# CONNECTED

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# Letter from the CEO and Board Chair



Glenn Cullen

Glenn Cullen
CEO and COO
Public Services Health &
Safety Association



Ravil Veli

Ravil Veli Board Chair Public Services Health & Safety Association

It is our pleasure to invite you to take some time to read our annual report which we hope will bring you closer to the accomplishments and future direction of our organization.

The past few years have marked a turning point in the connection between the workplace and the employee. We have witnessed a shift in the way organizations perceive and prioritize the wellbeing of their workforce. In this evolving landscape, workplaces are no longer just physical spaces where tasks are performed; they have become environments that directly impact the physical, mental and emotional health of employees. This paradigm shift is not limited to the workplace; it extends to how employees themselves perceive their roles. They now seek workplaces that align with their values, promote personal growth, and foster a sense of belonging. To stay on the leading edge, we made psychological health and wellbeing our priority and set out to explore how the concepts of connection, interaction and wellbeing could help navigate this new landscape.

Connection. This is PSHSA's annual report theme this year and for good reason. Consider the various threads of connection that are woven into our daily lives. We are connected to people, places and things. People at home, people at work, people in our communities, people with common interests and goals; one on one, small, medium and large size groups. Places that connect us; home, work, community locations. Things that connect us; technology, planes, trains and automobiles. These existing connections all play a significant role in bridging the gaps between us, leading us to question whether increasing the number of ways to connect truly enhances our lives, or create complexities that we hadn't anticipated.

**Interaction.** Without interaction there is no connection. Interaction forms the bedrock of connection, the bridge that unites us. For an organization like PSHSA, it is crucial to

reflect on the impact of each positive connection cultivated with clients and stakeholders. Reflecting is not a mere exercise; it's a strategic requirement. These connections, nurtured and strengthened, hold the potential to increase health, safety and wellbeing in our workplaces.

Wellbeing. Is wellbeing, whether physical, and mental, or both, the outcome of interactions that create connection? At PSHSA we are committed to continuing this journey with our clients, exploring the intricate link between worker wellbeing and the overall health of their organizations. We invite you to engage with us to better understand the vital connection between employees and their organizations, where wellbeing becomes a mutually beneficial outcome.

Just as intricate webs of connections bind us to people, places, and ideas, we recognize that our interactions are intricately linked to the strength of our connections and our collective achievements. As we enter the final year of our current strategy - *Elevate* - it becomes essential to not only embrace this interconnectedness but also proactively nurture it to ensure our continued success. The health and safety of Ontario's public service workplaces deserve nothing less.

As always, Ravil and I would like to thank all our stakeholders — our staff, board members, clients, funder, voting members, advisory council members and partners — for your continued support and guidance in advancing occupational health and safety in the public sector.





# A Holistic Approach to Health and Safety

# Connected: Physical and Psychological Health and Safety

Traditionally, occupational health and safety focused on identifying and preventing the physical hazards of a workplace such as slips, falls, illnesses and disease. Psychological concerns were not always part of the focus. However, over time, research has shown the undeniable impact of psychological hazards and illness. Data indicates that physical and psychological health are inextricably connected: improved psychological health improves physical wellbeing; just as improved physical health improves psychological wellbeing.

To remain on the leading edge of workplace health and safety, PSHSA is constantly evolving to adapt to the needs of employees and workplaces. With more employees vulnerable to burnout, compassion fatigue, as well as chronic and traumatic stress, we continue to expand the number of solutions available to support psychological health and safety in the workplace. We believe we have never been better prepared to understand the connection and deliver more.

By embracing this mind-body connection and making psychological health and safety a priority, we are broadening the potential reach of occupational health and safety. With more workplaces, big and small, our organization now has the opportunity to develop and implement a holistic health and safety program suited to their unique needs.

We continue to expand the number of solutions available to support psychological health and safety in the workplace.





## The stronger the mind-body connection is, the more resilient everyone will be.

# Connected: Employee and Workplace Wellbeing

Workplace wellbeing accounts for all aspects of an employee's working life: from the health and safety of the physical environment to the psychological and social health of the workplace. Employee and workplace wellbeing is the product of job satisfaction, workplace climate, work-life balance, accessible health and support programs, a sense of belonging as well as personal and professional development opportunities, among other variables.

By bringing a wellbeing approach to workplace health and safety, organizations benefit on many fronts. Organizational effectiveness is just the beginning. We also cultivate more resilient employees and workplaces, empowering them to better manage uncertainty. The stronger the mind-body connection is, the more resilient everyone will be.

Of course, workplace wellbeing isn't just a destination, it's also a journey. One that requires continuous improvement and refinement in tune with the needs of stakeholders, workplaces and circumstances. By continuing to deepen our understanding of the psychological factors that influence employee and workplace health, safety and wellbeing, we will be ready to adapt to opportunities as they emerge.

# Connected: Employee Wellbeing and Stakeholder Success

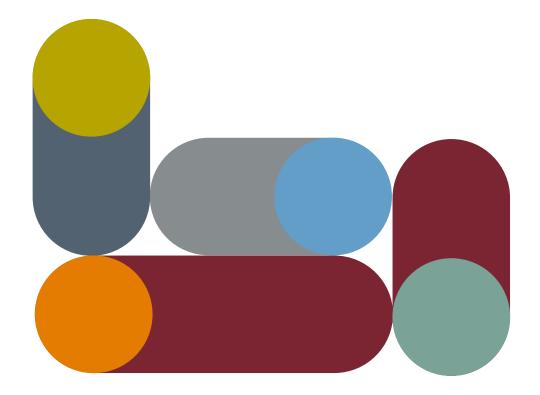
The advantages of integrating wellbeing into workplace health and safety are well understood. PSHSA clients report benefits such as increased employee engagement, commitment and motivation; reduced absenteeism and turnover; as well as fewer staff conflicts and greater organizational success. Wellbeing is a mutually beneficial investment in the future of workplace health and safety. It is also an investment that no one can afford to ignore.

