



2006 Environmental Scan

Introduction

The following template has been developed as a means of summarizing the 2006 macro environmental scan. It is intended to provide a concise summary of observations and potential impacts at the macro level. A table has been created for each of the focus areas: Economic, Social/Demographic, Legal/Policy, Technology and Health & Safety. By following the Guidelines below, HSAs are requested to add narrative to the Summarized Macro Scan, as appropriate, thereby developing a 2006 Sector Level Environmental Scan.

Guidelines for Completing the Template

1. The first three columns are prime observations, type of the trends and potential impacts on workplace injuries, illness, disease and fatalities for each of the focus areas in the Macro Scan 2006. Please review and amend the first three columns as necessary by adding **bold** narrative either in the same cell following the existing Prime Sector Observations and Potential Impact, or in the **additional blank rows at the end of each focus area**, so that the first three columns properly **reflect your sector specific** findings and/or emerging/new sector issues. Add more blank rows as appropriate to capture additional information.
2. The fourth column is a measure of the impact (Favourable = F, Neutral = N, Adverse = A) of each prime observation on workplace injuries, illness and fatalities from 2007 to 2011. Select the appropriate abbreviation of the impact on the fourth column and add supporting explanations of your selection on the "Explanations" column.
3. Summarize your Prime Sector Observations and their potential impacts on the last page and provide your Organizational Responses.

2006 Sector Level Environmental Scan

Organization: OSACH

Scan Area: ECONOMIC					
Prime Sector Observations New Trend: N Continuing Trend: C		Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities		Measure of Potential Impact reported on Column 3 Neutral = N, Favourable = F, Adverse = A	
				2007 - 11	Explanations
1. New and increased security risks will impact the ability to respond to emergencies.	N	Workers may not be adequately trained to respond to emergencies resulting from crime (including terrorism) and health risks including pandemics. Emergency planning and training in health care organizations is focused primarily on health-related risks, rather than security risks.		A	Healthcare organizations are extended to the limit trying to be prepared for the large number of health-related risks. Security risks may be acknowledged as important, but outside of basic continuity planning and IT preventive measures, healthcare organizations cannot apply sufficient resources to security risks.
2. Impacts of global economic transformation on OHS due to new competitive forces.	N	Workers may not be adequately prepared for new work processes. Private healthcare options are taking shape in other provinces and pressure continues to be applied in Ontario to consider this.		N	Healthcare is adapting well to new work processes and trying to do them well, as traditional ways give way to innovative methods. The competitive challenge represented by private health care adds an edge that could result in a greater emphasis on safe workplaces and worker safety.

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			2007 - 11	Explanations
3. A future labour shortage and mismatch of required skills to available workers will be two significant issues that Canada will have to address in the future. Workers with less marketable skills will be struggling more to find a good job and a decent income.	C	<p>The mismatch of required skills to the available workers may mean that workers are not adequately trained for their jobs. This may result in increased risk of injuries.</p> <p>Ratio of nurses to population continues to broaden, likely leading to overwork and excessive fatigue and, therefore, injury and illness.</p> <p>Certain healthcare sector jobs, such as nursing, have experienced increased bargaining power demanding job security, better pay and healthier working conditions.</p>	A	Healthcare is particularly vulnerable in a situation where unqualified or under-qualified workers are used. Patient and worker safety is a concern, as long-term indicators point to critical shortages in nursing staff and technical staff.
4. Small business seen as the driver of innovation and job creation.	C	<p>Changing business focus could lead to new work processes for which workers are not adequately prepared.</p> <p>The proliferation of private clinics and the potential arrival of privately funded health care could open a new dimension in health care workplace safety.</p>	N	
5. Impacts of globalization on OHS due to economic integration and the liberalization of international trade.	C	Healthcare workers have to cope with more potentially dangerous infectious disease situations.	A	The threat of a pandemic, such as the current threat related to the avian flu virus, is the big picture. The reality is, however, that healthcare organizations must focus significant resources on a host of ongoing disease-related threats; e.g. tuberculosis, malaria, etc. It is unlikely that infection control programs and disease alert systems will be able to guarantee patient and worker safety.

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6. Government emphasis on financial accountability in public sector and quasi-public institutions.	N	Governments are increasingly focused on the business of healthcare and are expecting healthcare administrators to streamline operations, apply business tools and measure and report in business terms. Accountability includes worker health and safety and reductions in absenteeism and lost time.	F	Administrators in healthcare institutions are well underway in adapting to this increased emphasis on business processes and reporting. Balancing of budgets is an immediate concern that should ease in the long-term. Patient care and worker safety will benefit from this increased emphasis on accountability.
7. Increased use of contingent workers and volunteers, in response to rising costs, worker shortages, market pressures, etc.	C	Large numbers of healthcare staff are working part-time or as casual labour at multiple sites—often in shifts. These stressed-out, anxious and fatigued workers often pose a hazard to themselves and others. There is a historical reliance on volunteers in health care settings. As a result of staff shortages, many volunteers are taking on additional roles that resemble part-time employment.	A	Part-time and casual workers in healthcare represent a vulnerable group for accidents and illnesses related to stress and overwork. Volunteers also play a critical role in healthcare settings. Without additional skills and training volunteers may potentially be exposed to injury.

