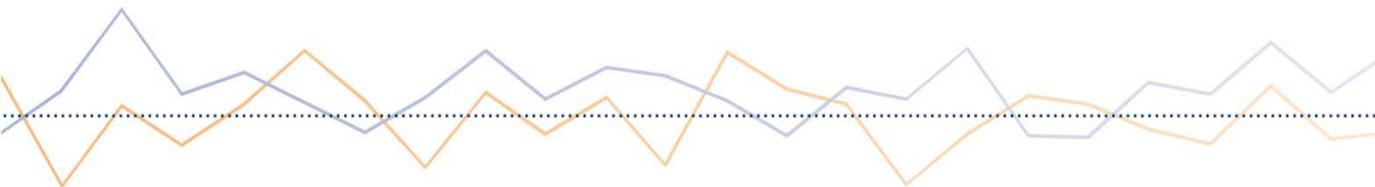


# Automotive Repair Industry Stakeholder Consultations

## Summary Report

*Presented to:*  
**WorkSafeNB**

Corporate Research Associates Inc.  
November 2017



## Background

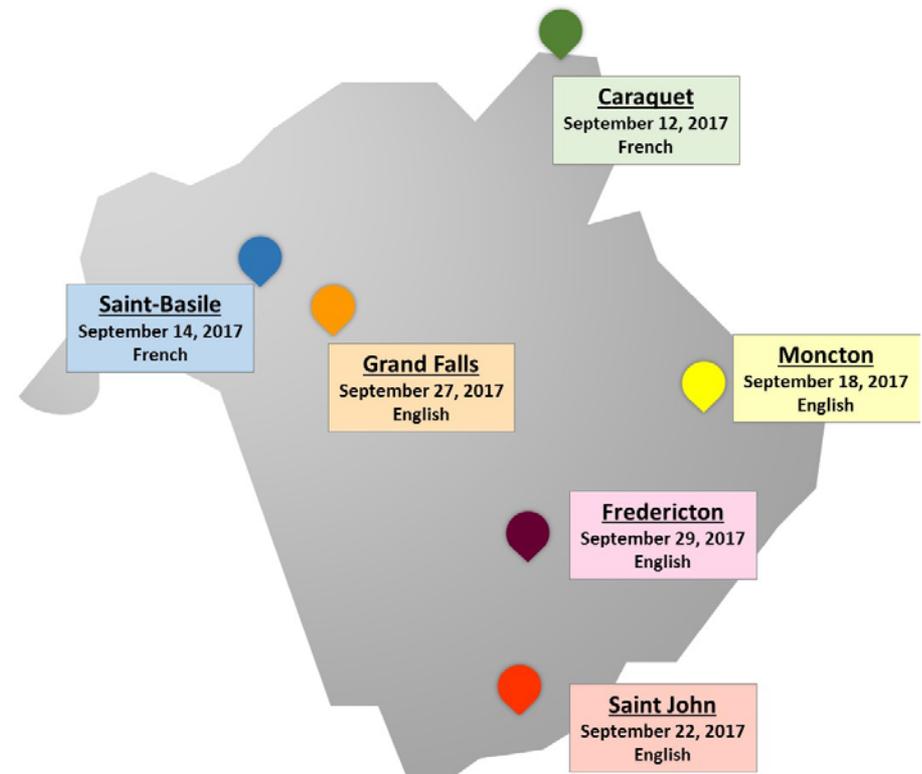
In an effort to pursue its safety goal, WorkSafeNB has established a strategy to collaboratively work with high risk industries. Based on data analysis, the automotive repair industry has been identified as a high-risk sector, demonstrated by the severity and frequency of injuries and fatalities. To help develop its industry-specific strategy, WorkSafeNB was interested in feedback from stakeholders in the automotive repair industry on key components they believe can contribute to safety improvements. With this goal in mind, a series of industry consultation sessions were scheduled across the province.

## Methodology

WorkSafeNB commissioned Corporate Research Associates Inc. (CRA) to facilitate six stakeholder consultation sessions. The illustration on the right provides details on each session, which lasted approximately three hours. Just over 75 stakeholders participated across all locations.

