs	354,933	331,364
Advertising and promotion	237,827	279,877
Office and general	231,192	314,455
Consulting and professional fees	188,408	275,785
Travel and business meetings	193,121	193,578
Communications	139,949	130,558
Amortization of capital assets	56,405	83,611
Governance	36,879	34,225
Insurance	26,503	26,153
Subscriptions and publications	6,365	6,494
Finance charges and bad debts	3,358	12,896
	<b>10,905,372</b>	<b>10,470,920</b>
<b>Excess of revenue over expenditures from current operations</b>	<b>341,310</b>	<b>562,200</b>
<b>Project costs approved by Ministry of Labour</b>	<b>(625,207)</b>	<b>(442,998)</b>
<b>Excess (deficiency) of revenue over expenditures for the year</b>	<b>(283,897)</b>	<b>119,202</b>

**NOTE TO SUMMARY FINANCIAL STATEMENTS****March 31, 2017****Basis of presentation**

The summary financial statements have been derived from the audited financial statements of Public Services Health & Safety Association (the Association) as at and for the year ended March 31, 2017, based on the following criteria:

- i) The information in the summary financial statements is in agreement with the related information in the complete audited financial statements; and
- ii) The summary financial statements contain the information necessary to avoid distorting or obscuring matters disclosed in the related audited financial statements, including the notes thereto.

The summary financial statements of the Association are reported using the deferral method of accounting for contributions, in accordance with Canadian accounting standards for not-for-profit organizations. Under the deferral method, restricted funding from the Ministry of Labour and other government ministries is deferred and recognized as revenue when the related expenses are incurred. Training course and seminar recoveries are recognized as revenue when services are rendered and there is reasonable assurance of collection. Safety product recoveries relating to inventory are recognized as revenue when goods are shipped and there is reasonable assurance of collection. Unrestricted funding is recognized as revenue when received or receivable. Funding received for capital expenditures is deferred and recognized as revenue on the same basis as the amortization of the related assets. Interest income is recognized as revenue when earned.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Management does not consider a summary statement of changes in net assets, summary statement of cash flows or any additional note disclosures to be necessary for the intended users of these summary financial statements.

For a copy of Public Services Health & Safety Association's complete audited financial statements as at and for the year ended March 31, 2017, write to Suite 1800, 4950 Yonge Street, Toronto, Ontario, Canada.

## TRENDS

The following are sector and injury trends for PSHSA. Data was derived from WSIB and does not include clients that we service that are not covered by WSIB.

	# of PSHSA Firms
# PSHSA clients, Schedule 1	9,441
# PSHSA clients, Schedule 2	434
Schedule 1 Total Insurable earnings 2016	\$34,485,470,645
Schedule 1 FTE Workers 2016	710,988.90

Data source: WSIB PSHSA Schedule 1 & 2 Detailed HSA Entity Reports, June 2017 snapshot.

%PSHSA Schedule 2 firms by sector		
Sector	# of Schedule 2 firms	% of Schedule 2 client base
Education & Culture	143	32.72
Health and Community Services	43	10
Government, Municipal & Public Safety	248	57.14
Total	434	99.86

(Based on total firm count of 9,875) Data source: CRM June 2017 data snapshot.

Based on 435 sch 2 firms

### # OF WORKERS BY SECTOR - SCHEDULE 1

Schedule 1 FTEs by Rate Group and Sector	2016 FTEs
810 - SCHOOL BOARDS	19,650.5
817 - EDUCATIONAL FACILITIES	134,130.6
<b>Education Total</b>	<b>153,781.1</b>
590 - AMBULANCE SERVICES	2,069.1
845 - LOCAL GOVERNMENT SERVICES	40,630.4
<b>Municipal Total</b>	<b>42,699.5</b>
851 - HOMES FOR NURSING CARE	79,150.7
852 - HOMES FOR RESIDENTIAL CARE	15,380.4
853 - HOSPITALS	211,538.7
857 - NURSING SERVICES	57,341.5
858 - GROUP HOMES	19,686.4
861 - TREATMENT CLINICS AND SPECIALIZED SERVICES	84,821.9
875 - PROFESSIONAL OFFICES AND AGENCIES	46,588.7
<b>Health Care Total</b>	<b>514,508.3</b>
<b>Grand Total</b>	<b>710,988.9</b>

Data source: WSIB EIW firm Experience Schema, June 2017 snapshot.

