

Best Practice Guidelines:

Effective Worker Participation in Hazard Assessments Alberta Workers' Health Centre, December 2015

About the Alberta Workers' Health Centre:

The Alberta Workers' Health Centre is a registered charitable, non-profit organization that supports all workers, unionized and non-unionized, who need assistance to help make their workplaces healthier and safer. Since 1983 it has done this through programs of education and training; research and information; assessment and support for workers across Alberta.

600, 12323 Stony Plain Road Edmonton, Alberta T5N 3Y5 780-486-9009 toll free: 1-888-729-4879 www.workershealthcentre.ca



CUPE-SCFP UNIFOR



A hazard is any situation, condition or thing that may be dangerous to the safety or health of workers.

A hazard assessment is a systematic method by which hazards are identified and eliminated. It is based on evidence, experience and recommended practices.

It is the law in Alberta that an employer must involve affected workers in the assessment of hazards at work. These guideline promote effective participation of workers in hazard assessment.

Why is this important?

Our health and our work is very important to every one of us. Work provides us with income and self-esteem. To suffer illness, injury or disability for any reason affects us in many ways. It can have long term and devastating impacts if the illness, injury or disability affects our ability to work. To suffer illness and injury because of our work is doubly problematic because in many cases the cause is preventable through the use of basic health and safety tools like hazard assessment and control

In Alberta alone, over 150,000 workers file an injury or illness claim each year. Most of us know someone who has suffered a disabling injury or illness because of work. Injured workers are often stigmatized, and blamed for their own suffering and for becoming unemployed.

Working conditions affect all of us.

Worker participation in hazard assessment and in health and safety is necessary for many reasons. Here are just a few:

Worker Participation: A human right.

Our health and safety at work and in society are human rights. No longer are people expected to work under unsafe and unhealthy conditions without adequate training and resources to protect them. No matter where it occurs – in



Canada, Bangladesh, China or Brazil - there is public outrage when workers are required to risk their lives and futures as a cost of making a living.

Risk vs Hazard.

These terms are often used interchangeably but they can be used to mean different things. The hazard is the event or condition and the harm that it creates. Risk is the likelihood that the hazard will occur. Hazard assessment is primarily concerned with the harm that may occur. Risk is one consideration in determining the appropriate action to take. Risk assessment may focus primarily on the likelihood that an event will occur. It is often used to minimize concerns and to postpone action. The Alberta Code requires that a hazard assessment be conducted and that appropriate controls be taken.

Some workers respond to emergency and upset conditions as part of their job to address hazardous conditions. Proper training, protective equipment and adequate resources are a minimum standard which employers of emergency response workers must meet. While this guide is not designed to address that highly specialized work of emergency responders, the same fundamental principles apply.

At one time, it was believed that simply by accepting payment a worker accepted the risks of his or her work. Today, a worker has the right to expect that the employer has planned the work to be done safely. A worker has the right to know about any hazards and the right to give feedback without fear of reprisal.

Worker Participation: It can be effective and make a difference.

Worker participation in hazard assessment improves the results of the assessment when it takes place in a positive and supportive environment. Support does not mean that everyone sits in a circle and sings a happy song. It means that workers are provided with the mechanisms, training and tools with which to take part. Workers need to be confident that their input and advice will be considered without reprisal. Research and experience that has identified circumstances and resources which facilitate participation will be discussed further in this guide.

What we know from studies and experience is that when workers participate within a supportive structure and can see that their advice is acted upon, hazards are addressed and conditions improve.

On the flip side, we know that not all workers are interested in actively participating in Occupational Health and Safety (OHS) beyond their own work. Workload, rates of pay and a belief that their opinion is not given much weight often dissuades workers from actively participating in OHS beyond doing their own job as they have been directed.

Active worker participation is supported in recommendations from many governmental and non-governmental organizations. This is clearest in Europe where worker participation in OHS is fully supported by many institutions. In Canada, recommendations about worker participation in hazard assessment are found in all jurisdictions - provincial, territorial and federal. Here are some examples:

It is important that workers participate in the risk assessment. They know the problems and the details of what really happens when they perform their tasks or activities, so they should be involved in the assessment. Their practical knowledge or competence is also often needed to develop workable preventive measures. Workers' participation is not only a right, it is fundamental to make the employers' occupational health and safety management effective and efficient.

European Agency for Safety and Health at Work - Workers' roles and responsibilities in Risk Assessment

It has been shown that successful Health and Safety Management Systems have high levels of worker involvement. Worker participation in the development of the system is particularly important to create ownership and overall buy-in into the system. Additionally, worker participation in the development of the Health and Safety Management System will help ensure a better fit with the culture of the organization. To promote worker participation, actively involve them in the development of hazard assessment, inspections, preventative maintenance, training, emergency response, and incident reporting systems. Look for opportunities to get workers from all areas of the organization involved, and provide regular updates on the progress of system development to keep the feedback loop open.

Alberta Government, Building an Effective Health and Safety Management System

Worker Participation: The importance of including the workers' standpoint.

Researchers have identified the importance of incorporating a workers' standpoint into the assessment of OHS in order to improve outcomes.

It is important to understand the standpoints of the different players in the OSH system because people act on the basis of how they see the world, how they understand the situation they are in and the stakes at play, and how they conceive others in the system and their relationship to them.¹

Standpoint means to stand in the shoes of another group and see the situation from their perspective. The primacy of the managerial viewpoint often makes the workers' standpoint invisible, frustrating effective action to resolve problems.

Ineffective action to resolve problems also wastes money. Economists who evaluate OHS interventions identify the need for incorporating the perspective of workers as well as that of management in determining what is to be done. ²

Worker Participation: A legal requirement.

Part 2 of the Alberta Code of Practice sets out the legal requirements of hazard assessment in three sections. Section 7 sets out an employer's responsibility. Section 8 requires an employer to involve affected workers in the process and to inform affected workers of the hazards and steps taken to control or



eliminate them. Section 9 sets out the measures that an employer must take to eliminate or control the hazards.