WorkSafeNB was responsible for the invitation and scheduling of participants, as well as logistical arrangements, while CRA facilitated the sessions. During each session, WorkSafeNB shared information about the initiative and industry statistics before receiving stakeholders' feedback. This report presents a summary of the feedback collected during the stakeholder consultations.

## Automotive Repair Industry Consultations



Findings from the **Automotive Repair Industry Consultations** reveal that stakeholders who took part in the sessions welcome the idea of an industry-specific plan to improve health and safety in their industry. WorkSafeNB presented an overview of the industry including an injury analysis and the stakeholders present indicated that it reflected their own observations in terms of the types and severity of injuries, occupations, and age. Stakeholders felt that older employees tend to be more complacent and overconfident than younger employees, leading to more workplace injuries. At the same time, older employees are more prone to report injuries, perhaps explaining the proportion of injuries within this age group. The larger proportion of injuries reported early in the week and during the months of April, May, and November aligned with workload.

The most common event exposure (contact with object or equipment, bodily motions, slips, trips, falls) appeared realistic to stakeholders, though it was anticipated that injuries resulting from noise exposure will increase, as age and cumulative damage affect workers. Likewise, the data showing the proportion of injuries by body part elicited little surprise. Finally, data on the type of injury reported and the source of injuries held no surprises for stakeholders.

Stakeholders concurred that unsafe work practices, lack of training, inadequate on-the-job training, lack of supervision, lack or misuse of personal protective equipment (PPE), absence of monthly employer inspections, lack of hoist inspection coordinated by employers, and missing guards on grinders, compressors and other equipment were factors that contributed to workplace injury. In addition, they felt that many other factors increased the incidence of workplace injury. These included poor organizational culture, workload volume at peak times, the industry's task-based pay and performance-based compensation practices, unclean or untidy workplaces, improper equipment maintenance, workplace distractions, and employee behaviours.

While there is support for change to happen within the industry, stakeholders believe that this will be challenged in a number of ways, notably the industry's employee compensation and fee structure, employee attitude and resistance to change, organizational culture, and the cost of implementing health and safety measures or training.

Stakeholders identified a number of priority areas to improve the health and safety situation within the industry. The establishment and enforcement of standards and stronger legislation for the manufacturing of safer tools and equipment were seen as good steps to build on. Ongoing education and training of management and employees were also seen as paramount in this process. At the same time, the need was expressed for greater focus on incident prevention within the workplace, increased employee engagement in the process and accountability, and improved employer support from WorkSafeNB.

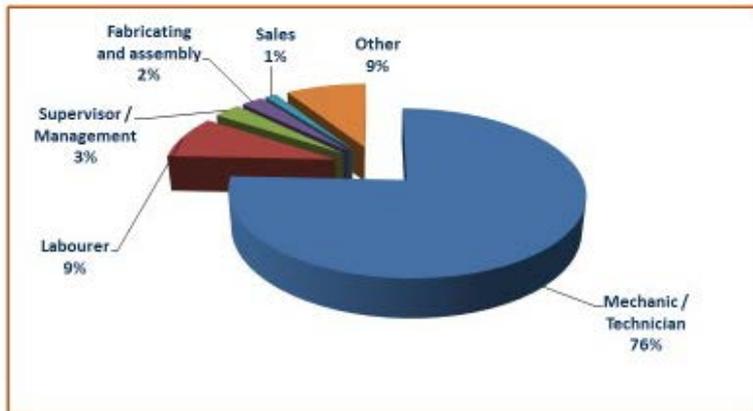
**WorkSafeNB's assessment of the automotive repair industry is generally reflective of stakeholders' own observations in terms of the types and severity of injuries.**

Stakeholders were first asked to comment on the results shared by WorkSafeNB regarding the current state of the industry in terms of the types and severity of workplace incidents and injuries. The information presented combined data from 2012 to 2016. For the most part, the statistics shown were reflective of stakeholders' own observations.

The following pages provide an overview of reactions for each of the data slides shared with stakeholders.

The level of injury by occupation and age was seen by stakeholder as reflective of the workforce profile. The proportion of injury among the 46-55 year-old group was explained by their higher proportion of the workers in the industry, complacency, overconfidence, and a higher likelihood of reporting incidents.

