

Entered by Board Secretary

# Health and Safety Performance – Service Delivery Lost Time Injuries

For decision:

For noting:

## Te tūtohunga / Recommendation

That the Auckland Transport Board (board):

- a) note this update on service delivery lost time injuries.

## Te whakarāpopototanga matua / Executive summary

1. In October 2020, the board was appraised of the challenges and opportunities to further improve our interventions in Lost Time Injuries (LTIs) to the benefit of the organisation and our people. This report sets out the context surrounding the Service Delivery function, where the majority of our LTIs are incurred. LTIs associated with the Service Delivery team account for the majority (83%) of Auckland Transport's (AT's) reported LTIs. The service delivery team represents 27% of the total staff count for AT. During the average year based on a 40-hr week an average officer would cover around 2,760 km on foot.
2. LTIs represent injuries where our people have not been able to work for one or more shifts.
3. Most LTIs for Service Delivery are associated with lower limbs. The most common cause of injury is slips trips and falls (53% over 2018-2020), followed by violence and aggression (11% from 2018-2020). Our controls in place are vast and range from warning systems to wellbeing consultants, rotation of locations, podiatry support, de-escalation training and more.
4. There are improvement opportunities to ensure a more multi-faceted approach including ensuring the effectiveness of our controls, greater focus upon violence and aggression given that this can result in more severe consequences, and the potential for consistency in managed intervention at the rehabilitation phase.

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## Ngā tuinga ō mua / Previous deliberations

Date	Report Title	Key Outcomes
Every meeting	Lost Time Injury Frequency Rate (LTIFR), LTIs, and Lost Time Injury Days (LTIDs) are currently reported at every AT Board meeting.	Standard report
September 2020	Health and Safety Performance – Threats and Aggression	Zero tolerance to Violence and Aggression Campaign, De-escalation trial
October 2020	Health and Safety Performance – Lost Time Injuries (LTI) – More Effective Management of Likelihood and Consequence	To ensure that LTIs are managed effectively

## Te horopaki me te tīaroaro rautaki / Context and strategic alignment

- This report aligns with the safety requirements of the AT Business Plan 2020/2021, “Deliver Safe outcomes for all, across the transport system” in line with the Government Policy Statement on Land Transport<sup>1</sup> and AT Values, ‘*Tiakitanga Safe with us*’ and ‘*Manaakitanga We care... Full stop*’.
- Employee injury rates are a key measure in targeting and identifying the elimination of risk to our workers, as well as to identify opportunities for early intervention and rehabilitation post-incident. The continuous monitoring of the effectiveness of our controls to ensure practicable steps and minimisation of risk of harm is key.

## Ngā matapakinga me ngā tātaritanga / Discussion and analysis

### Overall Status

- Many LTIs have short-term consequences, they are often described as ‘high frequency, low consequence’ injuries. A high LTI value may reflect lots of injuries with one or two days off.
- Service Delivery accounts for about 83% of all LTIs across AT. This is broken down into Parking Services with 76% of all LTIs and Transport Services have 7% of all LTIs:

	2018	2019	2020
Service Delivery LTIs	30	32	27

<sup>1</sup> <https://www.transport.govt.nz/multi-modal/keystrategiesandplans/gpsonlandtransportfunding/previous-government-policy-statements/>

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Lost Time Injury Days	563 days	294 days	338 days
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9. The LTI data for Service Delivery must be put into context as an average enforcement officer walks about 14 kilometres per day. The entire team covers 470,000 kilometres on foot each year. When in town and city centres, this is about 1.8 million kerb lines being crossed each year by the regional teams.
10. Most of the injuries in Service Delivery are slips, trips and falls (53%) and the most injured body part is the ankle and knee.
11. The LTI rate has remained stable since February 2018, even with a considerable increase in health and safety reporting through AT's Health and Safety case management system. Intervention is required to reduce injuries incurred and lost time in days worked.

### Improving our Controls

12. Several Councils from the New Zealand Parking Association responded to AT's request for information about the controls in place to protect their Parking Compliance officers, as a healthy comparator to understand whether there are controls that can be introduced or enhanced. Those provided, like podiatry and body cameras from Hastings District Council, are already in place at AT.
13. In Service Delivery, our mitigations for lower limb injuries are 60 Day Intervention post-employment through Podiatry to look at changes to new officer's foot health as well as annual checks, dedicated physiotherapist, high quality shoes and rotation of territories. For violence and aggression, our mitigations include a proactive alert system built into the officer's devices. If they enter a street address that has been involved in any form of aggression towards an officer an alert is raised, prompting the officer and informing them of the prior incident. Equally, we have a targeted approach to training, a recruitment strategy that focuses upon communication and diverse capabilities, and an ability to alert through emergency response.
14. Acts of threats and aggression can contribute to severe consequences for the worker. A discovery sprint was done in 2019 to identify the extent of this issue, the main triggers for our customers, how we can ensure our people are able to deescalate when required, and to ensure appropriate support after an event. The Service Delivery team receive focussed de-escalation training as part of their onboarding. There is de-escalation training available for other departments. A behavioural experiment is taking place to investigate the effectiveness of this training.
15. AT has a variety of recovery controls in place to minimise the LTI impacts when they occur. This is a key component of our strategy to drive early intervention, targeted support for our workers and further reduction in lost days. In 2020 alone, the ACC cost for injuries incurred was \$150,371, in addition AT is also covering the surcharge of ACC consultations. This removes the financial barriers that our people may have in seeking medical treatment and ensures that they receive treatment to assist with Return to Work (RTW) as soon as possible. Our learnings also indicate that there is opportunity to address the 'recovery' phase of the incident management process to improve outcomes overall.