What is the practice?

An online survey was conducted March 26 through April 25, 2013 with 2,000 workers (age 18 and older) recruited throughout Alberta for the Vector Poll.^{tm 3} Participants were asked a series of questions about their awareness of and experience and participation in worksite hazard assessments. Follow-up interviews were then conducted.

As one would expect, there was a range of responses. Significant differences exist between sectors, age groups, size of employer and gender. Some of those differences will be explored later in this guide.

(Field Level Risk Assessment), in my opinion, is a device for the company to point blame at workers if an incident happens.

The main push back (from workers) is that the forms are used as a way to put blame back on the worker.

An employer doesn't sit down with workers to develop a JHA that will make work safe. The purpose of the JHA is remove the liability from the company and put it onto the worker

Focus group participant

Overall, 70% of respondents surveyed said they know what the term "worksite hazard assessment" means. Only 41% said that worksite hazard assessments are carried out at least once a week at their workplace. Those most likely to say worksite hazard assessments are carried out at least once a week were workers exposed to the most potential health hazards.

Seventy-five percent of workers in Alberta knew before the interview that they had a legal right to be involved in OHS and make suggestions for improvement. Despite this level of awareness, only 19% said that they participated regularly; 45% were asked rarely; and 15% were never asked. Of those workers who had participated, only 50% were involved in identifying risks.

When asked why they did not participate, most cited lack of time, lack of pay and lack of influence. A small group of workers were very active in OHS. While this group represented only 18% of the sample, they were the most highly involved in hazard assessment and achieving outcomes.

While only 56% of the sample ever reported a complaint to a supervisor, those who did were more likely than not to get a positive result from their actions. Those more active in OHS were more likely to raise issues and have them addressed.

Overall what the results of the survey tells us is this: There is knowledge and awareness by workers that they have the right to participate. Some employers do practice regular hazard assessments but few workers participate in them. Most workers lack interest in greater involvement in OHS because of lack of

time, lack of pay and lack of influence. Those who participate most effectively are workers who spend most of their time working on OHS.

CAVEAT. The survey did not include migrant workers in the province under a temporary work program. Self employed and individual contractors were also less likely to be included. These limitations and their implications will be explored more fully later in this guide.

Employer Responsibility

Successful prevention of illness, injury and disability caused by work is the result of the engagement of management responsibility, worker participation and inspector enforcement. Each plays a critical role. The system does not function well without all three components working. This does not mean working without tension or disagreement. Employers are driven by profit. Workers face increasing workloads and fewer job choices. Political influence curtails what inspectors can do. What we know is that handling the relationship through a systematic process in which roles are defined, and people are trained and confident that they can speak out without fear of reprisal will make a difference in prevention. In any given workplace, the imbalance of power between the employer and workers is such that inspectors must play an effective role in ensuring that workers can participate, as well as moni-

Worker Participation Inspectors Enforcement

The Big Picture – The Reality Check

tor for compliance with other regulations.

The employer creates the situation and circumstances under which work is done. The work is designed and being implemented before the worker arrives. Worker participation in OHS is most effective when employers approach their responsibility from the very top of the organization, at the beginning and at every stage of the work process. Before the work involves the worker, each stage of planning and design must take health and safety consequences into account. This is both eliminating the hazard at the source and reducing the number of hazards that a worker must confront. Elimination of the hazard is the most effective means of prevention and required by law to be the first consideration when deciding how to control it. Worker participation is an essential feedback loop on the effectiveness of management's approach to health and safety.

What are the challenges to effective worker participation?

In preparing this guide, the Alberta Workers' Health Centre commissioned Professor Bob Barnetson from Athabasca University to write a discussion paper on the barriers to worker participation. His paper identified a number of substantial



barriers to worker participation. They are briefly summarized here. The complete discussion paper forms part of these guidelines.

Barriers to Worker Opportunities to Participate

This section examined general conditions of the work that act as a barrier to the effective participation of workers.

Organization of work

Increasing subcontracting undermines traditional organizational structures (i.e., a single employer, centralized management, common conditions and rules of works) and results in work being completed by a mixture of permanent and temporary employees, as well as contractors (both companies and individuals). Some organizations may also operate (on) multiple worksites where their workers interact with workers and contractors employed by other organizations. In 2012, Alberta had the highest ratio of business locations to population in Canada.

This situation often results in a loss of in-house OHS knowledge, a devolution of managerial responsibility for management tasks, and a loss of clarity as to who is responsible for what.

On large worksites, the sheer number of parties involved in performing the work may reduce the opportunity for workers to participate in hazard assessment.

Pace of work and compensation schemes

Payment on a piece-rate basis (or "payment-by-results") is an increasingly common form of remuneration, particularly (although not exclusively) in industries with significant levels of subcontracting.⁴ In conjunction with the profit incentive, piece-rate pay incentivizes haste. Significant competition among sub-

Musculoskeletal injuries (MSI) due to repetitive strain are the most commonly recognized form of work injury. MSIs can become permanent and, lead to repeated underemployment and even long term unemployment. The largest and most rapidly increasing work-related disabilities relate to mental illnesses.

Persistent night work causes an increase in cancer among workers.

contractors that has driven down the value of bids and/or contractual terms containing incentives for early completion (or penalties for late completion) may compound this work-hastening effect. Technological changes may also trigger work hastening in more traditional organizations as they adopt lean production models that are associated

with increased injury outcomes. These pressures can lead to "pro forma" or superficial hazard assessment.

Environmental limitations

The conditions under which work takes place – location (if not regular work place), climate, travel, time of day - can impact whether or not hazard

assessments are carried out and the quality of the assessment. Combined with work demand pressures, environment can limit opportunities.

Stigmatizing workers

Some employers and workers believe only worker behavior is the cause of accidents. Stigmatizing terms, such as "careless" and "accident prone," are used to describe injured workers. Some companies, under a so-called "zero tolerance" policy, discipline workers who have accidents or complaints. These opinions, and programs called "Behaviour Based Safety" (BBS), are notorious for suppressing worker participation, and encouraging workers not to report their concerns or injuries.