### SCHEDULE 1 & 2 FIRMS BY SECTOR

Sector	# Firms
Education & Culture	1,409
Health and Community Services	7,541
Government, Municipal & Public Safety	925
<b>Total</b>	<b>9,875</b>

Data source: WSIB EIW Employer Coverage Schema and CRM (for sectors), June 2017 snapshot.

### EDUCATION & CULTURE

# of Sch 1 & 2 clients	1,409
% of small business (Sch 1 only) based on <50 FTEs:	81.76% *
% of Sch 1 Education firms:	89.85%
% of Sch 2 Education firms:	10.15%
# of rate groups:	2 plus Schedule 2

Data source: WSIB EIW Employer Coverage Schema and CRM (for sectors), June 2017 snapshot.

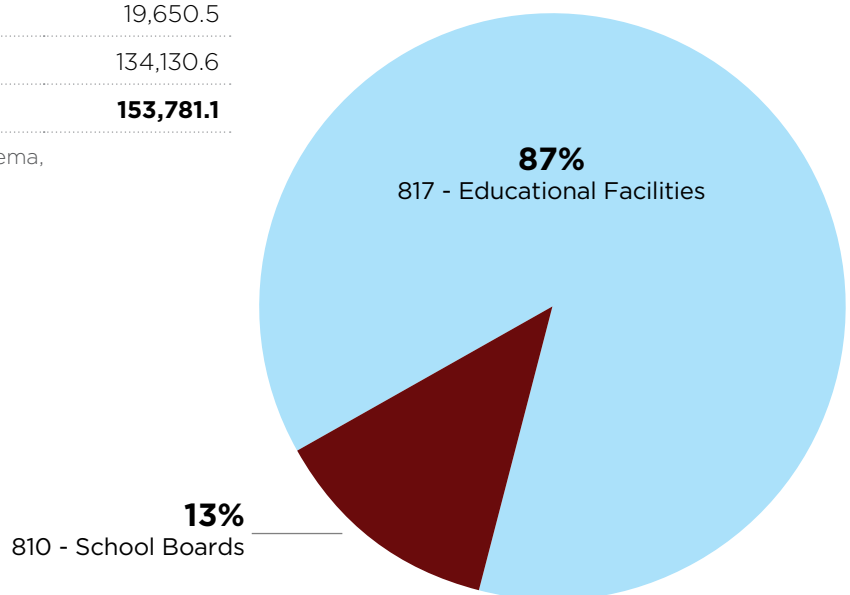
\*Note: % of small business (Sch 1 only) is an estimate. 48 of 1,266 firms could not be identified as either small or large businesses.

### EDUCATION & CULTURE SCHEDULE 1 DERIVED FTES BY RATE GROUP 2015

Schedule 1 FTEs by Rate Group and Sector	2016 FTEs
810 - School Boards	19,650.5
817 - Educational Facilities	134,130.6
<b>Education Total</b>	<b>153,781.1</b>

\*Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

Education and Culture 2016 FTEs



Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

### GOVERNMENT, MUNICIPAL & PUBLIC SAFETY

Sector	925
# of Sch 1 & 2 clients	65.84% *
% of small business (Sch 1 only) based on <50 FTEs:	74.34%
% of Sch 1 Municipal & Government Sector firms:	26.46%
% of Sch 2 Municipal & Government Sector firms:	2 plus Schedule 2

Data source: WSIB EIW Employer Coverage Schema and CRM (for sectors), June 2017 snapshot.