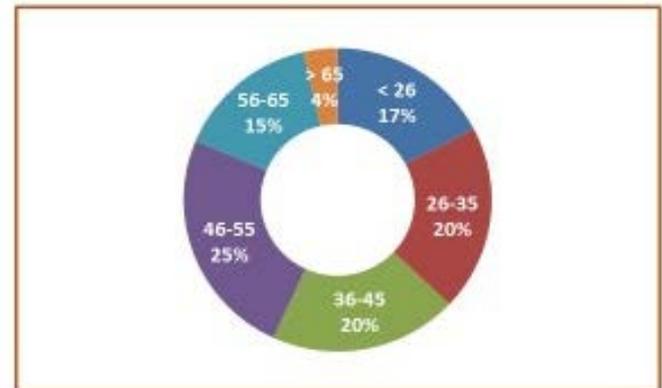
## GARAGE INJURIES – OCCUPATION



- The breakdown of injuries by occupation appeared realistic to stakeholders, and largely representative of their workforce profile.

- In terms of the breakdown of injuries by age, a number of hypotheses were shared to explain that 25 percent of all injuries happened to employees between the ages of 46 and 55. Some felt this was simply reflective of a higher proportion of employees in this age range. In addition, complacency and overconfidence leading to bad habits and ‘shortcuts’ were identified to explain this level of injury while there was also a perception that younger workers have the most recent training in the safe use of equipment. It was mentioned that younger workers may not report all incidents whereas older workers would want a record of an incident in case it develops into something more serious later.

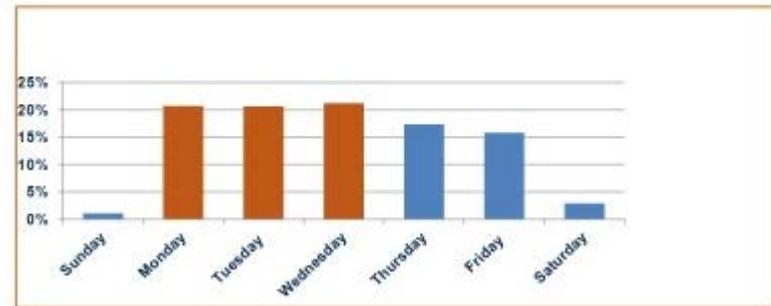
## GARAGE INJURIES – AGE



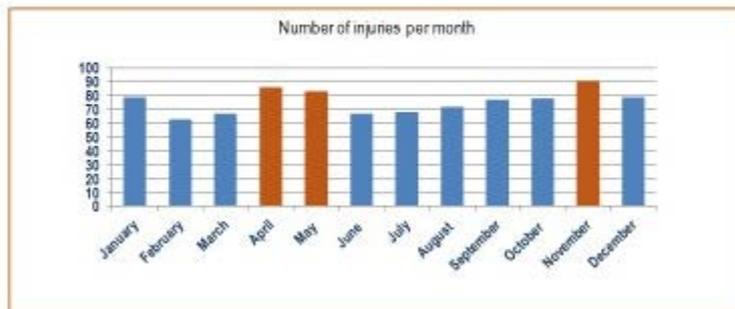
Work volume was viewed by stakeholder as the primary reason workplace incidents happen on select days, while peaks during certain months coincide with the change of season.

- Stakeholders were not surprised by the graph depicting the injuries by day of the week. Indeed, they indicated that the workload is higher at the beginning of the week, and that larger jobs are often scheduled during that timeframe to ensure they are completed by the end of the work week.