Sometimes BBS is dressed up and called "safety culture" or "safety climate." The focus on attitudes and individual worker behaviour remains fundamentally the same. The only published study done of worker observation (a key element of these programs) demonstrates there is no direct link between the number of observations and any reduction to the number of injuries or accidents. What matters is how the work is organized, identifying all the hazards at first opportunity and engaging worker participation.

There are three essential flaws in BBS. Firstly, the employer not the worker designs, plans and directs how work will be done. Specifications for work are provided with great detail describing what must be done and how long the worker must take. What the worker does is the result of those specifications.

Secondly, safety is a matter of employer practice not just worker attitude. A big sign that says "Safety First" is meaningless when workers know that the employer is cutting costs by reducing preventative maintenance or paying only lip service to health and safety. Workers are most influenced by the practice of their employer and supervisors.

Thirdly, hazards to health and safety are the result of the way the employer has organized the work. Today, technologies – computers, internet, GPS, robotics - have reduced worker control over the job in both the scope of decision making and the ability to fully understand the process she or he is dealing with. These conditions create unseen and repetitive hazards to which the worker must respond.

BBS is wide spread in industry. It reduces worker participation to cart-horses while providing little improvement in safety over time. Initial improvements measured in reduction of lost time are inevitably explained by report suppression and increasing dissatisfaction.

Yes, worker behaviour is a key element of how work is done. That behaviour, however, is subordinate to the conditions, rules and directions provided by the employer. Human factor analysis shows how particular individual behaviours at



work are promoted by the organization of work.⁷ Prevention requires attention to the underlying factors.

Barriers to Worker Capacity to Participate

Definition of hazard

"Serious to whom" is the critical question in hazard assessment when hazards are defined solely by the employer. The definition can be very narrow – focusing on only physical hazards or on only the hazards related to the specific task at hand. A narrow definition leaves workers exposed to many unseen and uncontrolled hazards.

Hazard is defined broadly by the Alberta Code to mean "any situation, condition or thing that may be dangerous to the safety or health of workers." Comprehensive prevention must consider and address many different kinds of hazards.

The worker relies on the employer to provide information about all relevant hazards. How the employer provides this information makes a big difference to worker participation. Perfunctory orientation, rushed training and/or a casual approach to hazard assessment conveys the message to a worker that hazards at this workplace are not a serious concern.

When employers are serious about addressing hazards, workers may still find that their concerns are summarily dismissed or rejected without serious consideration. This creates a deep sense of lack of influence and undermines a worker's interest to be more involved.

Size of firm

Small companies often lack the resources to provide support for a full range of hazard assessment. Fewer personnel make it unlikely that there is someone primarily responsible for health and safety. Those small companies that provide specialty services are often focused only on the particular hazards related to their specialty.

However, the survey suggests that although hazard assessment occurs less in smaller workplaces (less than 20 employees), individual workers are more likely to be directly involved when it does happen.⁸

Precarious employment

Precarious work is paid work characterized by limited social benefits and statutory entitlements, little job security, low wages and high risks of ill health. Migrant, temporary, part time and self-employed work are often precarious. There has been a marked increase in precarious employment in Canada. Studies have demonstrated both an increased risk of injury and illness among precarious workers. Precariousness makes workers very reluctant to adress any

concerns. Similar in many ways to the situation of small businesses, precarious employment intensifies the problems of lack of resources and support.

Hazard assessment training lacking

Workers need training to participate effectively in hazard assessment. Such training is still limited as a component of occupational training, even for high-skill, high-risk jobs.

You don't know the consequences of (pointing out hazards). You never know if they can fire you. ... At work, we're supposed to be seven guys but there are only two guys. But you can't tell the managers "you are killing me by making me do the work of seven guys". So it is difficult. If you do that you'll be fired. That is what is going on in our mind. No one wants to be fired. (Interview 4)

Absolutely (workers are afraid). Intimidation, bullying by department heads, especially when it is coming down to deadlines. You don't say anything . (Interview 15)

Barriers to Worker Willingness to Participate

Fear of speaking up

Workers often report that they fear speaking up about safety matters.⁹ This fear reduces the willingness of workers to participate in hazard assessments.

There are a wide range of reasons why workers fear speaking up. As in the examples above, many fear the response of their supervisors and management. Even if not fired, reprisals can occur especially if what is said is seen to put the supervisor or manager in a bad light. It is one thing to help out a co-worker or complain about something that is obvious. It is another when the concern has a cost or productivity implications. For many workers, getting more involved in hazard assessment is a cost. The rest of the work still has to be done, there is no extra pay and the employer may not like what is said.

How hazard assessment is presented and practiced makes a difference. Check lists can be either helpful aids or the sign of a tick-off culture. Bureaucratization of safety – going through the motions, focusing only on the small things, paying lip service to requirement - undermines confidence and diminishes the purpose of worker participation.

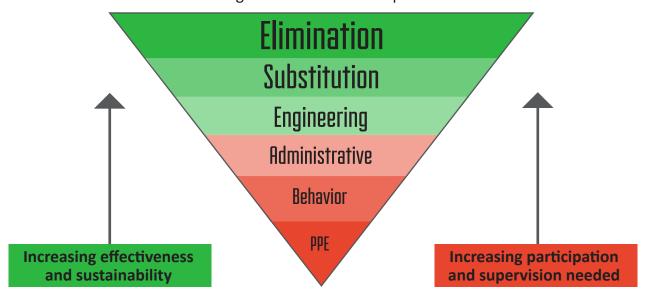
Employer-created silence

Related to worker fear of speaking up is employer-created silence. Workers resort to silence strategies when they believe that speaking up will not make any difference. Over time, this dynamic (silence = inaction = more silence) has the potential to create a form of learned helplessness (or hopelessness). Employers silence worker participation in many ways. From bullying and yelling at workers to ignoring input, a manager or supervisor clearly conveys the message that they are not interested in what a worker thinks unless it agrees with their own view. Such abuses of power are short sighted and undermine workplace morale. Unfortunately these attitudes are not infrequent or limited to one sector.