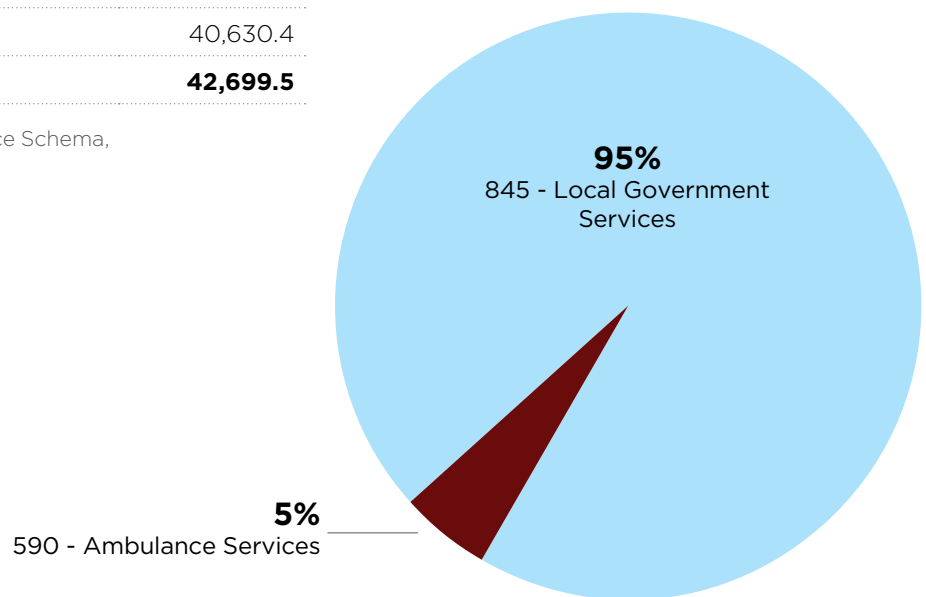
\*Note: % of small business (Sch 1 only) is an estimate. 13 of 688 firms could not be identified as either small or large businesses.

### GOVERNMENT, MUNICIPAL & PUBLIC SAFETY SCHEDULE 1 DERIVED FTES BY RATE GROUP 2016

Schedule 1 FTEs by Rate Group and Sector	2016 FTEs
590 - Ambulance Services	2,069.1
845 - Local Government Services	40,630.4
<b>Municipal Total</b>	<b>42,699.5</b>

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

Government, Municipal & Public Safety 2016 FTEs



### HEALTH AND COMMUNITY SERVICES

# of Sch 1 & 2 clients	7,541
% of small business (Sch 1 only) based on <50 FTEs:	84.51% *
% of Sch 1 Health Care firms:	99.42%
% of Sch 2 Health Care firms:	0.58%
# of rate groups:	7 plus Schedule 2

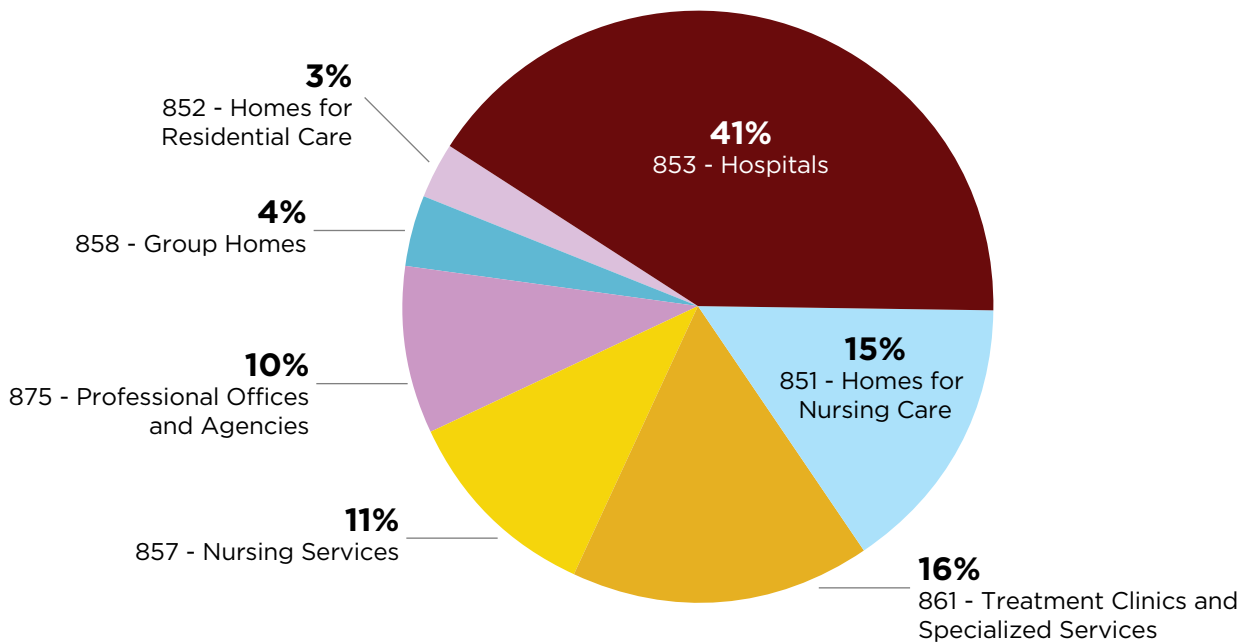
Data source: WSIB EIW Employer Coverage Schema and CRM (for the sectors), June 2017 snapshot.