Scan Area: SOCIAL/DEMOGRAPHIC				
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1. The growth of high-risk groups such as older workers, foreign workers, young and new workers will impact the workplace.	N	Language and cultural barriers as well as work organization and design and lack of training are factors affecting members of these groups and could contribute to increased injuries. Generally speaking, healthcare has the training and infrastructure in place to deal with high-risk workers and injury prevention.	F	Healthcare traditionally has relied on a steady influx of workers from high-risk groups to provide patient care and maintain operations. Accordingly, the expertise is in place to ensure adequate training and worker safety.
2. The level of immigration continues to increase with the attendant need to successfully integrate the immigrant population into the workforce and society overall.	C	Language and cultural barriers may be associated with increased injury levels. New workers tend to have higher injury rates than workers on the job for longer periods; therefore new immigrants entering the workforce may experience higher injury levels. Immigrant health care workers often bring with them culturally different perceptions of workplace health and safety, based on common practice or laws in their country of origin, which may increase their vulnerability to injury in Canadian workplaces.	F	Health care is generally coping well with the integration of immigrants into the workforce and accommodating for culturally specific patient care. The positive effect on resource capacity will be a significant benefit. Skilled immigrants improve resource capacity in health care settings and also create a strong need and demand for H&S training and skills development.
3. The bar continues to be raised in terms of the education levels of workers and the requirements to get a job.	C	Reduced injury rates are an expected outcome of better training and competency of workers.	N	

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4. While education levels are ever increasing, the literacy rate among adults is still an issue, which must be considered when looking at training and communicating to workers.	C	Low literacy is likely to be associated with higher injury rates, due to difficulties in training and communication.	A	In healthcare settings employees with low literacy are more likely to apply for a lower skill job due to a language barrier. Such roles can require more manual acuity and a greater opportunity to be in contact with clinical workplace hazards. A language barrier could heighten their exposure to risk if educational material, orientation and training programs are not conducted in another language. As the number of healthcare workers expands to meet population needs, low literacy in the English language could result in more injuries with this new healthcare worker population.
5. Unacceptable levels of participation in job related training.	C	Deficiencies in job knowledge could lead to inappropriate job performance and expose workers to undue risk. Healthcare workplace organization factors—shift scheduling, flex-time, casual employment—make it extremely difficult to schedule required training.	A	The health care workplace is one of the most difficult training arenas. The expansion of work-related scheduling options will create more challenge for organizations as they plan their health and safety sessions to fit employee work schedules. More flexible and alternative learning opportunities will be necessary to accommodate the increasing number of 24/7 scheduling options.

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6. The population in Canada is aging and this will dramatically impact the workforce over the next decade.	C	<p>Chronic injury and illness levels may increase over time as the workforce ages.</p> <p>Older workers may not recover from injury or return to work as quickly as younger workers.</p> <p>Increased “dependency ratios” may create more stress due to work-life balance issues.</p> <p>An increase in the older population could change the dynamics of personal- and health-care services.</p> <p>As the “baby boomers” move towards their retirement, there will be a growing need to address age-related physical changes in the workplace—including improved ergonomics, better lighting, and risks likely to cause injuries or induce chronic disease.</p> <p>Governments have established home care as a priority and managed competition as the best way to oversee a home care marketplace that is rapidly expanding to deal with the aging population. Safety training for home care health workers will have to expand accordingly, especially as home health care becomes more complex, involving administering more medications and disposing of medical wastes. The increased prevalence of obesity within an aging population that is generally more sedentary is putting health workers at increased risk, particularly those involved in patient lifting. More complex home base clients will also require appropriate mechanical lift equipment with the associated education avoiding musculoskeletal injuries when repositioning, lifting or bathing more complex patients/clients.</p>	<p>A</p> <p>An over-burdened health care sector will feel the effects of the aging population for many years to come. Coping is largely the name of the game, in an effort to meet public expectations in general and the growing health care needs of the burgeoning boomer age group, all within an era of ongoing financial restraint.</p> <p>An aging healthcare workforce is particularly present in the community sector; there is a greater risk of personal injury without appropriate equipment and the ability to control the dynamics of the client environment. As most of these workers are also older than the average healthcare worker in a hospital setting there is a greater predisposition to injury particularly as the community client base continues to grow. As well, unless community employees are allowed the choice of refusing to provide care in a home environment where there is exposure to secondhand smoke, this health risk exposure will continue to increase.</p> <p>As the number of citizens who receive homecare continues to augment on a 24/7 basis the likelihood of more fatalities and driving hazards resulting in injuries will also increase. Safe driving programs will need to be part of a good prevention system program for community employees.</p>

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7. Psycho-social issues are having a profound effect on the quality of life in Canadian workplaces.	C	Hospitals and other healthcare institutions are feeling the brunt of a workforce that is stressed-out and burning out at a rapidly increasing rate. Whether it's the result of road rage, insomnia, depression or extreme fatigue, stressed workers are at increased risk of injury and sickness.	A	Healthcare workers—themselves stressed out and burning out—have to cope on a daily basis with more and more patients victimized by our stressful lives. Nurses and doctors are particularly vulnerable.
8. The prevalence of unhealthy lifestyles is evident within the general population.	N	Unhealthy workers are workers at high risk for injury and disease.	A	The declining health of healthcare workers, in general, is creating a situation where unhealthy workers are caring for very unhealthy patients and both groups are at heightened risk for injury and disease.
9. Drug use is on the rise amongst young workers.	N	Risks of injury and health problems are high for workers using drugs. At the other end of the spectrum, random drug testing—instituted in many workplaces—is creating increased stress amongst workers.	A	As in other sectors, drug use is on the rise amongst health care workers, increasing the safety risks for patients and for the workers themselves.
10. Violence and bullying are on the increase in Canadian workplaces.	N	Workers involved in violent episodes or bullying by bosses or co-workers are at increased risk for injury, contracting stress-related diseases and absenteeism. The threat of violence and/or bullying also has been noted involving workers (“whistle-blowers”) who report safety hazards in workplaces.	A	The healthcare workplace is particularly prone to violent episodes and healthcare workers are at increasing risk of injury and death.