So, while workplace wellbeing needs and benefits may vary from organization to organization, the wisdom of a connected mind-body approach to health and safety is common to all.



# **Sector Stakeholders** and Partners

At PSHSA, we serve almost 10,000 organizations and 1.6 million employees across Ontario. Our regional teams bring together different interests with sector-specific expertise and experience to create healthier, safer workplaces. Below are three case studies that represent just a few of the workplace challenges we have successfully navigated this year. In each case, we advanced the health and safety of Ontario public service workplaces and employees with a collaborative spirit, diverse expertise and a customized solution.



With connection comes resilience and with resilience comes the strength to adapt and rise above adversity.



# **Healthcare Partners**

#### Supporting and Contributing to Workplace Mental Health in Long Term Care

The Ontario Centre for
Learning, Research and
Innovation in Long-Term Care
(CLRI) at the Schlegel-UW
Research Institute for Aging
(RIA) was first created in
2011. Since then, it has been
dedicated to enhancing the
quality of life and care that
the province's over 600
long-term care (LTC) homes
offer their residents by
educating and training current
and future LTC employees.
The CLRI also provides

complex care requirements or staff recruiting and retention challenges.

Due to the nature of their work, LTC leaders and team members are frequently exposed to workplace situations that may cause psychological harm. Research shows teams in LTC felt burned out, overwhelmed and unrecognized, which was amplified by the stressors of the last 3 years.

Two years ago, the CLRI connected with PSHSA, collaborating on programs and services that would help address workplace stressors that were a growing concern at that time.



#### **Situation**

Workplace mental health in the Long-Term Care sector is a priority. To succeed, that meant creating and supporting organizational cultures that promote and protect the mental health of all employees and leaders.

#### **Solution**

The Workplace Mental Health in LTC project set out to promote happier, healthier, more resilient LTC work environments. Our solution and contributions as part of the project team were multi-faceted. The following represent this year's highlights:

- Check-in sessions that provided participants group coaching, identified additional training needs, facilitated sharing, and gathered feedback on current program activities
- Provided resilience training sessions for facility leaders so they can better understand how to increase organizational capacity within prevention plans
- Facilitated Joint Health and Safety Committee training workshops that are customized for the LTC sector
- Developed cognitive demand general descriptions for four key LTC positions (Director of Care, Personal Support Worker, Dietary Aid and Recreation Aid)
- Collaborated in the development and facilitation of a mental health in LTC Community of Practice

#### Results

The training programs delivered by PSHSA showed positive knowledge translation. In fact, over 90% of participants agreed that what they learned in the course would help them better perform their role. This coming year, we look forward to working with this sector partner again, co-facilitating a collaborative workshop with LTC system leadership, researchers, employers and workers. Together, we will identify workplace hazards that lead to psychological harm in LTC, explore the root causes, and brainstorm a list of controls and solutions that will mitigate risks to further support mental health in LTC.

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## Municipal, Education and Culture Partners

# Making Toronto libraries safer places to work

The Toronto Public Library (TPL) has operated the library system in Toronto since 1884. It is the largest public library system in Canada and the busiest urban public library system in the world. City-wide, library services are provided through a network of 100 branches, including 81 neighbourhood libraries, 17 district libraries and two research and reference libraries. Online resources,

bookmobile and home services further extend public access to the Toronto Public Library's collections and services.

The Toronto Public Library employees preserve and promote universal access to a broad range of human knowledge, expertise, information and ideas in a welcoming and supportive environment. To foster this, an environment that is safe and free from all forms of violence is paramount.



PSHSA helped conduct complex workplace violence risk assessments throughout our library system. Their expert knowledge and experience helped us identify and control risks, improving the health and safety climate of the branches."

#### **Nic Manson**

Manager Health, Safety and Wellness Toronto Public Library



#### **Situation**

Over the previous several years, library branches across the city had been experiencing a growing number of violent events, making the workplace more dangerous for employees. The TPL sought the expertise of PSHSA to help assess and develop workplace strategies that would eliminate and prevent violence and harassment. Providing answers that would protect staff yet maintain public access to library services would pose a unique challenge. Given the complexity and range of issues, PSHSA's unique ability to bring a diverse range of stakeholders and consultants together would be vital to any effective plan.

#### Solution

Working closely with the TPL and stakeholders, PSHSA consultants were brought into the 11 branches that had experienced the highest increases in violent events. Here, they assessed the specific psychological and physical risks and hazards posed then developed a systematic plan to eliminate or control them. Recommendations addressed sources of violence that included: Client-to-Client, Client-to-Employee, External Perpetrator and Domestic Violence. Specific solutions included standardized emergency protocols, increased security patrols, improved lighting outside buildings and repositioning convex mirrors for improved visibility inside, among others.