## GARAGE INJURIES – DAY OF THE WEEK



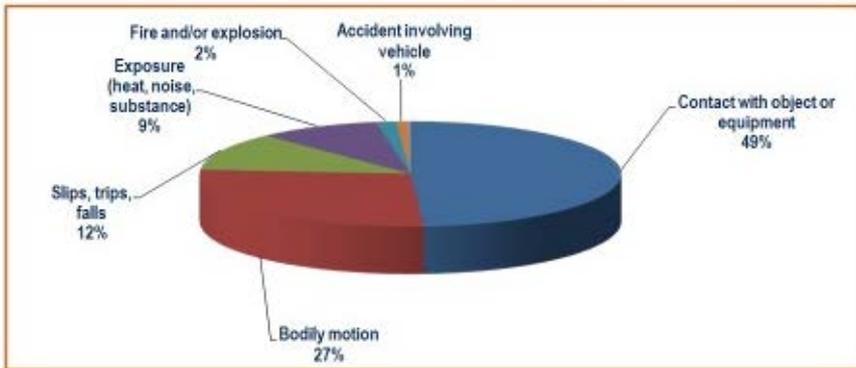
## GARAGE INJURIES – MONTH OF THE YEAR



- In terms of explaining the peak injury months of April, May and November, it was commonly suggested that these months coincide with the change of season maintenance, notably switching tires. As such, workload increases and so does the risk of incidents. During peak times, some garages also hire temporary employees whose experience with workplace safety may not be as strong as their regular workforce. It was also mentioned in a few instances that vacations are more common during the months of February, March, July, and August, in part explaining the lower levels of workplace injuries.

While stakeholders indicated that the data related to event exposure and body parts injured reflects the current situation, they believe that ear/hearing injuries are bound to increase with increasingly noisy workplaces and as cumulative damage impacts people as they age.

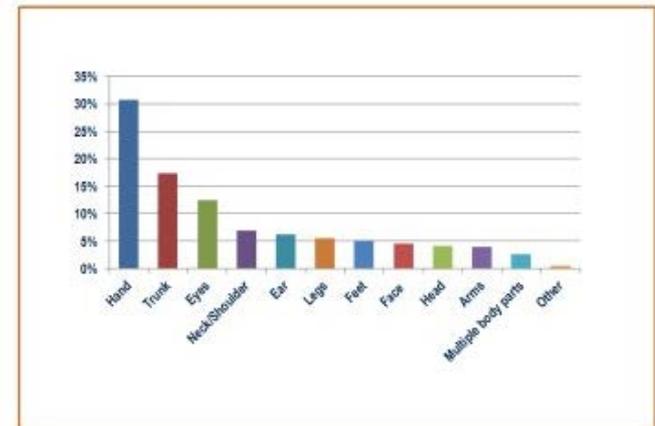
## GARAGE INJURIES – EVENT EXPOSURE



- The level of injury by event exposure appeared realistic for the most part.

- Stakeholders were not surprised to see that most of the workplace injuries involve the hands and trunk, given that these are the most commonly used body parts when performing tasks. Eye injuries being the third most common body part injured was not surprising either, given that eye protection is not always used and many of the PPE does not provide full coverage of the eye region (e.g., particles can reach the eye through the open side. It was mentioned that ear/hearing injuries are bound to increase, given the increasingly noisy equipment used in garages and from past/cumulative damage as people age.

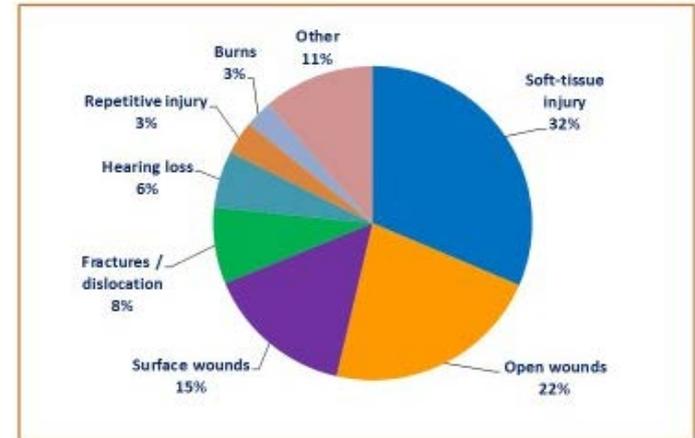
## GARAGE INJURIES – BODY PART



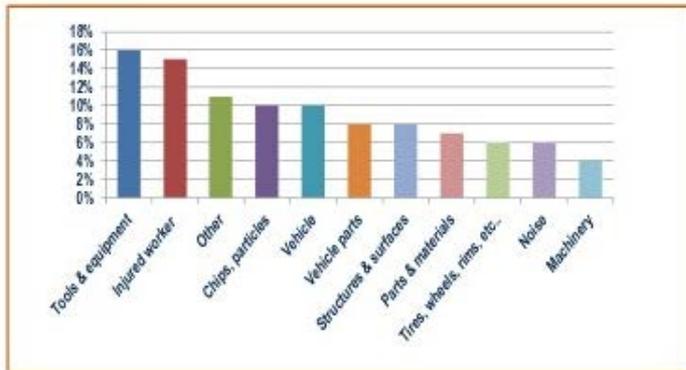
It was widely recognized by stakeholders that soft-tissue injuries and open wounds represent most of the workplace injuries, with the source primarily being tools and equipment and the injured workers' actions/behaviours.