A reprisal is the most serious form of silencing. A reprisal occurs when an employer disciplines or fires an employee for raising a health and safety concern

HIERARCHY OF CONTROL

Apply the highest level of control commensurate with the risk level - lower value controls may be used in the interim until long-term controls are implemented



or trying to exercise their rights. A reprisal is illegal. If not acted upon by an inspector or union, management reprisals poison the work environment.

Discrimination and harassment

The same practices that discriminate in other aspects of employment also have a negative impact on worker participation in hazard assessment. Women are more likely to have the hazards they face dismissed by employers, regulators and health-care providers, reflecting the long-term devaluing of female work. Workers of colour who experience discrimination are unlikely to believe participation in hazard assessment will be treated any differently.

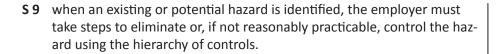
What can be done?

Recognizing that the barriers arise in different contexts and have different impacts, there are recommended practices that should be followed.

How should hazard assessment be done?

The Alberta Code Part 2 outlines three key requirements:

- **S 7** an employer must assess hazards before work begins, repeat regularly and when work changes, and prepare a report each time.
- **S 8** an employer must involve affected workers in the assessment and inform all affected workers about the hazards and what is being done to control them.



Recommended examples of hazard assessment which include worker participation

Our review of recommended hazard assessment in North America and Europe found only one example of a process that incorporated worker participation into its description of the process in the way described by the Code. This process is known by the acronym SOBANE and will be discussed more fully below.

Most reported assessment methods focus on technical issues and evaluating the precise level of the risk. They purport to provide an objective measure without dealing with the reality of the concerns in the particular context. While some engineered processes are built to specifications which need to be considered in an evaluation, few other hazards come with predetermined limits. By definition, these methods tend to exclude participation of everyone except experts. There are significant concerns about the reliability and validity of these measures. ¹⁰ These methods tend to limit interventions and overlook worker concerns.

SOBANE

As mentioned above, there is one published recommended practice for hazard assessment that explicitly includes and builds on worker participation. This practice is known as SOBANE, an acronym derived from its four process stages: Screening (S), Observation

I've never heard management say based on the (Joint Hazard Assessments), that we need to get new tooling that is designed to do a job better or we need to change a procedure. If somebody gets really hurt, they'll jump.

Focus group

(OB), Analysis (AN), and Expertise (E). It was developed by Prof. J. Malchaire at the Unité Hygiène et Physiologie du travail at Université Catholique de Louvain (UCL) in Belgium.

A full and detailed explanation of SOBANE with examples can be found in English at http://www.deparisnet.be/DeparisEngl.htm. The following is a brief summary of its key features taken from the website and published articles.¹¹

SOBANE's focus is on finding solutions through the involvement of various partners in developing strategy: employees, management, physicians, OHS practitioners. This global approach to problems sees the whole (partners working together) as greater than the sum of the parts (individual partners). It stresses the absolute necessity of a participative approach in which workers and local management are the key agents of assessment and partners (OHS practitioners and other experts) play a complementary role.

When is worker participation encouraged?

Worker participation is encouraged in all levels of the SOBANE approach. Worker participation is the principle means of risk assessment in the initial stages of Screening and Observation. Worker-local management participation is combined with OHS practitioners at the Analytical stage. Experts are added



if necessary at the final Expertise stage. Screening takes place regardless of the nature of the problem. The other levels take place if the step before leads to a need for further assessment.

SOBANE was developed in response to European Union directives requiring employers to undertake risk assessment. The method has been used successfully to address physical agents, work in heat, noise, illumination, whole-body and upper-arm vibration and ergonomics, musculoskeletal disorder of the back and upper limbs, work physiology, work on visual display units (VDUs), and sick building syndrome. SOBANE is a strategy for comprehensively assessing hazards and developing concrete and practical solutions to them.

The SOBANE strategy is applicable to all workplaces, large and small. Because it does not rely solely on expertise and sophisticated technology, SOBANE works in most situations. The website provides further explanations and tools in many languages and formats.

Does SOBANE work?

Between 2003 and 2005, SOBANE was used in 80 meetings in 80 companies from nine different industrial sectors. The meetings led to an average of 12 proposals for improvement per meeting. Seventy-six percent of these improvements had little or no cost. Sixty percent of the solutions were very practical, while the other 40% went beyond ordinary health and safety issues to work procedures, work quality, and productivity.

When Work Changes

The Alberta Code requires that:

- 7(4) An employer must ensure that the hazard assessment is repeated
- (a) at reasonably practicable intervals to prevent the development of unsafe and unhealthy working conditions,
- (b) when a new work process is introduced,
- (c) when a work process or operation changes, or
- (d) before the construction of significant additions or alterations to a worksite.

Changes in the way in which work is done has long been recognized as a source of new hazards. Change occurs when management decides that some aspect of work will be done differently. As the US Department of Labor points out,

Anytime something new is brought into the workplace, whether it be a piece of equipment, different materials, a new process, or an entirely new building, new hazards may unintentionally be introduced.

How change is managed becomes central to avoiding unintended negative consequences to health and safety. Worker participation is critical.

Some changes are more obvious – new equipment, new processes, new chemicals. Other kinds of changes such as hours of work, production quotas, and sub-contracting are often ignored. These kinds of changes, without proper

hazard assessment and control, increase the risk of accidents, the seriousness of accidents and the frequency of accidents. A comprehensive view of hazards and hazard assessment is necessary to avoid missing all the impacts of change. All changes require effective notification so that new hazards are not unwittingly created.

Changes also produce stress on workers. No one should need more proof that badly managed stress can reduce resistance to illness, increase bullying and harassment, increase the risk of ill health, lead to violence and contribute to anxiety, depression and ill health. Hazard assessment needs to be sensitive to changes in all dimensions of the work experience.