#### **Results**

The outcome included a range of recommendations that were designed to protect employees and ensure a safe workplace. Priority recommendations are already being implemented with the collaboration of stakeholders ranging from senior management to unions to Joint Health and Safety committee members. Initial results are encouraging and will continue to reveal themselves as more recommendations are put into action. Thanks to the very positive results of our partnership with the TPL, we look forward to a continuing relationship that provides employees with a safer and healthier workplace.

## Public Safety Partners

#### Partnering with the Toronto Police Service to Reintegrate Workers After Injury or Absence

The Toronto Police Service (TPS) is the largest municipal Police Service in Canada and the third largest Service in Canada after the Ontario Provincial Police and the RCMP. The Service employs over 7,500 employees, with approximately 5,000 sworn members, representing multiple specialized units. These include Priority Response, Mounted, Dog Services, Marine Unit, and Emergency Task Force, among others.

A collaborative partnership with PSHSA began two years ago as the TPS was seeking help identifying and describing the physical, psychological and environmental job demands for roles across the service. These job demands descriptions are a key component in stay-at-work and return-to-work programs that support employee re-integration after an injury, illness or extended absence. It was this successful partnership that provided the foundation for our ongoing collaboration.



#### **Situation**

Starting in 2022, the TPS partnered with PSHSA to work towards developing a seamless reintegration program for members to help support their overall wellbeing as they returned to the workplace after an absence or workplace incident.

# Progress Toward a Solution

After year one of development, the comprehensive reintegration program is beginning to take shape and is anticipated to launch in 2024. The holistic and collaborative partnership between the TPS and PSHSA has provided opportunities to ask more questions and make more connections. Together, we worked to understand current state in the Service, identify stakeholder needs, and explore leading practices for stay-at-work and return-to-work across sectors in the public service. Building on foundational work identifying physical, cognitive and psychological job demands for civilian and sworn members, meaningful connections were made with workers, frontline supervisors and the Service's Wellness team to identify work tasks that can be modified during reintegration or stay-at-work.

A thorough review of these data has revealed some key outcome-focused solutions:

- Improved program consistency with defined processes
- Improved trust in communication
- Improved education in roles and responsibilities
- Improved tools and resources
- Reduced stigma toward reintegration

As we continue to work together, these criteria will inform service-specific reintegration programming.

#### **Results So Far**

To date, job demands descriptions have been completed for over 25 positions across the TPS. Available modified work tasks have been identified for several roles and job positions across the Service as we prepare for next year's program launch. This innovative work is being shared with Police Services provincially and nationally, promoting best practices for worker wellbeing after injury, illness or long absence across the public safety sector.

Numbers and Workplace Health and Safety

The easier we make it for stakeholders to access the resources and tools they need, the healthier and safer Ontario's public service workplaces will be. This year, we continued to invest in technology that provides stakeholders with the content they want, delivered the way they want, when they want it.

**52** 

New OHS Materials Developed

> 9620 ique Workplaces Consult

433,330

Products and Information Materials Distributed

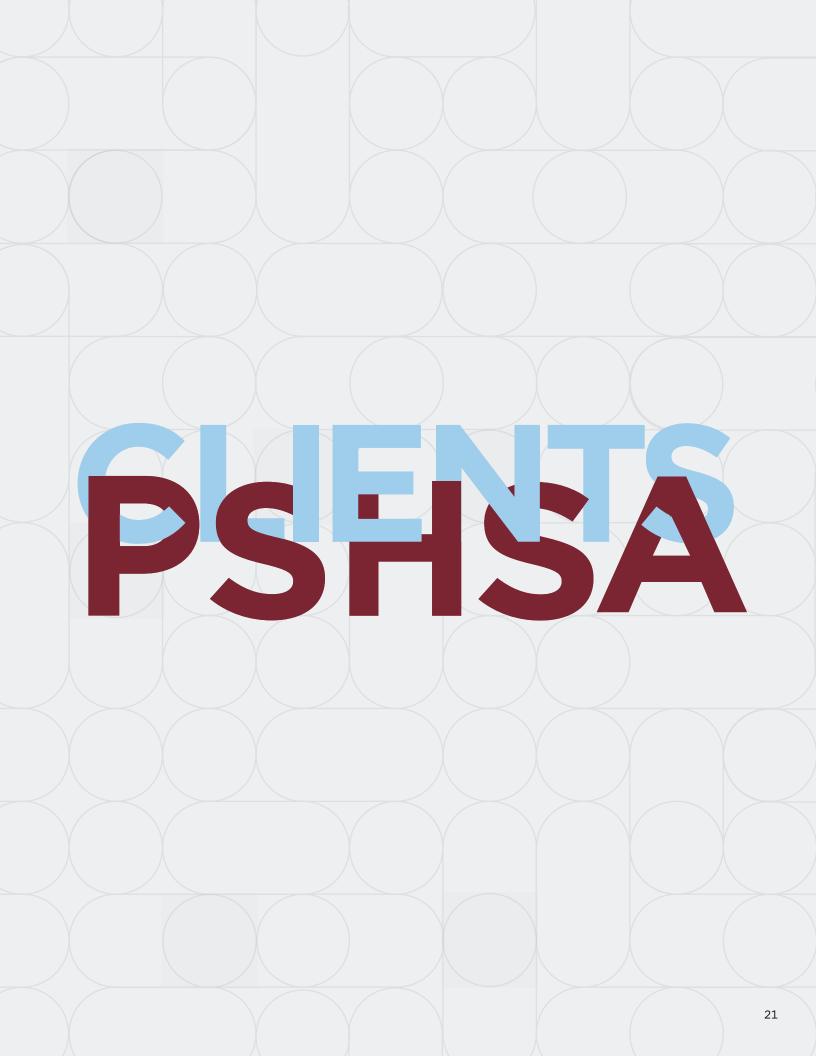
181

New Collaborative Partnerships

Total Participant Hours of Training

Client Consultations





## **Ornge**

On the ground and in the air: Ornge paramedics, pilots and aircraft maintenance engineers now have more tools to prevent workplace injuries.

