

Changing Workplaces Review: Speaking Notes for Dr. Penny Sutcliffe (Medical Officer of Health)

Event: Changing Workplaces Review – Minister of Labour, Kevin Flynn

Special Advisors: Mr. C. Michael Mitchell and Judge Murray

Location: Quality Inn and Conference Centre, Sudbury

Date and Time: Thursday, July 23, 2015, 12:40 – 12:50 p.m.

Bonjour – Good afternoon Judge Murray, Mr. Mitchell, Ministry of Labour Staff and other guests.

Merci beaucoup pour l'occasion aujourd'hui de vous adresser la parole à propos d'un sujet qui est critique pour la santé de tous les Ontariens et toutes les Ontariennes. Et bien sûr, bienvenue au Nord de l'Ontario!

Thank you for the opportunity to speak today on this very important issue – which from my perspective is an issue of critical health importance for all Ontarians.

My name is Dr. Penny Sutcliffe. I am a physician specialist in Public Health and Preventive Medicine and I work as the Medical Officer of Health and CEO for the Sudbury & District Health Unit – an organization with over 250 employees and two unionized groups.

In addition to my thanks to you, I would like to very sincerely applaud the Minister of Labour, Mr. Flynn, Ministry staff and the provincial government for undertaking this review and the regional engagement process. This Review is sorely needed and I applaud its objective to improve security and opportunity for those made vulnerable by the structural economic pressures and changes being experienced by Ontarians. Kudos.

I hope to make good use of my short time with you – I hope that my comments will be helpful to your deliberations.

So why does a public health physician wish to present to the Changing Workplaces Review? I care very much about this Review because workplaces are a critical determinant of individual, community and population health. My comments are framed by this perspective – I am not a labour relations expert, nor do I have a legal background. However, I do understand the vital relationships between work (and the nature of work) and health.

My “patient” is the nearly 200,000 people who live in the City of Greater Sudbury and the districts of Sudbury and Manitoulin. We deliver provincially mandated public health programs and services to prevent disease and promote health – ultimately to reduce people’s need for health care.

Central to the health of area residents (and all Ontarians) is the workplace. The health promoting or health damaging nature of workplaces impacts all workers, their families, neighbourhoods, communities, and society.

Within our public health work, we see directly the health impacts of precarious employment.

Take for example the food handler who goes to his part time, minimum wage job while ill because he has no sick benefits ... a single case of hepatitis A in an ill food handler precipitates a resource intensive public health response... such an incident in my health unit recently involved over 2,000 hours of staff time. The restaurant also closed for a short period, meaning that everyone lost out.

Another example from public health involves a new mother who has to choose between working her part time shift at the corner store and staying home with her sick child who can’t go to daycare. Choosing between making a living and providing her child with the necessary care. Why? Because her workplace doesn’t allow her emergency leave and she is worried about losing pay and risking dismissal.

As public health practitioners, we work with these vulnerable populations. We work to understand the needs of this population – I am leaving with you an example of this work, a summary of our Working Poor Project. We also work with partners in policing, education, social services and others to mitigate the health and societal damages of precarious and unemployment.

So my overall perspective is that a healthy workforce is essential for a healthy, productive economy. In order to have a healthy workforce, we need health-enhancing and health-protecting workplaces.

How do we create this? I have a few ideas that are framed around the issues raised in the Consultation Guide.

The WHO definition of a Healthy Workplace is one in which workers and managers collaborate to use a continual improvement process to protect and promote the health,

safety and well-being of workers and the sustainability of the workplace by considering the following:

- health and safety concerns in the physical work environment;
- health, safety and well-being concerns in the psychosocial work environment including organization of work and workplace culture;
- personal health resources in the workplace; and
- ways of participating in the community to improve the health of workers, their families and other members of the community.

The Consultation Guide asked an overarching question about values, goals and objectives to guide the thinking of the review. I would strongly urge that any proposed changes to the LRA and ESA be subject to “healthy workplace impact assessment” – meaning that all proposed changes should be carefully assessed to determine if they might be expected to improve the health of the workplace using this WHO definition. Clearly any legislative changes that would for example improve worker engagement, sense of ownership and control, job security, and flexibility to meet life’s demands would be health enhancing.

Regarding more specific recommendations, I would offer the following from a public health perspective:

1.Supporting the principle of worker control and engagement as part of a healthy workplace, we know from health studies of demand-control models that increased demand and limited control in the workplace is related to increased risk of many adverse health outcomes including CVD, obesity, MSK and mental health disorders. Workers do not merely need the possibility of being able to “voice” or identify concerns in the workplace, they need to engage in meaningful processes in which they have effective influence to create constructive change and culture and to address and seek resolution of concerns. Workers need laws that protect and facilitate their right to unionize and to exercise the rights of collective bargaining and collective action. Other jurisdictions have successfully adopted collaborative engagement models such as participatory worker-employer councils, fostering more mediation or alternate dispute resolution approaches.

2.Supporting the principles of flexibility and psychosocial and physical health, changes that would promote parity should be considered very seriously: There should be no differential treatment in pay, benefits and working conditions for workers who are doing the same work but are classified differently, such as part-time, contract, temporary, or casual. Coverage for employment standards should be expanded to more workers. There are variations of such parity provisions throughout the EU with laws that ask

employers to give temporary or contract workers the same pay, vacation and benefits as permanent employees doing the same jobs.