### Further Intervention

16. A review will take place to consider options around a preferred medical supplier which can assist in ensuring that doctors are aware of our processes, and alternative duties are an option, prior to being signed off as fully unfit for work. This will provide targeted rehabilitation and reduce the amount and duration of our LTIs.

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## Ngā tūraru matua / Key risks and mitigations

Key risk	Mitigation
Potential for lack of timely reporting and data through current reporting system may result in delayed treatment and RTW interventions. The Safety Team must review a variety of data sources, including SAP, Synergi and ACC Portal for claims to ensure accurate data. This is a time consuming and challenging exercise.	Replacement/improvement of case management system (Synergi) is in progress.  Timely reporting and early intervention ensure we can assist our people in returning to work in the best way possible.
Too strong a focus on LTI can result in an over emphasis on injuries that require one or two days off, rather than more serious injuries that may require different pathway management. It can also cause people managers to get people back to work on alternative duties, when they may need further physical or psychological recovery.	A preferred medical supplier would enable consistency in approaches and for AT as a PCBU to ensure that our people are provided with the most appropriate options for their circumstance. Having strong interventions both pre and post event would allow for better end to end pathway management and a managed RTW approach.
Too strong a focus on LTI may reduce the focus upon the critical areas of injury be it physical or psychological, like violence and aggression.	Violence and aggression, sun care and slips, trips and falls are identified areas of potential harm and have unique identified controls.

## Ngā ritenga-ā-pūtea me ngā rauemi / Financial and resource impacts

17. There are financial and resource impacts around providing employee medical advice and rehabilitation. Our costs paid by ACC for Service Delivery injuries are set out below. There are also additional financial factors to consider such as the worker not being able to work and the subsequent overtime or temporary replacement. Our ACC claim costs affects our ACC experience rating loading, which affects the amount we pay for our ACC levy. We may be able to reduce our ACC levies if we reduce the costs of LTIs through use of a preferred medical supplier.

Claims paid by ACC	2018	2019	2020 <sup>2</sup>
Costs of Service Delivery claims (what ACC has paid)	\$168,528	\$117,306	\$120,937
Cost of AT claims – not Service Delivery (what ACC has paid)	\$76,144	\$21,752	\$29,433
Total claims paid	\$244,672	\$139,058	\$150,371

<sup>2</sup> Does not include Dec 2020 due to when data was sourced

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Our ACC Levy	2018	2019	2020
Experience Rating Loading (what we paid to ACC in addition to our base rate)	21.26%	15.45%	19.72%
	\$75,588	\$45,490	\$54,218
Total ACC Levy (what AT paid to ACC in total)	\$464,8168 (includes WSMP discount)	\$517,831	\$517,711

## Ngā whaiwhakaaro ō te taiao me te panonitanga o te āhuarangi / Environment and climate change considerations

18. There are no climate change or environmental considerations for this report.

## Ngā reo o mana whenua rātou ko ngā mema pooti, ko ngā roopu kei raro i te maru o te Kaunihera, ko ngā hāpori katoa / Voice of mana whenua, elected members, Council Controlled Organisations, customer and community

19. This report deals with the LTIs in our service delivery team who come from a diverse range of backgrounds.

## Ngā whaiwhakaaro haumaruru me ngā whaiwhakaaro hauora / Health, safety and wellbeing considerations

20. This report deals with LTIs for AT, which is a key element in the management of Health and Safety and compliance with the Health and Safety at Work Act 2015. It is critical for the health, safety and wellbeing of our people and to build the appropriate workplace support to maintain our people and reduce turnover.


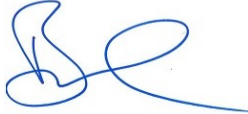
## Ā muri ake nei / Next steps

21. Our next step is to review the options for a preferred medical provider for workplace injuries and standardise the process. A provider who is familiar with our process and alternative duties can reduce the length of time a person is away from work and individualise their rehabilitation and associated costs.

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22. We will also continue to improve and review our existing processes to ensure they are effective.

## Te pou whenua tuhinga / Document ownership

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