The recommended practice is to insure that change-analysis hazard assessment is conducted before the change is made. This analysis describes the change, attempts to identify all the ways in which workers' exposure is changed and address the hazards that can arise. It must includes all the parties involved, both those who make the changes and those who will be affected by them in order to avoid a silo affect. A silo affect is the ability of people to see circumstances only from their own perspective. As the United States Occupational Safety and Health Administration puts it,

An organization or process is like a web of interconnections; a change in one area throws a different part off balance. Managing these ripple effects is what makes managing change a dynamic proposition with unexpected challenges. Having a team of operators, engineers, and safety and health professionals jointly analyze potential changes or new equipment, etc., before they are put online, can identify safety and production concerns up front, hopefully heading off problems before they develop. Fixing potential problems before they occur usually is less expensive than attempting to fix a problem after the fact.

http://www.osha.gov/SLTC/etools/safetyhealth/mod4_factsheets_worksite.html

Information about the changes and the strategy to address any hazards then has to be effectively communicated to everyone who is potentially affected. Formal worker representation on committees provide employers with trained and dedicated personnel to address these concerns.

Effective Worker Participation – The Evidence

In order to explain what makes worker participation effective, it is important to understand that workers participate in two different capacities:

1. As a representative.

When a worker participates in a hazard assessment, he or she is often doing so on behalf of other workers. The report that is done and actions to be taken are provided to other workers doing similar work or who are similarly affected. These workers will rely on the report to do their job safely. In this way, the



worker is acting as a representative of those other workers. Research shows that effective worker representation in OHS has certain characteristics:

Knowledge activism

There are many studies which show that worker representation can be effective in improving health and safety. A recent review conducted in Ontario examined studies that showed workplace improvements through worker representation,

Knowledge activism is a form of activism by worker health and safety representatives that is organized around the strategic collection and tactical use of technical, scientific and legal knowledge.

From Hall et.al. Making a Difference.

especially in unionized workplaces and through joint committees. ¹² Two recent studies in Ontario examined the characteristics of successful worker representatives. They confirmed that those workers who approach their task with a broad perspective about hazards and strategically utilize technical, scientific and legal knowledge are more

successful in making improvements and on a broader range of issues than those with a narrower focus. ¹³ Key resources include worker-centered and delivered training and access to occupational health clinics.

These representatives do not just focus on immediate technical risks. Successful representatives consider underlying factors, potential risks to health, work organization, and systemic hazards. The first study involved detailed interviews with 27 worker OHS representatives from 27 auto related companies in southern Ontario. The second study involved a survey of 888 worker OHS representatives from a broad range of sectors across the province and in-depth interviews with 52.

Experience and knowledge

The desire to gain more experience and knowledge are two key elements of a successful worker representative. Hazard assessment is not just about bringing your experience to the process. The experience of other workers contributes to a fuller and more coherent picture of both the work being done and the hazards to which workers are exposed.

Successful participation in hazard assessment also requires building knowledge about the process of assessment itself. The more involvement in the process, the more this experience is developed.

Gaining knowledge is not just about listening and relying on what you are told. The research shows that successful worker representatives need access to independent information in order to substantiate their views with management.

Having gained knowledge, successful worker representatives pass on their knowledge to other workers through training and practice.

Peer support is widely recognized as an important component to success in any endeavor. Access to co-workers and to other worker representatives through

training opportunities, conferences or online provides support and encouragement.

You have to get people to buy into it and why they need to do it and explain it. So therefore you need to educate yourself.

Worker representative

Motivation

Not everyone wants to be more in-

volved in the workplace beyond than what is necessary to do their job. The big barriers are time and money. Workers often see involvement in hazard assessment as an additional burden to an already heavy workload for which they do not get paid. Many worker OHS representatives spend much of their own time to get the job done properly. Without some financial recognition and allowances regarding the rest of one's job, it is hard to sustain the motivation to be involved.

Confidence

With knowledge and experience, a worker becomes more confident in representing the concerns of all affected workers and not just those of her or himself.

How employers respond to workers' concerns has a major impact on any worker's confidence. Strong differences of opinion can arise and, since the consequences can affect people's lives, those different opinions can be strongly held. Workers have the right to protect their health and safety as well as the duty. How differences are managed is a real test of the employer's commitment to health and safety and of the worker representative's confidence. Employers who are dismissive or discipline workers for speaking up undermine workers' confidence. Barriers are created that take a long time to take down.

Workers who see that concerns are being addressed have more confidence that their involvement can make a difference. This encourages more workers to be engaged with health and safety.

Importance of the issue

One way in which an employer demonstrates their commitment to worker participation in OHS is by supporting formal processes through which workers participate. Representative meetings, joint committees and full-time elected worker OHS representatives can facilitate effective representation.

A lot of people become health and safety reps either because they see a need or something just happens and they've had enough and they want to deal with it.

A worker health and safety representative

Formal processes can lead to bureaucratization if the worker representatives become just part of management's team and forget their responsibility to workers. Practices that encourage worker representatives to engage their co-workers can help counteract the effects of bureaucratization. Those worker representatives who practice knowledge activism tend to spend less of their time in



Worker representatives who distributed their time across a broader number of activities and those who spent more time on engaging workers and managers, reported significantly more attempts to make changes in their workplaces overall and in terms of a range of specific types of changes, both complex (major new ventilation system) and traditional (housekeeping). These representatives, which we refer to as knowledge activists because of their greater involvement in research and education, also reported significantly more positive impact overall and greater success in some specific change efforts.

The factors that came out as significant to overall success by representatives were the amount of experience on the committee, the amount of paid time allotted to representation activities, being the worker co-chair of the joint committee, the amount of time training workers, and the level of management commitment to health and safety.

LOARC Making Participation Work in the New Economy Participant Report

meetings and more time talking to workers and the employer and training other workers.