Scan Area: LEGAL/POLICY				
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1. Farm operations will be covered under the Occupational Health and Safety Act as of June 30, 2006.	N	The migratory nature of some farm workers exposes them to risk of injuries from lack of training and exposure to new work environments. Compliance with legislative requirements for workplace health and safety should result in fewer farm-related injuries.	N	
2. Development of strategies to reduce ergonomic-related injuries.	N	Ergonomic-related hazards are a significant source of injuries in the workplace. The healthcare sector suffers from high ergonomic-related injuries and healthcare workers are particularly vulnerable to musculo-skeletal injuries.	F	
3. Increased enforcement of health and safety regulations.	C	Push towards greater compliance will help to reduce injuries and illnesses.	F	MOL key initiative targets poor performing employers (worst 10 per cent) in H&S. An intervention model was tested in 2005 and adopted for use by all WSAs. The MOL also plans the formation of Action Groups to harness existing knowledge to establish workplace priorities to reduce injuries, ensure proper policies are in place and promote safety through education. OSACH has modified its service delivery model to provide effective intervention. The benefits from this initiative will be exponential for OSACH's clients. A Ministry of Labour campaign is focusing on prevention of MSD in healthcare.
4 Continuing expectations for accountability, performance-based and risk-management approach for all public sector organizations.	C	Accountability includes safety and healthcare organizations are using metrics to reduce LTIs.	F	The bar continues to be raised in health care with requirement for evidence-based practice and benchmarking against "proven" methods to reduce guesswork, including the identification and implementation of strategies to improve employee health and working conditions.

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5. Continuing emphasis on prevention in non-occupational health.	C	<p>Focusing on prevention amongst workers in non-institutional workplaces will be positive for worker health and safety and staff training.</p> <p>The legislative agenda is applying greater focus on the safety of medical devices and other equipment in health care settings.</p> <p>Recent infusion of money from the provincial and federal governments is aimed at increasing public accessibility to information, and communication technologies will contribute to health and safety education and a reduction in job stress for health care workers.</p>	F	<p>Important prevention steps and measures taken by government and regulatory bodies over the past 3 – 5 years (and continuing) are laying a good foundation for a future in which health prevention will be treated as a high priority.</p> <ul style="list-style-type: none"> • During the next 3 years recognition of health and workplace wellness will continue to evolve and be a national and provincial focus. • Various accreditation bodies during the next three years will place an increased emphasis on healthcare increasing focus on employee health and workplace safety and wellness standards.
6. Elimination of a mandatory retirement age.	C	<p>Potential for older workers to be in the labour force longer.</p> <p>The number of women 50+ taking non-standard types of employment is increasing, thereby increasing safety risks for this group.</p>	F	<p>This will be beneficial in health care, as it will help to alleviate worker shortages and contribute to retention of health care and institutional knowledge held by older and more experienced workers. It should be noted, however, that the retirement age in health care keeps falling and programs are needed to encourage older workers to stay.</p>
7. Smoking ban in workplaces and public places.	C	<p>Workers will no longer be exposed to second hand smoke in the workplace.</p> <p>Workers in long-term care facilities will continue to be exposed to second-hand smoke, as the legislation will not apply, maintaining this health hazard in LTC work environments.</p>	F	
8. Governments ramp up their plans to deal with potential pandemic and other health-related catastrophes.	N	<p>Infection control is paramount in importance in healthcare settings.</p>	F	<p>MOHLTC has introduced a pandemic plan with the full co-operation of the healthcare sector.</p>

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9. Establishment of national day care program remains likely.	C	Day care sites likely will be established within health care institutions or affiliated with health care institutions, necessitating broad and specialty H&S training.	F	Amongst health care facilities, day care centres are traditionally poor performers with regards to health and safety. These should be a focus for efforts in the next few years, especially because of the large number of young workers employed here.