\*Note: % of small business (Sch 1 only) is an estimate. 6 of 695 firms could not be identified as either small or large businesses.

**HEALTH CARE SCHEDULE 1 DERIVED FTES BY RATE GROUP 2016**

Schedule 1 FTEs by Rate Group and Sector	2016 FTEs
853 - Hospitals	211,538.7
851 - Homes for Nursing Care	79,150.7
861 - Treatment Clinics and Specialized Services	84,821.9
857 - Nursing Services	57,341.5
875 - Professional Offices and Agencies	46,588.7
858 - Group Homes	19,686.4
852 - Homes for Residential Care	15,380.4
<b>Health Care Total</b>	<b>514,508.3</b>

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.



**TOP 3 LTI CATEGORIES BY SECTOR 2016 (SCHEDULE 1)**

<b>Education &amp; Culture</b>	
Falls	186
MSD Other	166
Contact with/Struck by	137
<b>Health &amp; Community Services</b>	
MSDs	2,690
Falls	1,205
Exposures	1,036
<b>Government, Municipal &amp; Public Safety</b>	
MSDs	257
Falls	139
Contact with/Struck by	121

Data source: WSIB EIW Claim Cost Analysis Schema, June 2017 snapshot. Fatalites are excluded.

**SCHEDULE 1 LTI FREQUENCY RATES BY SECTOR 2016**

<b>Sector</b>	<b>2015 LTI Frequency Rate</b>
Education & Culture	0.38
Health & Community Services	1.35
Government, Municipal & Public Safety	1.5

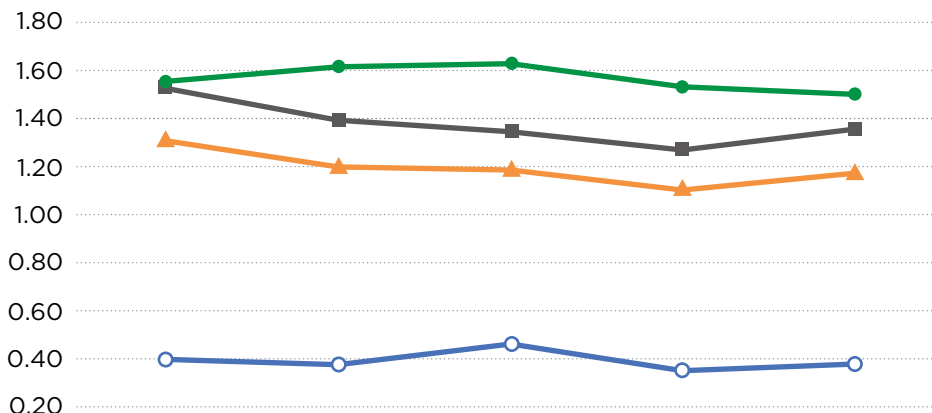
Data source: WSIB EIW Firm Experience Schema June 2017 snapshot.

**PSHSA SCHEDULE 1 COUNT AND FREQUENCY RATE COMPARISON 2015–2016**

	<b>2015 Injury Count</b>	<b>2016 Injury Count</b>	<b>2015 LTI Rate</b>	<b>2016 LTI Rate</b>	<b>% LTI Rate of change from 2015 to 2016</b>
Schedule 1 Allowed LTIs	7,755	8,290	1.10	1.17	6.90%
Schedule 1 Allowed Total Injuries	24,720	25,264	3.51	3.56	2.20%

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

**PSHSA SCHEDULE 1 NON-FATAL LTI RATES 2012-2016**



	2012	2013	2014	2015	2016
PSHSA Total	1.31	1.20	1.19	1.10	1.17
Health Care	1.54	1.39	1.34	1.27	1.35
Municipal & Government Services	1.55	1.61	1.62	1.53	1.50
Education	0.40	0.38	0.46	0.35	0.38

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

**SCHEDULE 2 FIRM COUNTS BY HSA ENTITY 2016**

HSA Entity	Count of firms	% of Total Schedule 2 Firms
PSHSA	434	97.10%
WSPS	6	1.34%
IHSA	6	1.34%
WSN	1	0.22%
<b>Total</b>	<b>447</b>	<b>100.00%</b>

Data source: WSIB Detailed HSA Entity Reports, June 2017 snapshot.