2. As an individual.

For most workers, participation in health and safety is directly related to doing their job. Every worker needs to be aware of and confident to report potential hazards. Hazard assessment may be required as part of the job. The results of a hazard assessment may be provided which directly affects the performance of a worker's job.

As we have already seen and instinctively know, the threat of discipline is the most regressive thing that an employer can do, guaranteed to discourage reporting and undermine worker participation.

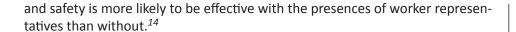
Workers observe management practice health and safety

The beginning point of successful worker participation in hazard assessment is management's practice of health and safety. Workers who observe their employer not practicing good health and safety or disparage concerns are not going to be encouraged to raise concerns or suggestions. Those workers who are experiencing serious enough concerns will be pressured to take action such as contacting an OHS inspector.

Safety signs, safety bingo and bonus programs which trivialize safety and give prizes encourage workers to overlook much of what is going on in order to get along.

Workers who observe management's involvement in health and safety as a serious endeavor by their actions and practices are more likely to follow the same actions and practices.

Formal arrangements – regular meetings, elected and paid worker representatives, training, routine practice and follow up – reinforce a perception of management's commitment. A 2009 survey by the European Agency for Safety and Health At Work of nearly 36,000 interviews with managers and health and safety representatives suggests that direct participation of workers in health



Educated about the hazards

Most job training is still not providing the education necessary to enable workers to successfully participate in hazard assessment and control. At best, training is provided to address only specific circumstances related to a specialized task or operation.

Effective participation requires adequate training and information, opportunities to investigate and communicate with other workers, and channels for dialogue with management about existing problems and planned changes. ¹⁵ The more of these features that exist in a workplace, the more worker participation is a meaningful influence on hazard detection and abatement. ¹⁶

High-engagement training is linked to greater knowledge acquisition, better safety performance and a greater reduction in injuries. ¹⁷ High-engagement (or active) learning methods incorporate dialogue, reflection, feedback and action into the training. This degree of engagement allows trainees to infer causal and conditional relationships between actions, the environment and outcomes as well as learn from mistakes. This changes how workers think and act, especially in novel situations. ¹⁸ By contrast, low-engagement training typically focuses on information transmission via lectures, and written and video material with little social support to reinforce training. For example, significant questions exist about the effectiveness of online safety training due to its tendency towards passive, rather than active, learning. ¹⁹

Health and safety training developed independently and with the support of

organized labour has shown itself to be effective in many jurisdictions where funding support comes from the workers compensation board²⁰ or directly from government.²¹ Based on popular and adult education princi-

Interviewer: How do you see your role as a worker rep? Worker representative: It is to protect the worker and educate the worker.

ples and developed from the standpoint of workers, this approach to training seeks to provide workers with the right combination of training and practice to promote the confidence to be useful when given the opportunity to take part. Experienced workers are trained as instructors. Practical and relevant training delivered by peers provides an incentive for participation.

The time to do the job safely

Having the time to do the job safely has become one of the biggest challenges to worker participation. Increasing workloads and competition along with decreasing wages and job opportunities make it very difficult for workers to participate very much if at all. In some cases, just trying to do the job safely is a challenge.

This challenge is worsened when employers have poor or ineffective procedures to enable workers to participate. Workers who do not get paid to do a hazard assessment are less able to do a successful job. Contracts or work plans that do not



factor in the time and circumstances necessary to do a good hazard assessment encourage, at best, cursory participation.

Regulation of hours of work and its impact on OHS is very weak despite the strong evidence that long hours of work along with low pay increases the risk of injury, illness and disability.

Mentored by supervisors and co-workers on how to work safely

Support at work has long been recognized as a key factor in improving worker participation, especially for less experienced workers. Mentoring by more senior workers and supervisors provides the basis for how a worker applies the training she or he has received to do the job. Effective mentoring is linked to the employer's overall attitude to health and safety.

Confidence

The confidence that a worker has to participate is directly proportional to the practice of the employer. If a worker believes that his or her comments will be dismissed, disregarded or lead to discipline, she or he is not going to participate except in a very limited and self protective way.

This can lead to the creation of a "false confidence." After all, if the employer doesn't think there is a problem, who am I to disagree?

Support from co-workers, a supervisor or an inspector can encourage a worker but in the end, unless the inspector takes action, the employer's conduct will be the determining factor.

Strategies for improving Worker Participation in OHS

In 2012 the European Agency for Safety and Health at Work published a review of worker participation.²² The authors examined 161 case studies from across the European Union. This review was part of a larger campaign to promote leadership and worker participation in health and safety across the EU.²³

What are opportunities in large workplaces?

Surveying the 161 case studies in the EU study showed that the following are most frequently employed means of worker participation:

- Work-teams (Including such activities as: meetings to discuss analysis results and analysis method solutions; trials to test teams' proposals; team presentation of ideas to management)
- Surveys
- Workers' council (a form of representative committee)
- Local steering committee
- Interviews -worker representatives, workers in general
- Testing
- Workshop sessions
- Project evaluation questionnaires
- Staff representative survey
- Health circle meetings

Over 50 different strategies in total were used in. Many of the cases only provided consultation rather than involvement required by the Alberta Code. Surveying the 161 cases, it appears that 43 (26.7%) could be said to be only consultative while 118 (73.3%) have at least one major participatory aspect.

A wide range of hazards were addressed:

- 39 High accident risk/frequency, physical danger
- 31 Mental strain, stress or burnout
- 28 Musculo-Skeletal Disorders
- 12 Multiple psychological and/or physical risks
- 12 Chemical hazards
- 12 Physical strain
- 9 Health/lifestyle risk
- 8 Violence, bullying, intimidation, and harassment
- 8 Noise
- 7 Psychosocial risks
- 7 Youth specific accident risk
- 3 Work-life balance
- 3 Disadvantaged groups specific risk (i.e. the temporary unemployed, under privileged, immigrants and part-time students)
- 2 Addiction
- 2 Gender risks
- 2 Older worker specific risk
- 1 Fatigue
- 1 Physical violence
- 1 Mental intimidation or violence

It is not possible in this guide to list all the different examples.