Ornge is a vital part of Ontario's health care system, providing not-forprofit air ambulance and ground transportation for people who are critically ill or injured. In the air or on the ground, Ornge serves over 13-million people and a vast territory, covering over one-million square kilometres. With Canada's largest air ambulance and critical-care land ambulance fleet, Ontarians count on Ornge for almost 20,000 patientrelated transports every year.



The PSHSA Ornge Project was an interesting challenge. There were many moving pieces which meant the team had to be flexible and ready to pivot to meet the client's evolving needs. In the end, each team member lived up to the project's high expectations and executed their parts flawlessly."

#### **Tegan Slot**

Manager Workplace Wellbeing PSHSA



#### **Situation**

Ornge employs approximately 400 aircraft maintenance engineers, pilots, and paramedics who face the risk of a musculoskeletal disorder (MSD) every day. MSDs are work-related injuries most commonly caused by sudden, frequent or repetitive motions and are a common risk for individuals in physically demanding occupations. To minimize the risk of future MSD injury and promote worker wellbeing, Ornge sought PSHSA to help develop a series of MSD prevetnion modules.

#### **Solution**

Having collaborated with Ornge on an injury analysis and prevention project in the past, PSHSA made an excellent partner for this, the next phase. We proposed creating a multimedia, video-intensive e-learning program to support Ornge's MSD prevention program.

Our team travelled to the Ornge facility in Thunder Bay which was the only facility that could accommodate the variety of aircraft the video shoot required. Our actor talent pool was composed of Ornge staff since they possessed the technical operating knowledge to deliver accurate performances. The logistics of the shoot required a collaborative and adaptable mindset. We had to instantly pivot priorities whenever one of the Ornge aircraft was called upon to perform a critical patient transport

As we continue to work together, these criteria will inform Service-specific reintegration programming.

#### Results

Over 30 well-executed ergonomic demonstration videos using real Ornge aircraft and equipment were shot over two days. They were embedded in AODA-compliant e-learning modules that demonstrated ergonomic best practices to all Ornge staff in a compelling, memorable way. The success of this collaborative and demanding work experience has created a strong connection between Ornge and PSHSA, sector partners that share many interests across the public safety sector.

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## Occupational Stress Injury Resiliency

Working together to help employers understand and address vulnerabilities to occupational stress injuries

The Occupational Stress Injury Resiliency (OSIR) tool was the result of a collaborative effort between the Conference Board of Canada and PSHSA. By measuring the many factors that can contribute to occupational stress injury (OSI) vulnerability, such as moral conflict, physical fatigue and chronic work-related stress, this tool provides employers with evidence-based results that help them assess and address OSI risk in their workplace. Organizations will help target prevention and resiliency efforts where they are needed most, elevating employee and workplace wellbeing.



The OSIR team was incredibly supportive in helping guide us through this work. They provided clear communication and timelines and readily adapted to meet templates and materials. They were also agile, pivoting with us as our timelines shifted due to competing priorities and our pandemic response. The OSIR team was focused on our success as much as we were!"

#### **Erin Firmani**

Staff Support Specialist

#### **Nancy Lawrence**

Manager Workforce Wellness

London Health Sciences Centre

#### **Situation**

Starting in late 2022, PSHSA engaged interested organizations and stakeholders from a range of different sectors to test the generalizability and real-world application of the OSIR tool. This work continued in 2023. By gaining insight into the unique factors that influenced the OSIR tool's effectiveness in different organizations, PSHSA can offer tailored approaches wherever necessary to ensure a successful launch across sectors and markets.

#### Solution

We adapted the implementation strategy of the OSIR tool to meet the unique needs presented by different sectors and settings. Close collaboration with clients was integral to understanding the nuances of their organizational processes and needs. To ensure meaningful data, custom-designed templates, survey materials and timelines were the norm. Custom-built analytic and reporting functions for the survey platform were developed by the PSHSA IT team.

#### **Results**

Iterative OSIR pilot testing successfully demonstrated the tool's practical application and efficacy across a wide range of sectors and settings. Customized plans that accommodate unique client needs ensure that the OSIR tool will deliver meaningful, actionable findings at an organizational level. Essential to this success was PSHSA's collaborative, client-centred approach. Safer, healthier employees and workplaces are the result.



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## e-Learning Clients

# Bringing lasting knowledge to learners with the latest technology

## Technology smart enough to teach

At PSHSA, connecting clients with the knowledge and skills they need to become healthier and safer is our calling. Knowing what to teach is only a part of the challenge. Knowing how to create engaging, continuous, streamlined content that can be delivered in a way that is retained and that can be tested and tracked is equally vital. To stay on the leading edge of health and safety learning, we are constantly seeking technology that will better ensure workers have the training they need, whenever they need it.

## Technology that tracks and adapts

This year, we introduced a new learning management platform for testing that accommodates all of these requirements.