3. From a psychosocial health perspective, I strongly agree with recommendations of others to amend the ESA to repeal the exemption for employers of 49 or less workers from providing emergency leave. All workers, regardless of the size of the business, should have the right to emergency leave or unexpected absences.

4. From physical and psychosocial health perspectives, all employees should be entitled to a paid sick time. I won't make specific recommendations but am aware that others have made specific comments. The principle is that employees' health must be protected and we must create circumstances in which employees are not putting themselves, co-workers or patrons at risk. The review committee will be aware of the benefits of sick leave that are backed by much evidence of positive outcomes, including addressing the issue of productivity losses associated with presenteeism.

5. Vacations are important for physical and mental health and there is increasing evidence that they are good for productivity and the economy. Vacations help address absenteeism – reducing stress and enabling workers to deal with life's personal matters outside of work hours. Enhancing minimum vacation entitlement from the current two week duration would be health (and productivity) enhancing. (Australia, New Zealand and the EU all have at least double Ontario's minimum entitlement. Ontario ranks with Haiti.)

6. From a health care sustainability perspective, I recommend that the ESA be amended to limit employers from requiring evidence from a worker to entitle them to personal emergency leave or paid sick days. The Ontario Medical Association discourages requiring sick notes. This is a health system sustainability issue and a concern of disease transmission to others.

7. I strongly support the key objectives of employment relationships as described in the consultation guide: those of efficiency, equity and voice. These are consistent with the definition of a healthy workplace which includes the concept of sustainability of the workplace. The review should be guided by the principle of decency and ensuring decent work as described by the ILO.

8. Finally, I would like to put a word in for the importance of creating better training opportunities for those in precarious employment. I would also like to emphasize the importance of systematic evaluation and monitoring of the health impacts of any recommended ESA and LRA changes.

The Changing Workplaces Review is occurring within the context of several exciting provincial government initiatives including the Poverty Reduction Strategy, the Mental Health Strategy and health system transformation that has health equity at its heart. Within health, the Minister's mandate letter includes working to expand health benefits to low income Ontarians, and Ontario is engaging with others to explore the concept of

universal pharmacare. There is arguably a policy window to make positive changes for the Ontarians who need them the most.

Many eyes are on you – on this review – and the expectations and hopes are high – but with that, many minds are working hard to provide you with the best and most practical advice to indeed make our Ontario a place where the changing workplace landscape is transformed into an opportunity that benefits all Ontarians.

Thank you for this opportunity to provide comment. I would be pleased to engage further with the Review staff if at any time you would like to contact me.

Merci beaucoup!

#### References

Bambra, C. (2011, November 25). Work, worklessness and the political economy of health [Video file]. Retrieved July 22, 2015 from <https://www.dur.ac.uk/wolfson.institute/clarebambra/>

Block, S. (2015). A higher standard: The case for holding low-wage employers in Ontario to a higher standard. Retrieved July 22, 2015 from [https://www.policyalternatives.ca/sites/default/files/uploads/publications/Ontario%20Office/2015/06/Higher\\_Standard.pdf](https://www.policyalternatives.ca/sites/default/files/uploads/publications/Ontario%20Office/2015/06/Higher_Standard.pdf)

Burton, J. (2010). WHO healthy workplace framework and model: Background and supporting literature and practices. Retrieved July 22, 2015 from [http://www.who.int/occupational\\_health/healthy\\_workplace\\_framework.pdf](http://www.who.int/occupational_health/healthy_workplace_framework.pdf)

European Commission. (2015). Flexicurity. Retrieved July 22, 2015 from <http://ec.europa.eu/social/main.jsp?catId=102>

Fitzpatrick, T., Rosella, L. C., Calzavara, A., Petch, J., Pinto, A. D., Manson, H., Goel, V., & Wodchis, W. P. (2015). Looking beyond income and education: Socioeconomic status gradients among future high-cost users of health care. *American Journal of Preventive Medicine*, 49(2), 161-171.

Gellatly, M. (2015). Still working on the edge: Building decent jobs from the ground up. Retrieved July 22, 2015 from [http://www.workersactioncentre.org/wp-content/uploads/dlm\\_uploads/2015/04/StillWorkingOnTheEdge-Exec-Summary-web.pdf](http://www.workersactioncentre.org/wp-content/uploads/dlm_uploads/2015/04/StillWorkingOnTheEdge-Exec-Summary-web.pdf)

Institute for Work & Health. (2015). Research impact case studies. Retrieved July 22, 2015 from <http://www.iwh.on.ca/impact>

International Labour Organization. (2015). Decent work agenda. Retrieved July 22, 2015 from <http://www.ilo.org/global/about-the-ilo/decent-work-agenda/lang-en/index.htm>

Ministry of Labour. (2015). Changing workplaces review: Guide to consultations. Retrieved July 22, 2015 from [http://www.labour.gov.on.ca/english/about/pdf/cwr\\_consultation.pdf](http://www.labour.gov.on.ca/english/about/pdf/cwr_consultation.pdf)

Noakes, S. (2015, April 29). Secure jobs in short supply in Canada's new tough labour market. Retrieved July 22, 2015 from <http://www.cbc.ca/news/business/secure-jobs-in-short-supply-in-canada-s-new-tough-labour-market-1.3050449>

Poverty and Employment Precarity in Southern Ontario. (2015). PEPSO. Retrieved July 22, 2015 from <http://pepso.ca/>

Social Research and Demonstration Corporation. (2013). Employment programs. Retrieved July 22, 2015 from <http://www.srdc.org/policy-areas/employment/employment-programs.aspx>

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