Scan Area: TECHNOLOGY				
Prime Sector Observations New Trend: N Continuing Trend: C		Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 3 Neutral = N, Favourable = F, Adverse = A	
			2007 - 11	Explanations
1. New technologies, new work processes and human-machine interfaces.	N	<p>Workers face the risk of mental and emotional strain when faced with extreme changes in the workplace.</p> <p>The increasing complexity of new medical devices is a complicating factor, contributing to stress and possible injury during use.</p> <p>Ergonomics is a major problem in health care. New equipment requires skills training and health care workers using the same equipment repeatedly are prone to RSI.</p>	A	Healthcare workers have adapted well to the introduction of new technologies in their workplace. Nonetheless, the sheer numbers of new machines and devices is difficult to cope with. Coupled with the stress they must cope with on a daily basis, the potential for increased injuries is high.
2. The use of the Internet promotes self-reliance through self-service.	C	<p>Promoting self-reliance and responsibility amongst employers and workers will help to decrease the level of injuries, illness and fatalities.</p> <p>Health care sites on the Internet and the Web have created very high expectations amongst patients and families re their own care or care of their loved ones by healthcare professionals.</p>	F	<p>Expanded use of the Internet could benefit health care employees by encouraging prevention through self-education thus reducing some of the burden on healthcare institutions and workers.</p> <ul style="list-style-type: none"> Expanded Internet access will also create a variety of health and safety educational options for employees in a variety of work related settings and flexible work shift options.
3. Technological improvements have changed the types of injuries and the levels of injuries in all industries.	C	Technology advancements have both positive and negative effects on the level of injuries, illness, disease and fatalities amongst workers depending on the industry and type of work.	N	On the positive side, technology improvements will provide ready access to new and better equipment for <u>injured</u> health care workers needing treatment. On the negative side, the sophistication and complexity of new health care equipment will necessitate training for workers, which may be difficult for them to obtain.

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4. Enhanced knowledge-sharing technology.	C	Increased access to health and safety knowledge can help workplace parties improve prevention efforts, and increase effectiveness of health and safety professionals, including the Prevention Partners.	F	Improvements in e-learning open possibilities for broadening training opportunities for workers. However, health care workers are amongst the least likely to be able to use this training method in their workplace.
5. Increased investment in equipment upgrades and replacements.	C	New equipment may be safer than older equipment; therefore this trend may lead to lower injury rates.	F	New provincial initiatives, such as the MOHLTC Lifts Initiative, to invest in improved or new patient-lift equipment will go a long way towards alleviating injury situations related to this key health care workplace hazard.
6. Wireless technology is becoming more pervasive and more reliable	C	Wireless technology has strong potential for a variety of useful applications with regards to worker safety in many workplace settings.	F	In health care settings (outside specific equipment-sensitive areas) wireless technology will be used to increase productivity, information sharing and communication effectiveness amongst healthcare professionals with regards to patient care and amongst facilities support staff to improve safety.

Scan Area: HEALTH AND SAFETY				
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1. Lack of involvement by parental guardians regarding health and safety in workplaces employing young workers.	N	Young workers may not be aware of their rights and/or may be reluctant to speak up. This may lead to them taking unnecessary risks in the workplace.	N	Healthcare is not a major employer of young workers with parental guardianship and, therefore, not a high-risk setting in this regard.
2. Lack of physical activity is associated with obesity and ergonomic issues.	N	Obesity may affect an individual's ability to work safely. Health care workers including nurses and emergency response personnel are also at risk for injury associated with lifting and moving obese individuals. Increased sedentary lifestyles also are contributing to significant increases in diabetes and other diseases.	A	Obese patients represent a significant safety risk for healthcare workers, particularly from lifting and musculo-skeletal injuries. At the same time, the declining health of healthcare workers, in general, is creating a situation where unhealthy workers are caring for very unhealthy patients and both groups are at significant risk for injury and disease.
3. Emergence of multi-factorial risks.	N	Combined effects of poor ergonomic design, poor work organization, mental and emotional demands will increase risk of injuries.	A	Nursing is one of the most high-risk professions in the country, when it comes to workplace injuries, stress-related disorders and exposure to communicable diseases. And health care workers, in general, are prone to needlestick injuries and violence-related injuries.
4. Many young workers do not receive OHS training when they begin a job.	C	New and young workers tend to have higher injury rates.	N	

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5. Mental health is often affected by many factors (“stressors”) in the workplace, including high demand/low control, high effort/low reward.	C	<p>Adverse effects on mental health, including anxiety, anger or depression, may lead to other physical health and safety problems at home or at work such as conflicts, violence, substance abuse, injuries or disease and/or pain.</p> <p>Complexity of care is adding significantly to workload in health care settings, exacerbating stressors amongst healthcare professionals and support staff.</p> <p>Nursing workload—more accurately overload—is creating high-level risk for mental health problems amongst this segment, which is already plagued by one of the highest levels of risk in Canadian workplaces.</p>	A	<p>Health care jobs—nursing in particular—are amongst the most stressful in the Canadian marketplace. Mental health problems are growing exponentially amongst health care workers. While on-site treatment and worker support is also growing, it is not at a pace that can be expected to meet demand.</p>
6. Increasing integration of Return to Work with primary prevention.	C	<p>Return to Work should be early, safe, suitable and sustainable. This is intended to help decrease the reoccurrence of injuries.</p> <p>“Presenteeism” is an emerging problem in return-to-work programs. This is when injured workers return to work and are counted as part of the shift, when in fact they are unable to perform at all or only on a modified-work basis and the extra workload remains distributed amongst others.</p>	F	<p>Return to work programs are gathering steam in health care organizations with the potential to alleviate injuries and worker shortages.</p>