#### It allows PSHSA to:

- Ensure that the training has the intended impact
- Confirm the impact training has had on target behaviours over time
- Connect learning to key performance indicators

#### It offers PSHSA clients:

- Microlearning content that delivers bite-sized, focused, on-demand, flexible and engaging learning experiences
- Question-based reinforcement content that supports the learner's knowledge levels after training has ended
- The opportunity to boost learning by helping workers retain knowledge so it can have a lasting, measurable impact on job performance and, ultimately, organization performance



# Technology that teaches the way the brain likes to learn

Learning isn't so much an event as it is a continuous process. Research has shown employees are more likely to forget what they've learned if it isn't reinforced. This learning management platform is designed to help employees remember more of what they learn by applying daily reinforcement. Here are some of the strategies:

- Chunking: Matching the capacity of short-term memory, this technique delivers curriculum information in short bursts or bites that include four to five pieces of knowledge.

  These 'chunks' occur within a period between 60 seconds and 60 minutes
- Question-Based
   Reinforcement: Retrieving
   information from memory
   produces a more permanent
   trace. Even if that's only twice
- The Spacing Effect:
  Information is better
  retained over the long
  term when it's presented
  repeatedly with specific
  time gaps between
  each repetition
- Gamification: By employing tactics such as leaderboards, prizes, incentives, team activities and social elements that make learning fun, we also make it more engaging

### Coming soon: The future of e-learning

To test this learning management platform in the real world, PSHSA is partnering with existing stakeholders that are equally intrigued by the possibilities of this innovative technology. Going forward, we will continue to refine this tool with the learning gained during the trial. We will also innovate new designs that are tailored to meet each sector's needs. The learning truly never ends. The strength of our client connection depends on it.



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# CXT and Clients

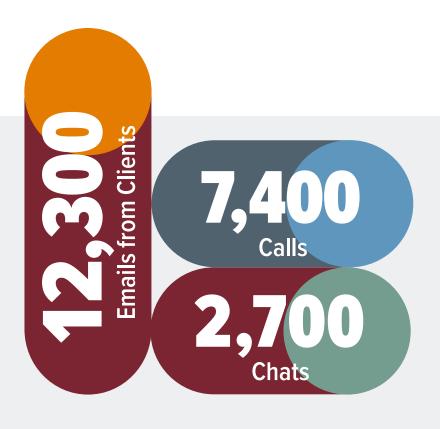
# Adapting to meet client experience need

One of the main reasons PSHSA continues to lead in workplace health and safety practice is because of the exceptional quality of our client experience. Thanks in part to a Client Experience Team (CXT), we meet and exceed client expectations as a matter of routine. The secret to our success is an unwavering client-centric focus.

# No two connections are exactly alike

Our CXT team treats each and every customer touchpoint as an opportunity to earn trust and build a stronger connection. By employing a multi-channel approach, we make it easy for clients to interact with us in the way that is most convenient for them. Last year, that meant our CXT engaged in thousands of calls, emails and chats, making it their mission to answer and resolve each concern promptly.

Personalization is the bedrock of our approach. Whether we are addressing a complex inquiry or a minor concern, our CXT meets the client where they are at. There are no one-size-fits-all



This year, our CXT team once again managed an impressive number of client connections. Their ability to navigate diverse communication channels while maintaining an exceptional standard of service is a testament to their enviable client-first reputation.

answers. We listen with an empathetic ear. We ask questions and avoid assumptions. Not surprisingly, tracking numbers continue to show that our clients feel valued and understood.

## One connection leads to another

To build durable long-term client relationships, we look beyond individual transactions. The quality and continuity of our service is what makes the difference. That's why we assign a dedicated team to the issue at hand. The team takes ownership of the problem, standing by the client until it is fully resolved. And, should their needs change, the team will be ready and waiting to adapt with them.

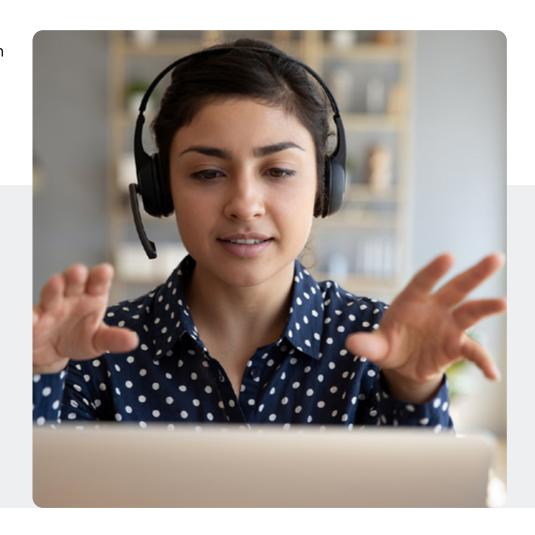
## **Turning connections** into advocates

We never lose sight of the fact that the success of the workplace health, safety and wellbeing programs that we implement depends on seamless client experiences. That's why we listen closely to our clients and invest in the technology that makes it easier for them to connect to the resources they need. After all, nurturingloyal clients is the key to developing the advocates who attract new clients.

"Our CXT team leads the industry by consistently prioritizing rapid, successful resolutions for our clients. Their tireless dedication to answering queries and addressing concerns is industry-leading. No matter what challenges arise, this team adapts and prevails every time."