- There was little surprise regarding the breakdown of injuries based on the types. While it was recognized that soft-tissue injuries were most common, a few stakeholders felt these would represent an even higher proportion of injuries than the one-third shown. A few also felt some of those injuries may be included under the “repetitive injury” segment.

## GARAGE INJURIES – INJURY TYPE



## GARAGE INJURIES – INJURY SOURCE



- Stakeholders believed that most injuries involve tools and equipment and the injured workers' actions, as reported. This data mirrored their own observations in the workplace, and presented no surprises, given it aligned with the type of work performed in garages.

In addition to recognizing the contributing factors shared by WorkSafeNB, stakeholders identified other behavioural, environmental and attitudinal factors that increases the risk of workplace incidents.

WorkSafeNB informed stakeholders that incident investigations conducted by their officers revealed a number of contributing factors to workplace injuries in the automotive repair industry, including:

- Unsafe work practices
- Lack of training
- Inadequate on-the-job training
- Lack of supervision
- Lack or misuse of personal protective equipment (PPE)
- Absence of monthly employer inspections
- Lack of/infrequent hoist inspections coordinated by employers
- Missing guards on grinders, compressors and other equipment

While stakeholders concurred with these factors, they believed other elements also contribute to increasing the incidence and/or severity of workplace injury. The most commonly cited included:

- **Organizational culture that does not support health and safety:**  
While some organizations recognize the importance of workplace health and safety, it was mentioned that some do not and, as a result, this poses a risk for employees. For the most part, however, it was believed that a poor health and safety culture was mostly attributed to a lack of awareness or understanding, rather than due to intent.
- **Workload volume at peak times:**  
The nature of the work is variable. The risk of workplace injury increases during peak periods, such as when seasons change and tire changes and seasonal maintenance increase.

- **Task-based fee structure and performance-based employee compensation:**

The industry's task-based fee structure (rather than hourly wages) was deemed as contributing to a culture of performance, often driving employees to 'take shortcuts' to complete their task on time. This task-based system is often matched to a performance-based compensation approach, whereby employees are paid or incentivized based on the amount of work they perform. This approach encourages them to complete the highest number of tasks possible during their work shift.
- **Lack of cleanliness/organization of shop:**

The inability to quickly locate or access the tools or equipment required for the work, and using a less adequate alternative, as well as difficulty accessing PPE were mentioned to explain why some incidents could happen. In general, stakeholders referred to the 'cleanliness' of the shop as being a contributing factor.
- **Improper equipment maintenance:**

Improper maintenance of equipment was commonly cited as posing a risk for employees. It was mentioned that having an established maintenance regimen is not always in place/followed, particularly among the smaller operators.
- **Workplace distractions (cellphone, clients, noise):**

Workplace distractions, such as clients having access to the shop, noise from other employees working nearby, and personal cellphones were seen as affecting employee concentration, posing a risk for workplace incidents.
- **Employee behaviours:**

It was believed that employee complacency and routine behaviours could affect employees' vigilance and ability to assess the workplace risks. At the same time, fatigue, personal preoccupations (finances, relationships, family, alcohol or drug consumption) were also identified as potentially affecting employees' ability to work safely.