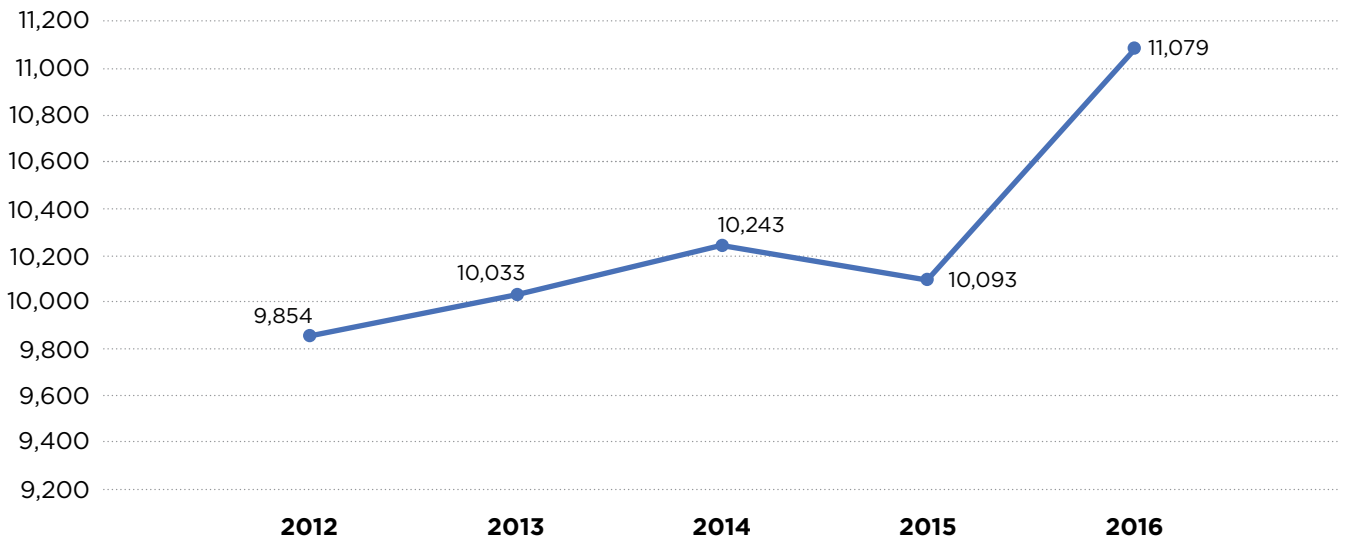
**SCHEDULE 2 INJURY COUNTS 2015-2016**

	2015 Injury Count	2016 Injury Count	% of change from 2015 to 2016
Schedule 2 Allowed Total LTIs	10,093	11,079	9.77%
Schedule 2 Allowed Total Injuries	21,778	22,849	4.91%

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot. (above figures include fatalities)



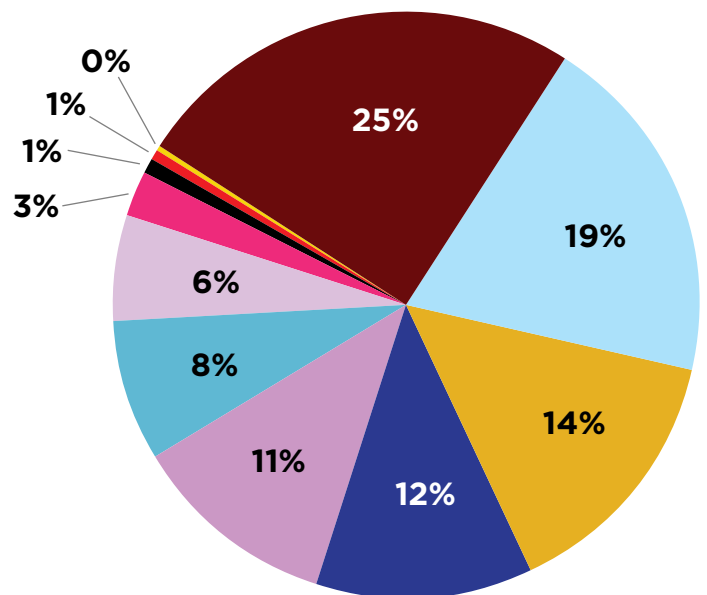
**PSHSA SCHEDULE 2 NON-FATAL LTI COUNTS 2012-2016**



Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

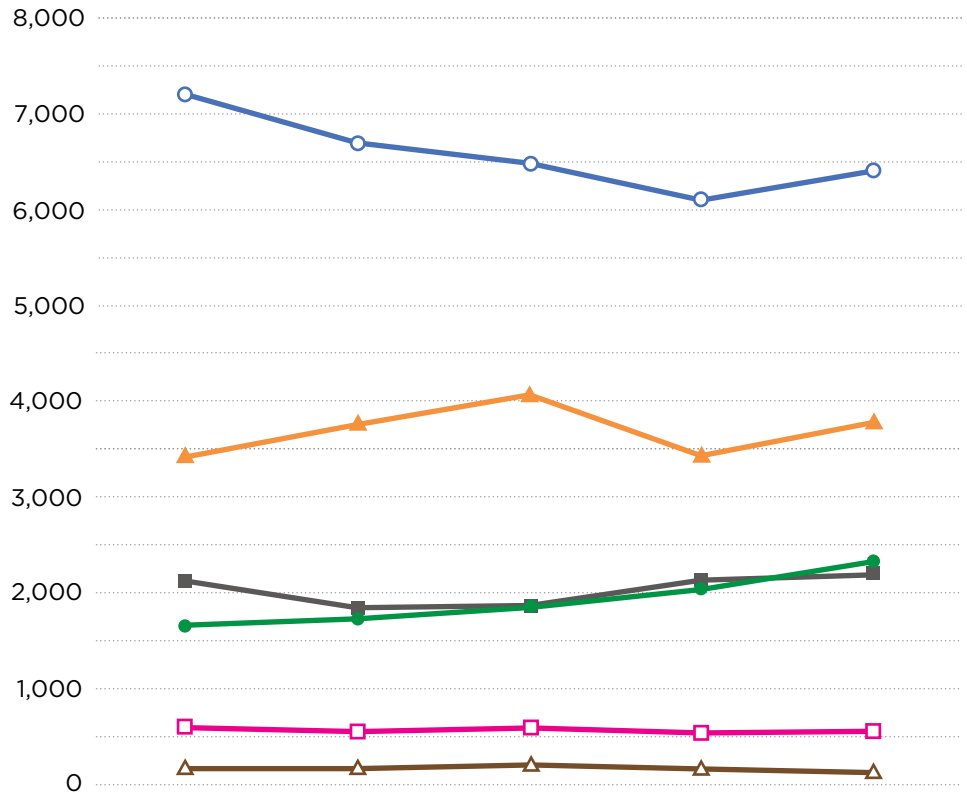
**SCHEDULE 1 AND 2 NON-FATAL LTI COUNTS BY INJURY TYPE IN 2015 FOR ALL PSHSA SECTORS**

PSHSA Injury Type	LTI	%
MSD Other	4,876	25%
Falls	3,777	19%
Contact with/Struck by	2,766	14%
Workplace Violence	2,336	12%
Exposures	2,183	11%
MSD Client Handling	1,515	8%
Not Classified	1,115	6%
MVI	531	3%
Machinery	132	1%
Transportation	117	1%
Fires and Explosions	21	0%
<b>Total</b>	<b>19,369</b>	<b>100%</b>



Data source: WSIB EIW Claim Cost Analysis Schema, June 2017 snapshot.