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7. In Ontario, 97% of lost-time injuries and related impacts were due to five general hazards including; bodily reaction and overexertion, falls, contact with objects, equipment and transportation, and exposure to harmful substances and environments.	C	In health care settings, the greatest risks for lost-time injuries are MSD, slips & falls, contacts with objects/equipment and workplace violence. Health care also has high LTIs related to sharps injuries, allergic reactions, ergonomic and human factors, construction and renovation hazards and exposures to harmful gases and substances.	A	OSHCO's new Prevention Strategy for Musculoskeletal Disorders in Ontario and MOL's Pains & Strains Campaign are important and timely initiatives that are vitally needed in healthcare.
8. Environmental changes and increased efforts to control them (e.g. global warming, ozone depletion, Kyoto accord).	C	Increased potential for heat, stress, UV exposure. Tuberculosis is emerging once again as a health threat and outbreaks have occurred in Ontario. Health care workers in home care shelters are especially vulnerable. Exposure to drug-resistant organisms is a major concern for health care workers and the situation is that as one problem is dealt with, another surfaces. (e.g. c-difficile)	A	Communicable disease control is major priority for health care institutions in the wake of several high-profile epidemics and the threat of an influenza pandemic. Infection control and guidelines for workers in health care are being put in place but some standardization and regulation will be necessary to alleviate worker and patient anxiety. MOHLTC has introduced a pandemic plan with the full co-operation of the healthcare sector.
9. Increased emphasis on security.	C	Biological hazards and disposal of medical wastes pose the biggest security threats in health care institutions Bio-terrorism is on the radar of health care institutions and a hot topic amongst health care professionals. Yet, emergency preparedness measures to deal with threats and situations effectively are not yet in place on a widespread basis.	A	MOHLTC has provided funding to hospitals for CBRN (chemical, biological, radiation, nuclear) equipment.

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10. Increasing number of fatalities due to motor vehicle incidents (MVI)	C	Home care health care workers, a growing segment of the health care work-force, is particularly vulnerable, as these individuals spend a large amount of time travelling between clients' homes, often in areas with difficult driving conditions. Fatalities have been reported.	A	Healthcare workers are becoming more mobile as a result of changes in the healthcare sector in rural areas and multi-site reorganizations in urban areas.

Summary of Scan Areas				
Prime Sector Observations	Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 2 Neutral = N, Favourable = F, Adverse = A		Organizational Responses
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ECONOMIC:	Severe financial constraint has been a way-of-life in health care during the past 10 years. Hospitals and health care organizations will continue to struggle to balance budgets, even as the demands and expectations to improve health care services continue to grow. Within this scenario, occupational health will have to fight for recognition as an important priority and health and safety training and monitoring will have to fight for a slice of thinly carved budgets. A greater number of less-skilled and contingency workers, more flex-scheduling, the expanding impact of security risks on workers' health and the global reach of contagious diseases add up to constrained health care settings and health care workers even more vulnerable to workplace injury.	A	Continuing financial constraints, a stressful work environment and instability in the workforce add up to increased risk for workplace injuries. Add global threats regarding security and disease and domestic challenges related to the emergence of private healthcare options and further restructuring of the healthcare sector and the prescription is for adversity over the long-term for healthcare organizations.	OSACH is maximizing the value we deliver to our clients and also demonstrating and measuring that value. These are some of our initiatives: <ul style="list-style-type: none"> Tracking tool to evaluate and monitor Last Chance Initiative & reduction in LTI Financing a consultant to pursue a PhD to enable HCHSA to connect to the research & evaluation environment and ensure we are in good position for research grants Developing on-line assessment tools Creating a membership portal with client-specific reporting re injury demographics Continuing development of the benchmarking tool to allow organizations to compare their performance

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SOCIAL/DEMOGRAPHIC:	An aging population affects every sector in the Canadian marketplace to some extent. In the case of health care, it is more so. Aging means more disease- and age-related health problems, which will strain a health care system that is already over-strained. New immigrants entering the workforce will offset partially the impending labour shortage, and health care organizations will benefit from this (although the nursing shortage likely will continue to constrain hospitals). Psycho-social issues are a major cause for long-term concern, as health care workers—most in positions already identified as extremely stressful—are particularly vulnerable to stress-related and mental health problems. Threats related to drug use and violence also are having an impact on the healthcare sector.	A	The major impact of social-demographic changes will be felt over the long-term when demand for healthcare services will likely exceed supply and aging healthcare workers dealing with more complex cases and heavy workload pressures result in riskier workplaces. Increasingly unhealthy lifestyles in the general population will affect the safety of healthcare workers and will contribute to rising absenteeism and LTI in the sector.	OSACH is client-centric and our products and services are the means by which we deliver value to our clients. These are some of our initiatives: <ul style="list-style-type: none"> • Completing Minister's Health Action Panel projects • Updating current education programs • Launching "Don of a New Day" video • Creating brochure to highlight programs to be in-demand by organizations involved in Last Chance Initiative • Putting in place Safety Group Initiative • Developing specialty programs & products regarding MSD & blood-borne pathogens