#### **Rebekah Warner**

Senior Director Client & Employee Experience PSHSA



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# An Organization and Its People

## **Becoming a Remote-First Organization**

Since the pandemic first necessitated wide-spread remote working, the benefits to organizations and employees continue to be embraced by workplaces. PSHSA was no exception.

#### The experiment begins

Beginning in 2020, it became necessary for our teams to conduct business and support clients remotely. The shift fundamentally changed how we communicated and delivered our services to clients – even when many of the sectors that we supported were required to show up in person at their workplaces.

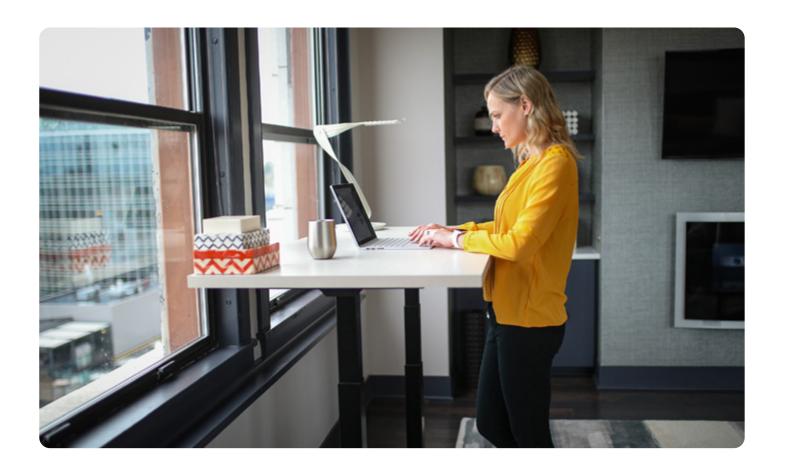
We adapted by introducing live instructor-led distance learning as well as by increasing our e-learning options. We became skilled at developing critical new training modules in record time. At the same time, we continued developing a deeper understanding of how we could better serve each client's needs from a remote-work perspective.

#### Stay remote or return to the office?

When the time came that we could return to the workplace, we paused. We considered the future of our organization and its clients. We consulted leaders in other industries. We studied various return-to-work strategies. We conducted an extensive employee survey. We explored the wellbeing benefits. And we couldn't argue with the evidence. PSHSA officially became a remote-first organization in October 2022.

#### Maintaining a strong workplace connection

Supported by all the resources and technology necessary for an effective office, team members thrived working at home. The shift presented significant benefits: employees could better manage their work-life balance; employees gained more local autonomy in how they functioned; and, with less commuting, they saved time and money while also creating environmental benefits.



# There's more to remote-first than working away from the office

Of course, there is a lot more to establishing a successful remote-first workplace than employees working from home. To maintain a strong internal working connection, we invested in leadership training that provided insight into best practices for managing remote teams. We changed the way we on-boarded new employees to include more access to senior management. We involved new hires in projects that crossed teams and organizational structure to nurture a wider sense of connection. And, as and safety association, we made sure new hires had access to ergonomic assessments to ensure their home offices met PSHSA standards.

#### The best of both workplaces

When it comes to building trust within teams, there is simply no substitute for being together in-person. To make gathering easier PSHSA downsized the head office and invested in renovations designed to create a range of inviting workspaces suitable for individuals, small groups or large teams. Team members were encouraged to use the spaces as often as they wanted. To further cultivate trust, we committed to bringing all team members together in person twice a year in addition to scheduling regular team meetings. Complementing the advantages of a remotefirst workplace with the benefits of in-person engagements keeps workplace wellbeing at the centre of our health and safety focus.

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# An Organization and Its People

# Building an Equity, Diversity and Inclusion Strategy

#### Many cultures — One team

Psychological healthy and safety and a sense of belonging are essential to any measure of workplace wellbeing. This year, PSHSA embarked on a journey to build and implement an equity, diversity and inclusion (ED&I) strategy and vision. Some of the questions we set out to explore included: What are current best practices? What would better prepare us for the future? How could we better support the communities that we serve?

#### **Diversity starts with teamwork**

From the beginning, this initiative inspired organization-wide involvement. Propelled by the opportunity to re-imagine our workplace and a passion to enhance employee experience, together, we stepped into a brave new future.





Any kind of sustainable long-term ED&I strategy would require honesty, objectivity and considerable experience. With this in mind, a dedicated group of employees collaborated with senior leaders to select a suitable external consulting firm.

Our mutual choice has proven to be an excellent one. In relatively short order, our consulting partner has initiated an environmental scan in addition to an organization-wide cultural competency survey and employee focus groups. In the coming months, the results of this research will provide a mirror, identifying where we need to improve and which goals we should pursue. The better we understand our employee experience of inclusion and belonging, the more impactful our ED&I strategy will be.

#### **Learning that never ends**

To create a shared understanding, we emphasized education. To that end, the Employee Resource Group (ERG) hosted ED&I information sessions. The ERG was also spotlighted at PSHSA staff town halls to acknowledge cultural events of significance, such as Black History, Asian Heritage, Pride and Indigenous History Months. Here, our wide diversity was recognized, elevated and celebrated.

# The beginning of a more diverse and inclusive future

More recently, we have implemented a four-part internal ED&I foundations certification through our consulting partner. By opening minds and encouraging discussion, we raise new possibilities for diversity and inclusivity. Of course, if there's one thing we know about ED&I, it's that the learning never ends. What better way to stay on the leading edge of workplace wellbeing?