What are the possibilities in small workplaces?

Small employers and self-employed and contract workers face major systemic barriers to successful worker participation in hazard assessment. To summarize, little time, resources and support are available. In addition, relationships between workers and management are often much tighter. A disagreement, accident or injury can fracture a previously strong working relationship and create bitter enmity from which there is little escape.²⁴ As one job ends, the prospect of being hired on for the next is often uncertain.

In some trades and occupations, OHS training is a core competency for certification. More and more colleges now offer OHS training as an option. The effectiveness of this approach is questioned by those who argue training at work is a critical element to successful practice.

Sub-contractor relationships are governed by health and safety laws which require the owner or prime contractor to take responsibility for the health and safety practices of sub-contractors on-site. Sub-contracted relationships which are not on-site are sometimes governed by what are called supply chain rules.



Similar in principle to the on-site responsibilities, the head of the supply chain holds some responsibilities for the health and safety practices of its suppliers.

In both cases, similar structures and strategies to those described above can be utilized as long as they allow for representation from the different sub-contractors or suppliers involved. Groups of similarly situated sub-contractors and suppliers may consider developing common practices respecting health and safety and hazard assessment in order to reduce transaction costs.

Contracted relationships could include provision of resources and support from the prime contractor who usually has them or the money to support them. This could include assistance with worker participation. Sweden has experimented with roving worker OHS representatives, where experienced worker OHS representatives were funded to assist workers of employers in a particular area.

More often, workers in these circumstances have to rely on advice from consultants and inspectors.

Some jurisdictions provide funding, often through the workers' compensation system, for worker health and safety training and occupational health clinics. Temporary agency workers are confronted by the major problem of working in environments that are not controlled by their employer.

Enforcement

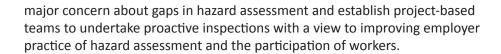
Effective enforcement makes the difference between poor and good worker participation. If poor employers believe there is no risk to ignoring worker participation requirements or to doing the bare minimum, then good employers are at a competitive disadvantage. It is important that enforcement of worker participation is both done and seen to be done.

The most effective employer incentives are inspectors, orders and penalty assessments. Using these tools to improve worker participation requires a strategy, encouragement and a consistent practice. Having identified the barriers and opportunities to participate, it is necessary for inspectors to play a strategic role in protecting workers while encouraging employers to better practice.

Strategy

Research shows that enforcement has basically three strategies – proactive, reactive and voluntary. Proactive strategies build on information – complaints, claims, concerns, research – and target particular sectors and employers for inspections. When an individual complaint is raised, a proactive investigation will determine if there are other concerns as well. Reactive strategies are much more limited and respond only to the complaints that are made and address only the complaint. Voluntary strategies rely on good will. Not surprisingly, the overwhelming evidence is that proactive strategies are the most effective in addressing concerns of more workers at lower cost. ²⁵

Based on complaints, survey data or other low cost information sources, the inspectorate should identify sectors and circumstances where there would be



Encouragement

When worker participation was first established across Canada (and most of the world) in the 1970s, inspectors established working relationships with workers, especially worker OHS representatives, to help them identify concerns and to

promote internal co-operation. Communication with inspectors by workers was encouraged. Inspectors promised and guaranteed confidentiality. This encouragement promoted effective worker participation.

The Occupational Health and Safety Act s 36

No person shall dismiss or take any other disciplinary action against a worker by reason of that worker acting in compliance with this Act, the regulations, the adopted code or an order given under this Act, the regulations or the adopted code.

The encouragement of worker participation by inspectors has declined substantially over the last three decades and needs to be reinvigorated. This is particularly clear when it comes to the prevention of reprisals.

Reprisals

Reprisal – disciplining or firing a worker for raising a health and safety concern, talking to others about the concern or talking to an inspector - has a devastating impact on worker participation. A reprisal can be direct and indirect. It can involve a termination or discipline. A reprisal may take the form of a reassignment, petty harassment or threats. The law is very clear that reprisals are not permitted. The effectiveness of the law is dependent on the strategies that inspectors use to enforce it.

A proactive strategy by the inspectorate to protect workers from reprisals is needed. Orders and prosecutions are required when section 36 of the Occupational Health and Safety Act is violated. The need to resort to these tools will be diminished as employers become aware that there are consequences to violating the law.

Consistent Practice

Along with a proactive strategy and rebuilding the confidence of workers, the inspectorate must develop a consistent practice of enforcement. This can be achieved by providing employers with clear examples of unacceptable behaviour and recommended practices.

Provided in our Resource Documents are checklists for both worker representation and worker participation developed by the European Agency for Safety and Health at Work in 2012 as a result of the case studies they evaluated.²⁶ Examples like this will give employers a clearer understanding of their responsibilities and the basis upon which the inspectorate can write orders.