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Prime Sector Observations	Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 2 Neutral = N, Favourable = F, Adverse = A		Organizational Responses
		2007 - 11	Explanations	
LEGAL/POLICY:	The momentum is building in government and health regulatory bodies to emphasize prevention, healthful living and wellness. Increased regulatory (and even criminal) enforcement, growing expectations for risk management approaches, prevention in public health, and initiatives by the Ministry of Labour to improve the worst workplaces are all positive developments. The next five years will be a time for health and safety workers and officials to capitalize on this momentum and these developments to make big strides in improving workplace safety.	F	It will take a while for legal and policy initiatives to have an impact, but over the long-term they will. And the bulk of this impact can be expected to be favourable for workplace health and safety, including health care workplaces. Important proactive steps—e.g. the Pains & Strains Campaign and Prevention Strategy for MSD—will be major positive influencers.	<p>In order to service our clients more effectively, OSACH is leveraging our resources through mutually beneficial alliances and partnerships and closely aligning our strategies with MOL and WSIB direction. These are some of our initiatives:</p> <ul style="list-style-type: none"> • Implementing a new Service Delivery Model with new online tools • Building a CRM system to support the new Service Delivery Model • Partnering with other associations & service providers regarding training & projects • Ensuring appropriate professional development for staff

Summary of Scan Areas				
Prime Sector Observations	Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 2 Neutral = N, Favourable = F, Adverse = A		Organizational Responses
		2007 - 11	Explanations	
TECHNOLOGY:	Technology is changing the health care workplace, mostly for the better. Technological advances and new equipment are creating “miracles” in diagnostics, treatment and rehabilitation. Electronic record-keeping is opening doors to information sharing with regards to patients and health care best practices. Technology also means, however, that workers have to be trained to use new equipment and often at increased risk for repetitive strain injuries, heavy lifting and hazards exposure. Ergonomics-related problems are expanding across worker categories and represent a long-term “time bomb” that health and safety workers will have to deal with as high priority in the next five years.	N	When it comes to technology, in health care there is a balance of positives and negatives. New technology is changing patient care dramatically, for the better, and also the health care workplace, also dramatically. Yet, health and safety concerns related to technology present new challenges for health and safety workers in health care settings, and ergonomics issues must be dealt with on a priority basis over the long-term.	While adopting emerging technology to increase our own productivity, OSACH is also committed to being innovative in responding to our clients’ needs. For example, we are re-designing Safe Angle newsletter to respond to needs of diverse clients and upgrading our technology and conducting hardware/software training.

Summary of Scan Areas				
Prime Sector Observations	Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 2 Neutral = N, Favourable = F, Adverse = A		Organizational Responses
		2007 - 11	Explanations	
HEALTH & SAFETY:	The emergence of multi-factorial risks in workplaces, the heightened impact of stressors on the mental health of workers and the increasing risks related to security and environmental changes are combining to threaten worker safety as never before. General hazards that cause most workplace injuries are ongoing concerns. New programs and more proactive initiatives are likely to have a positive impact on worker health and safety.	F	The health care workplace and health care workers have demonstrated tremendous resilience in the face of adversity over the past 10 years; and there is no reason to believe that this will not be the case over the next five years. Occupational and workplace health and safety are growing in importance and rising up the list of priorities in the health care sector and will be buoyed by new government programs and initiatives.	<p>OSACH is emphasizing innovation when helping health care organizations and workers taking responsibility for minimizing their exposure to health and safety risks. These are some of our initiatives:</p> <ul style="list-style-type: none"> • Implementing High Risk Initiative + Last Chance Initiative to achieve goal of 20% reduction of LTI by 2008 (5% per year) + track and monitor progress • Implementing CEO & OSACH Partnership Development Strategy • Focusing on 8% benchmarking group in Service Delivery Model • Implementing new infection response strategy • Enhancing membership portal with client-specific applications • Developing new products and services • Upgrading existing products and services + marketing them more effectively

Summary of Scan Areas				
Prime Sector Observations	Potential Impact of Column 1 on Injury, Illness, Disease and Fatalities	Measure of Potential Impact reported on Column 2 Neutral = N, Favourable = F, Adverse = A		Organizational Responses
		2007 - 11	Explanations	
OVERALL:	<p>Health and safety workers inside health care organizations and health and safety consultants engaged to ensure safe workplaces will have to stand shoulder-to-shoulder over the next five years. Bolstering JHSCs will be a prime objective in the years to come.</p> <p>Regulation is a heavy hand that can be used, but it is better to work hand-in-hand to change mindsets and devise approaches to make workplace safety a day-to-day activity.</p> <p>While it is impossible to think totally optimistically regarding health care workplaces, there is real cause for optimism and that is the best vantage point from which to look ahead.</p>	N	<p>The health care sector will likely at least hold its own in the years ahead, when it comes to workplace health and safety issues, and headway will be made as a result of positive government initiatives and more direct involvement in client workplaces by SWAs.</p>	<p>In an environment where there will be greater demand for our services than there are resources, OSACH is evaluating and prioritizing the highest needs opportunities and attempting to supplement funding with additional sources of revenue, including grants and sales of products and services; all in the interest of responding to the ever changing environment in the health care sector and the changing needs of our clients.</p>



2006

SWOT Analysis

Introduction

The 2006 Sector Level Environmental Scan (Template 1) establishes prime observations and high-level impacts in the areas of economic, social/demographic, legal/policy, technology and health and safety. It is intended to serve as a “living document” that may be amended and changed over time. It is also a reference document for completing the Organizational Scan – HSA SWOT Analysis (Template 2).

Guidelines for Completing the Template

By focus area, review Prime Observations listed in Template 1, copy and paste, as appropriate, as Key Observations on Template 2. Following the identical process, copy and paste Potential Impacts from Template 1 to Template 2, as appropriate.

A SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis provides information that is helpful in matching an organization’s culture, structure, resources, competencies and technology to the environment in which it operates. As such, it is instrumental in strategy formulation and selection.

Conduct an Organizational Scan to identify organizational strengths that enable your organization to achieve its vision and mission and weaknesses that limit the organization’s ability to realize its purpose and objectives. Then, from Key Observations already documented and any other observed external condition, identify opportunities and threats to your organization’s ability to realize its purpose and objectives.

Each Health & Safety Association in preparing their yearly Organizational Scan – HSA SWOT Analysis can leverage the value of the following template by developing a high-level Organizational Strategic Response to the HSA SWOT Analysis linked to business plans. In addition, an Organizational Strategic Response may include organizational response to system wide Health and Safety and alignment initiatives and/or pursuit of legislative change.

Definitions/Glossary of Terms

Key Observation: The Prime Observations in the Sector Scan or a selection thereof. Certainly the Overall Summary will compel the selection of the “critical few” which will serve as the basis for the Summary of Trend/Findings (Template 3).

Strengths: A successful application of a competency or exploitation of a critical factor to develop organization competitiveness.

Weaknesses: An unsuccessful application of a competency or the non-exploitation of a critical factor that diminishes organization competitiveness.

Opportunities: An external condition that could positively impact the organization's critical performance parameters and improve competitive advantage provided positive action is taken in time.

Threats: An external condition that could negatively impact the organization's critical performance parameters and diminish competitive advantage provided positive action is not taken in time.

Strategic Response: Goals & objectives that could incorporate one or more of the following:

- Pursue opportunities that would be a good fit to the organization's strengths.
- Overcome weaknesses to pursue opportunities.
- Identify ways that the organization can use its strengths to reduce its vulnerability to external threats.
- Establish a defensive plan to prevent the firm's weakness from making it highly susceptible to external threats.

2006 Organizational Scan – SWOT Analysis - OSACH

Scan Area: ECONOMIC	
<p>Key Observations (Based on column 1 of Template 1):</p> <ul style="list-style-type: none"> Future labour shortage & mismatch of required skills to available workers (#3) Impacts of globalization on OHS (#5) Increased use of contingent workers and volunteers (#7) 	
<p>Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011): A greater number of less-skilled and contingency workers, more flex-scheduling, the expanding impact of security risks on workers' health and the global reach of contagious diseases add up to constrained health care settings and health care workers even more vulnerable to workplace injury.</p>	
Impact on the Organization:	
<p>Strengths Experienced field consultants working within a new service delivery model and with new training and assessment tools</p>	<p>Weaknesses Limited internal resources for generating revenue from new sources Organization's image is building but still low profile</p>
<p>Opportunities Increasing demand for training amongst client groups</p>	<p>Threats Looming pandemic and other epidemics could overwhelm client workplaces and healthcare sector, in general</p>
<p>Strategic Response: OSACH is attempting to maximize the value we deliver to clients and making sure that we also demonstrate and measure that value. Part of our image-building efforts is to make clients, as well as the healthcare sector in general, aware of the value we bring to the protection of healthcare workers in Ontario. We are also making a sustained effort to supplement existing and foreseeable funding with additional sources of revenue.</p>	

Scan Area: SOCIAL/DEMOGRAPHIC

Key Observations (Based on column 1 of Template 1):

- Integration of immigrants into the workforce (#2)
- Low levels of participation in job-related training (#5)
- Aging population (#6)
- Problems related to psycho-social issues and violence in the workplace (#7 & 10)

Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011):

The major impact of social-demographic changes will be felt over the long-term when demand for healthcare services will likely exceed supply and aging healthcare workers dealing with more complex cases and heavy workload pressures result in riskier workplaces. Increasingly unhealthy lifestyles in the general population, higher stress levels amongst healthcare workers and increased violence in healthcare settings will affect the safety of healthcare workers and will contribute to rising absenteeism and LTI in the sector.

Impact on the Organization:

Strengths

Development of targeted products and services

Training expertise regarding immigrant population

Weaknesses

Limited resources to meet client needs and demand for services

Opportunities

Strong demand for H&S products and services in healthcare

Threats

H&S training considered low priority in healthcare

Strategic Response:

We are striving to be more innovative and client-centric. Our objectives are to help healthcare organizations take more responsibility for minimizing their workers' exposure to health and safety risks. In an environment where there will be greater demand for our services than there are resources to supply them, we are evaluating and prioritizing the highest need opportunities, while also trying to respond to the challenge of meeting anticipated increased needs within the community care sector.

Scan Area: LEGAL/POLICY

Key Observations (Based on column 1 of Template 1):

- Strategies to reduce ergonomic-related injuries (#2)
- Increased enforcement of health and safety regulations (#3)
- Elimination of mandatory retirement age (#6)

Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011):

It will take a while for legal and policy initiatives to have an impact, but over the long-term they will. And the bulk of this impact can be expected to be favourable for workplace health and safety, including health care workplaces. Important proactive steps—e.g. the Pains & Strains Campaign and Prevention Strategy for MSD—will be major positive influencers.