# Market at a Glance

# Market at a Glance

### PSHSA REPRESENTS

9,754

### **ONTARIO FIRMS**

(Schedule 1 and 2)

7,150 in Health & Community Care1,454 in Educational Services1,150 in Municipal, Government & Public Safety

**Source:** WSIB EIW Firm Experience Schema, June 2023 snapshot

### **PSHSA REPRESENTS**

769,004

# FULL TIME ONTARIO WORKERS

(Schedule 1)

563,003 in Health & Community Care181,060 in Educational Services48,940 in Municipal, Government & Public Safety

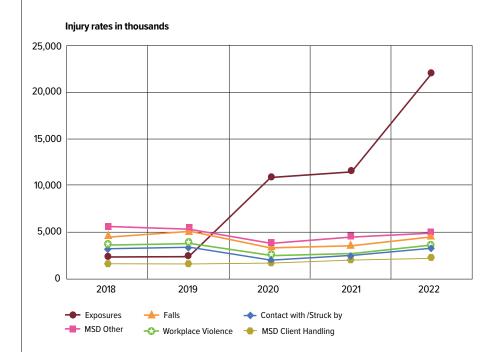
**Source:** WSIB EIW Employer Coverage Schema and CRM (for sectors), June 2023 snapshot

### Non-Fatal Lost-Time Injury Counts by Injury Type in 2022 for PSHSA Sectors (Schedule 1 and 2)

PSHSA Injury Type	LTI Counts
Exposures	21,958
MSD Other	4,963
Falls	4,597
Workplace Violence	3,644
Contact with/Struck by	3,404
MSD Client Handling	2,409

**Source:** WSIB EIW Claim Cost Analysis Schema, June 2023 snapshot

# Top 6 Non-Fatal Lost-Time Injury Counts by Injury Type for all PSHSA Sectors (Schedule 1 and 2), 2018–2022



**Source:** WSIB EIW Claim Cost Analysis and Firm Experience Schema, June 2023 snapshot

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# **Financial Statements**



Tel: 289 881 1111 Fax: 905 845 8615 www.bdo.ca

### Report of the Independent Auditor on the Summary Financial Statements

### To the Board of Directors of Public Services Health & Safety Association

### Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2023 and the summary statement of operations for the year then ended (the "summary financial statements"), are derived from the audited financial statements of Public Services Health & Safety Association (the "Association") for the year ended March 31, 2023.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria disclosed in Note 1.

### **Summary Financial Statements**

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the Association's audited financial statements and the auditor's report thereon.

### The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 15, 2023.

### Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria disclosed in Note 1.

### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810, 'Engagements to Report on Summary Financial Statements'.

BDO Canada LLP

Chartered Professional Accountants, Licensed Public Accountants Oakville, Ontario June 15, 2023

### Public Services Health & Safety Association Summary Statement of Financial Position

March 31			2023		2022
	(ex	pressed in th	ousands of	Canac	lian dollars)
Assets					
Current					
Cash		\$	5,696	\$	5,113
Short-term investments			2,503		2,466
Accounts receivable			1,853		1,235
Inventories			8		13
Prepaid expenses			145		63
			10,205		8,890
Long-term investments			187		211
Capital assets			8		5
		\$	10,400	\$	9,106
Liabilities and Net Assets					
Current					
Accounts payable and accrued liabilities		\$	1,582	\$	1,015
Customer deposits			280		340
Deferred revenue			539		280
			2,401		1,635
Employee future benefits			2,550		2,612
			4,951		4,247
Net Assets			- 100		0=
Restricted			5,186		27
Unrestricted			263		4,832
			5,449		4,859
		\$	10,400	\$	9,106
On behalf of the Board:					
	Director				
	Director				

The accompanying note is an integral part of these summary financial statements.

### Public Services Health & Safety Association Summary Statement of Operations

For the year ended March 31	2023	2022
(expressed i	n thousands of 0	Canadian dollars)
Revenue		
Ministry of Labour, Immigration, Training and Skills Development		
Training and publication recoveries	4,025	3,835
Special projects and other income	20	53
Investment income	195	22
	12,542	11,813
Expenditures		
Personnel costs	9,579	8,327
Program delivery	658	446
Office and general	369	248
Occupancy costs	343	377
Consulting and professional fees	216	142
Communications	202	253
Finance charges and bad debts	192	8
Advertising and sales promotion	180	155
Travel and business meetings	111	24
Insurance	44	40
Governance	39	25
Amortization of capital assets	5	9
	11,938	10,054
Excess of revenue over expenditures from current year operations	604	1,759
•		1,700
Utilization of surplus	(103)	
Excess of revenue over expenditures for the year	\$ 501	\$ 1,759

The accompanying note is an integral part of these summary financial statements.

### Public Services Health & Safety Association Note to the Summary Financial Statements

### March 31, 2023

### 1. Summary Financial Statement Preparation

Management is responsible for the preparation of the summary financial statements. The summary presented includes only the summary statement of financial position and the summary statement of operations. It does not include the statement of changes in net assets, statement of cash flows, or the notes to the financial statements. The summary financial statements are derived from the complete set of financial statements prepared in accordance with Canadian accounting standards for not-for-profit organizations.

Copies of the March 31, 2023 audited financial statements are available at the Public Services Health & Safety Association's head office.