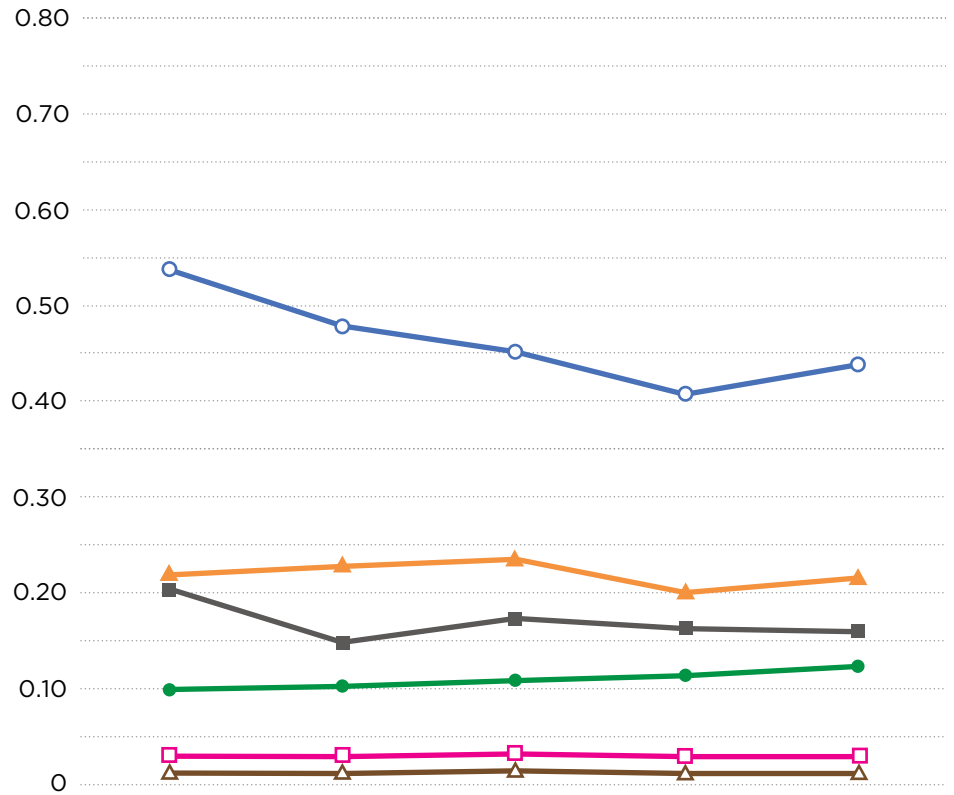
**PSHSA (ALL SECTORS) SCHEDULE 1 & 2  
EMPLOYER'S PRIORITY HAZARD LTI COUNTS 2012-2016**



	2012	2013	2014	2015	2016
MSD Other	7,213	6,703	6,462	6,097	6,391
Falls	3,427	3,788	4,059	3,439	3,778
Exposures	2,121	1,832	1,878	2,118	2,189
Workplace Violence	1,652	1,731	1,852	2,020	2,337
MVI	582	547	585	525	531
Machinery	167	153	195	161	132

Data source: WSIB EIW Firm Experience Schema, June 2017 snapshot.

**PSHSA (ALL SECTORS) SCHEDULE 1  
EMPLOYER'S PRIORITY HAZARD LTI FREQUENCY RATES 2012-2016**



	2012	2013	2014	2015	2016
MSD Other	0.54	0.48	0.45	0.41	0.44
Falls	0.22	0.23	0.24	0.20	0.22
Exposures	0.20	0.15	0.17	0.17	0.16
Workplace Violence	0.10	0.10	0.11	0.11	0.12
MVI	0.03	0.03	0.03	0.02	0.02
Machinery	0.01	0.01	0.02	0.01	0.01

Data source: WSIB EIW Claim Cost Analysis and Firm Experience Schema, June 2017 snapshot.



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**Ronald L. Kelusky**  
*President and CEO*  
rkelusky@pshsa.ca



**Glenn Cullen**  
*Vice President, Corporate Programs and Product Development*  
gcullen@pshsa.ca



**Henrietta Van hulle**  
*Executive Director, Health and Community Services*  
hvanhulle@pshsa.ca



**Monica Szabo**  
*Executive Director, Government, Municipal and Public Safety*  
mszabo@pshsa.ca



**Kim Litchfield**  
*Executive Director, Education, Culture and Training Delivery*  
klitchfield@pshsa.ca



**Kim Slade**  
*Director, Research and Product Development*  
kslade@pshsa.ca



**Joanne Clark**  
*Director, Marketing Communications and Public Relations*  
jclark@pshsa.ca



**Mathew Kennedy**  
*Director, Digital Learning Solutions*  
mkennedy@pshsa.ca



**Susan Sun**  
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ssun@pshsa.ca

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1.877.250.7444