Impact on the Organization:

Strengths

Comprehensive line-up of products and services, with even more in the developmental stage

Governance

Partnering initiatives

Weaknesses

Limited enforcement options

Opportunities

Capitalizing on new legislative and regulatory initiatives

Threats

Increasing challenge faced by clients as a result of elimination of mandatory retirement age

Strategic Response:

In order to service our clients more effectively, OSACH is leveraging our resources through mutually beneficial alliances and partnerships and closely aligning our strategies with MOL and WSIB direction. We are also implementing a new Service Delivery Model with new online tools, building a CRM system to support the new Service Delivery Model and ensuring appropriate professional development for staff.

Scan Area: TECHNOLOGY

Key Observations (Based on column 1 of Template 1):

- New technologies, new work processes and human-machine interfaces (#1)
- Technological improvements changing the types and levels of injuries (#3)
- Increased investment in equipment upgrades and replacements (#5)

Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011):

When it comes to technology, in health care there is a balance of positives and negatives. New technology is changing patient care dramatically, for the better, as well as the health care workplace, also dramatically. Yet, health and safety concerns related to technology present new challenges for health and safety workers in health care settings. Ergonomics is at the top of the list of challenges, with LTI from the use of technology and new medical devices steadily increasing.

Impact on the Organization:

Strengths

Upgraded technology platform

New tools for field consultants

Expertise in ergonomics

Weaknesses

Resources inadequate to deal with specific technology-related problems faced by clients

Opportunities

Helping clients deal effectively with ergonomic-related health and safety

Threats

Rapid deployment of new technology in healthcare—hard to keep up with challenges clients are facing

Strategic Response:

While adopting emerging technology to increase our own productivity, OSACH is also committed to being innovative in responding to our clients' needs. For example, we are re-designing Safe Angle newsletter to respond to needs of diverse clients and upgrading our technology and conducting hardware/ software training.

Scan Area: Health and Safety

Key Observations (Based on column 1 of Template 1):

- Emergence of multi-factorial risks (#3)
- Mental health affected by many stressors in the workplace (#5)
- Environmental changes and increased efforts to control them (#8)

Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011):

The emergence of multi-factorial risks in workplaces, the heightened impact of stressors on the mental health of workers and the increasing risks related to security and environmental changes are combining to threaten worker safety as never before. General hazards that cause most workplace injuries are ongoing concerns. New programs and more proactive initiatives are likely to have a positive impact on worker health and safety.

Impact on the Organization:

Strengths

Comprehensive group of products and services

Weaknesses

Expertise in some, but not all, environmental health and safety areas

Opportunities

Implementation of new infection response strategy

Threats

Pandemic, epidemic and other environmental and health related risks may overwhelm healthcare sector

Strategic Response:

OSACH is emphasizing innovation when helping health care organizations and workers taking responsibility for minimizing their exposure to health and safety risks. These are some of our key initiatives:

- Implementing High Risk Initiative + Last Chance Initiative to achieve goal of 20% reduction of LTI by 2008 (5% per year)
- Implementing CEO & OSACH Partnership Development Strategy
- Implementing new infection response strategy
- Enhancing membership portal with client-specific applications
- Developing new products and services
- Upgrading existing products and services + marketing them more effectively

Scan Area: Overall Summary

Key Observations (Summarize preceding observations that have significant impacts in each focus area):

- Future labour shortage and mismatch of required skills to available workers
- Increased use of contingent workers and volunteers
- Low levels of participation in job-related training
- Aging population
- Increased enforcement of health and safety regulations
- Technological improvements changes the types and levels of injuries
- Emergence of multi-factorial risks

Impact on injury, illness, disease and fatalities over the next 5 years (2007-2011):

The health care sector will likely at least hold its own in the years ahead, when it comes to workplace health and safety issues, and headway will be made as a result of positive government initiatives and more direct involvement in client workplaces by SWAs.

Impact on the Organization:

Strengths

Strategic Plan in place and being implemented

Weaknesses

Limited internal resources for generating revenue from new sources

Opportunities

Product and service development

Threats

Pandemic, epidemic and other environmental and health related risks may overwhelm healthcare sector

Strategic Response:

In an environment where there will be greater demand for our services than there are resources, OSACH is evaluating and prioritizing the highest need opportunities and attempting to supplement funding with additional sources of revenue, including grants and sales of products and services; all in the interest of responding to the ever changing environment in the health care sector and the changing needs of our clients.

Significance of Sector Trends/Findings

- ❑ Healthcare environments are high risk & nursing is one of the highest risk jobs
- ❑ Healthcare workers may not be adequately prepared to respond to emergency threats from crime, terrorism, pandemics and natural mass disasters
- ❑ H&S training is difficult to schedule in healthcare due to a large number of part time & shift options
- ❑ Proactive efforts of Government re: prevention, program delivery, regulatory enforcement and funding of major safety equipment such as mechanical lifts will benefit healthcare workers
- ❑ An aging population and workforce will have a profound effect on healthcare & strain the sector's capacity to cope with patient/client/people care and worker safety
- ❑ Expansion of long-term care, residential & community care will challenge healthcare, community service and H&S providers
- ❑ Psycho-social problems and violence are increasing in healthcare and community settings
- ❑ LTI (lost time injuries) related to technology use & ergonomics are increasing in all healthcare environments
- ❑ Epidemics, infectious disease outbreaks & a possible pandemic, resulting from globalization, could overwhelm healthcare workplaces
- ❑ Road safety will become an increasing H&S priority for homecare and community service organization