## **Our People**

### **Board Of Directors**

Ravil Veli
Penelope Smiley
Andy Potter
Andréane Chénier
Anna Fitzsimmons
Avinesh Sundar
Devon Mymko
Dianne Fox
Geoffrey Ren
Holly Brooks
Shannon Brooks

### **Voting Members**

Ontario Public School Boards' Association;

Ontario Catholic School Trustees' Association;

Council of Ontario Universities:

Association of College of Applied Arts and Technologies of Ontario;

Ontario Library Association;

Ontario Museums Association;

Independent School Associations of Ontario;

Association des conseils scolaires des écoles publiques de l'Ontario;

Association franco ontarienne des conseils scolaires catholiques;

Canadian Union of Public Employees;

Ontario Municipal Health and Safety Representative Association:

Association of Municipal Managers Clerks and Treasurers of Ontario;

Police Association of Ontario;

Ontario Municipal Administrators Association;

Ontario Professional Firefighters Association;

Ontario Municipal Human Resources Association:

Ontario Long Term Care Association;

Ontario Association of Paramedic Chiefs:

AdvantAge Ontario – Advancing Senior Care;

Ontario Hospital Association:

Health Shared Services Ontario:

Ontario Community Support Association;

Association of Local Public Health Agencies;

Ontario Home Care Association:

Canadian Mental Health Association, Ontario;

Ontario Association of Medical Laboratories;

Ottawa Carlton Association for Persons with Developmental Disabilities;

Ontario Medical Association;

Ontario Association of Medical Radiation Sciences;

Ontario Nurses Association;

Ontario Public Service Employees Union;

Service Employees International Union;

Ontario Association of Chiefs of Police;

Ontario Association of Fire Chiefs; and

Ontario Recreation Facilities Association Inc.

### **Advisory Councils**

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Douglas Cettina Nancy Delcellier Carol Fletcher Dr. Rahim Karim

Steven Kraus

Ronald Landry

Anne Marie McCusker

Karen McKissick
Cameron Mustard

Kyle Nhan

Angelle Rebelo

Michel Séguin Monica Varga

Kate Windsor

Municipal and Provincial Government Advisory Council

Mark Baxter
Bryce Gartner
Jake Herring
Ronald Landry
Kerri Meier
John Milton

Remo Petrongolo

Ryan Schubert Derrick Stein Eric Young Health and Community Care Advisory Council

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Athena Brown
Kevin Chhangte
Ernie Dodgson
Bryn Hamilton
Linn Holness
Frank Inglis
Craig Lawrie

Cameron Mustard

Olivia Nero Ursula Rehdner Dr. Vince Spilchuk

Susan Stark Denise Werner

### **Health & Safety System Partners**

Centre of Research Expertise for the Prevention of Musculoskeletal Disorders

Centre for Research Expertise in Occupational Disease

Centre for Research in Occupational Safety and Health

Infrastructure Health and Safety Association

Institute for Work and Health

Occupational Health Clinics for Ontario Workers

Workers Health and Safety Centre Ontario Ministry of Labour, Immigration, Training and Skills Development

Workplace Safety and Prevention Services

Workplace Safety North

Workplace Safety and Insurance Board

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### Staff

### **Senior Leadership**

Glenn Cullen CEO & COO

**Henri Van Hulle** Vice President, Client Outreach and Stakeholder, Government Relations

**Shannon Hunt** Vice President, Organizational and Operational Excellence

**Rebekah Warner** Director, Market Optimization and Client Experience

### Client Outreach and Stakeholder, Government Relations

# Prevention, Retention, Engagement

Breanne Knowles
Patricia Clausen
Reanne Belisle
Tanya Morose

### **Education and Culture**

Elaine Skinner Janice Gallant Kamil Rizvi

### Government

Allison Whyte
David Fretz
David Sproule
Jeff Pajot
Liz Sisolak
Rob Oliver
Tai Vo

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Connie Limnidis
Derek Morgan
Evan Corbett
Jeremy Holden
Neil McDermott
Olena Chapovalov
Sandra Excellent
Shelly Hurry
Tina Dunlop

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### **Specialized Services**

Tegan Slot Laura Villeneuve

# Stakeholder and Government Relations

Sherri Bastos

# Market Optimization and Client Experience

### **Emerging Markets**

Nathan Kolar Jackie Sam

### **Client Aquisition**

Laura Norwood Faye Carter

### **Client Experience**

Gianne Gonzalez Hamza Berhan Orooj Khalid Shamilla Mohamed

# Marketing and Communications

Amanda Allan Jordan Cole Kayla Thomson Viviane Sampaio Maia

### Organizational and Operational Excellence and Product Development

Miranda Borris

# **Employee Experience** and Human Resources

Anna Asiryan Holly Hurley Lyndsey Dos Santos

# Finance, Administration and Reporting

Mary Lou Giglio Siva Shanmugalingam Toni Cavaliere Viktor Kurylo

# Information Management and Technology

Ernie Beltran
Farhan Nasir
Khushali Pathak
Omar Mohamed
Roy Saldana
Suthan Balasubramaniam

# Product and Digital Solutions

Adriana Lozada
Aimee Danao
Anat Goldschmidt
Christy Conte
Dirie Hersi
Jennifer Anderson
Linda Lorenzetti
Shahzeen Jiwani

Tracelle Palmer

### With Thanks

Adeeba Ahmed
Adriana Villegas Mayorga
Christina Machowski
Christine Joli-Coeur
Emad Karras
Frances Ziesmann
Katie Morrison
Maryam Khan
Nowrin Khandaker
Raman Banwait
Tim Regan

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