Endnotes

- 1. J. Eakin. "Towards a 'standpoint' perspective: health and safety in small workplaces from the perspective of workers." *Policy and Practice in Health and Safety* 8, no 2 (2010): 113-126.
- 2. A. Culyer, B. Amick III and A. Laporte. "What is a little more health and safety worth. In Economic Evaluation of Interventions in Health and Safety: Developing Good Practice, edited by E. Tompe, A. Culer and R. Dolinski. Oxford University Press, 2008.
- 3. To correct the sample, Vector Research weighted the data by gender and other known characteristics of the province's labour force. With a sample size of 2,000, one can say with 95% confidence that the overall results have a sampling error of plus or minus 2.2 %. Other tests have been conducted to ensure that the sample reflects the characteristics of the entire population.
- 4. A. Saha, T. Ramnath, R. Chaudhuri and H. Saiyed. "An accident-risk assessment study of temporary piece rated workers." *Industrial Health* 42 (2004): 240–245; K. Bender, C. Green and J. Heywood. "Piece rates and workplace injury: Does survey evidence support Adam Smith?" *Journal of Population Economics* 25, no. 2 (2012): 569-590.
- 5. C. Mayhew, M. Quinlan and R. Ferris. "The effects of sub-contracting/outsourcing on occupational health and safety: Survey evidence from four Australian Industries." *Science Safety* 25, no. 1-3 (1997): 163-178.
- 6. R. Agraz-Boeneker, W. A. Groves and J. M. Haight. "An Examination of Observations and Incidence Rates for a Behavior Based Safety Program." *The Journal of SH&E Research* 4, no. 3 (2007): 1-22..
- 7. Kim Vicente. The Human Factor. Knopf Canada, 2003.
- 8. Only 29% of those in workplaces with less than 20 employees observed hazard assessment take place compared to 41% overall.
- 9. J. Kish-Gephart, J. Detert, L. Trevino and A. Edmondson. "Silenced by fear: Psychological, social, and evolutionary drivers of voice behavior at work." Research in Organizational Behavior 29 (2009): 163–193.
- 10 T. Aven and B. Heide. "Reliability and Validity of Risk Analysis,." Reliability Engineering and System Safety 94, (2009): 1862–1868
- 11. J.R. Malchaire. "The SOBANE risk management strategy and the Déparis method for the participatory screening of the risk." *Int Arch Occup Environ Health* 77, no 6 (2004): 443-450.
- 12. Labour Occupational Clinics and Academic Research Collaboration (LOARC). Internal Responsibility: The Challenge and the Crisis, 2010.
- 13. A, Hall, A. Forrest, A. Sears and N. Carlan. "Making a Difference: Knowledge Activism and Worker Representation in Joint OHS Committees." *Relations Industrielles/Industrial Relations* 61, no. 3 (2006): 408-406; A. Hall, W. Lewchuk, S. Naqvi, J. Oudyk and A. King. "LOARC Making Participation Work in the New Economy." WSIB RAC report (in draft).
- 14. European Agency for Safety and Health At Work, 2009. "Enterprise Survey On New And Emerging Risks (ESENER)." Available at https://osha.europa.eu/en/esener-enterprise-survey.
- 15. D. Walters and K. Frick. "Worker participation and the management of occupational health and safety: Reinforcing or conflicting strategies?" In *Systemic Occupational Health & Safety Management: Perspectives on an International Development* edited by K. Frick, P. Langaa, M Quinlin and T. Wilthagen, 43-66. Oxford: Pergamon, 2000.

Endnotes

- 16. D. Walters. "Workplace arrangements for worker participation in OHS." In OHS Regulation for a Changing World of Work edited by E. Bluff, N. Gunningham, R. Johnstone, 63-93. Sydney: Federation Press, 2004.
- 17. M. Burke, R. Salvador, K. Smith-Crowe, S. Chan-Serafin, A. Smith and S. Sonesh. "The dread factor: How hazards and safety training influence learning and performance." *Journal of Applied Psychology* 96, no. 1 (2011): 46-70.
- P/ Taylor, D. Russ-Eft and D. Chan, D. "A meta-analytic review of behavior modeling training." *Journal of Applied Psychology* 90, no 4 (2005): 692-709.
- M. Burke, S. Sarpy, K. Smith-Crowe, S. Chan-Serafin, R. Salvador and G. Islam, G. "Relative effectiveness of worker safety and health training methods." *American Journal of Public Health* 96, no 2 (2006): 315-324.
- K. Pidd. "The impact of workplace support and identity on training transfer: A case study of drug and alcohol safety training in Australia." *International Journal of Training and Development* 8, no 4 (2004): 274-288.
- 18. B. Bell and S. Kozlowski. "Active learning: Effects of core training design elements on self-regulatory processes, learning, and adaptability." *Journal of Applied Psychology* 93, no 2 (2008): 296–316. N. Keith and M. Frese. "Effectiveness of error management training: A meta-analysis." *Journal of Applied Psychology* 93, no 1 (2008): 59–69.
- W. Hacker. "Action regulation theory: A practical tool for the design of modern work processes." European Journal of Work and Organizational Psychology 12, no 2 (2003): 105-130.
- 19. S. Bahn and L. Barratt-Pugh. "Evaluation of the mandatory Construction Induction Training program in Western Australia: Unanticipated consequences." *Evaluation and Program Planning* 35, no 3 (2012): 337-343.
- R. Derouin, B. Fritzsche and E. Salas. "E-learning in organizations." *Journal of Management* 31, no 6 (2005): 920 –940.
- J. Withers, S. Freeman and E. Kim. "Learning and retention of chemical safety training information: A comparison of classroom versus computer-based formats on a college campus." *Journal of Chemical Health and Safety* 19, no 5 (2012): 47-55.
- 20. British Columbia, Manitoba, Ontario, Quebec, and Newfoundland and Labrador.
- 21. United States, European Union.
- 22. European Agency for Safety and Health at Work. *Worker Participation Practices: A Review Of EU-OSHA Case Studies*, 2012. Available at https://osha.europa.eu/en/publications/literature_reviews/worker-participation-practices-a-review-of-eu-osha-case-studies
- 23. Working Together for Risk Prevention. Available at http://www.healthy-workplaces.eu/en/
- 24. J. M. Eakin. "Leaving it up to the workers': sociological perspectives on the management of health and safety in small workplaces." *International Journal of Health Services* 22, no 4 (1992): 689.
- 25. L. F. Vosko, E. Tucker, M. P. Thomas and M. Gellatly. "New Approaches to Enforcement and Compliance with Labour Regulatory Standards: The Case of Ontario." *Comparative Research in Law & Political Economy. Research Paper No. 31*, 2011.
- 26. European Agency for Safety and Health at Work. *Worker Participation Practices: A Review Of EU-OSHA Case Studies*, 2012. Available at https://osha.europa.eu/en/publications/literature_reviews/worker-participation-practices-a-review-of-eu-osha-case-studies