Other contributing factors were each identified less frequently, including:

- Handling of chemicals
- Lack of warm-up/stretching before embarking on a physically demanding task (e.g., picking up tires)
- Workplace air pollution / Improper ventilation
- Not implementing or enforcing a lock out on equipment that is not operating as it should

**Stakeholders indicated a productivity-based approach, resistance to change, organizational culture, employee attitude, and the cost of implementing health and safety measures are most likely to impede successful implementation of initiatives.**

Before gathering stakeholders' recommendations to improve health and safety in the automotive repair industry, they were asked to identify what they believed would challenge the implementation of such measures. The following provides an overview of the most commonly identified barriers :

- **Productivity-based compensation and task-based fee structure:**  
It was believed that a task-based fee structure encouraged organizations to adopt a productivity-based compensation system that encourages employees to work faster, sometimes to the detriment of safety.
- **Resistance to change (organizations and employees):**  
This barrier was mentioned as an important impediment, and one that would be difficult to overcome; among management and employees.
- **Organizational culture not focused on safety:**  
Many believed that an organizational culture that primarily focuses on business performance would be an impediment to spending time and money on improving health and safety practices.
- **Cost of implementing health and safety measures or training:**  
Implementing enhanced health and safety measures was considered by most as an additional cost, both in terms of labour and equipment. Time away from work for training was also cited as a reason that impacted both costs and the workload of others still in the workplace.
- **Employee attitude ('accidents won't happen to me'):**  
A personal belief that employees are not susceptible to workplace incidents may lead some to ignore safety rules and procedures.

Other challenges less commonly cited included:

- Lack of time to allocate to training and prevention
- Lack of direction / knowledge of how to implement new measures
- Easily forgotten over time / no reminders
- Physical limitations of workplace environment (e.g., multiple mechanics in same room working with different tools)
- Limited availability of trained or experienced workforce
- Aging workers

Stakeholders indicated that recommended ways of improving health and safety in the automotive repair industry are primarily related to enhanced training and a more consistent focus on prevention in the workplace.

Working in smaller groups, stakeholders were asked to list ways of improving health and safety in the automotive repair industry. While a variety of suggestions were provided, a few were consistently mentioned and deemed as most impactful, specifically:

- **Establish industry-specific health and safety standards and implement mandatory compliance.**

It was believed that establishing industry-specific health and safety standards would serve to ensure a minimum level of safety across employers, and a good first step towards improving the situation. Not only was it deemed important to set those standards to align with the specific needs of the industry, but also to ensure they are implemented and monitored across workplaces. Employers should also be reminded to post the workplace health and safety policy in accessible locations so all employees are aware of them.

Along with safety standards, it was believed that legislation should be implemented regarding the manufacturing of safer equipment, notably in terms of sound level. It was believed that employers commonly choose equipment based on price rather than on its health and safety features. As such, there was a desire that the minimum health and safety standards for the manufacturing of select tools and equipment be strengthened.

- **Enhanced training and better education about industry-specific health and safety.**

Ongoing training and education were considered important steps in the reduction of workplace injuries. While there were suggestions to enhance formal training as part of the community college curriculum, there was also an expressed need for enhancing the health and safety knowledge of employees through new employee orientation and regularly scheduled refresher training for existing employees (e.g., once a year). To be effective, ongoing education and training should be standard procedure across employers, with consideration given to incorporating an evaluation process (i.e., tests) and linking the outcome to employment status or compensation. Offering training through various platforms (i.e., online, in-person, webinars, videos, presentations, written material) was deemed essential to ensure uptake.

At the same time, it was believed that a education from an external party (e.g., WorkSafeNB or community college) would hold more credibility for employees than education provided by their employer. Finally, it was believed that training should also be provided to management and safety coordinator to provide context (e.g., change to legislations) and help them oversee health and safety within their organization (e.g., electronic filing of claims, inspection checklists). The more specific to the industry this training can be, the more relevant it will be and the less time it will take to administer.

- **Encourage greater and more consistent focus on incident prevention within the workplace.**  
Stakeholders believed that greater focus should be on encouraging health and safety practices day-to-day in the workplace, through such tactics as improving signage or posting reminders, designating a safety coordinator, and making PPE easily accessible. It was also suggested that a peer-to-peer program should be considered, where employees are encouraged to monitor and advise their peers on safe behaviours. It was believed that employees should be informed in writing of what is expected of them in terms of safe behaviours and proper use of tools and PPE. Finally, work practices should be reviewed to minimize distractions, including restricting client access to the workplace.
- **Establish greater accountability for health and safety practices.**  
Although establishing processes and providing tools were considered important practices to improve the workplace health and safety, it was believed that management and employees also need to be accountable for their own behaviours. As such, employers could implement a system of rewards and consequences to motivate the adoption of good behaviours.
- **Increase employee motivation/engagement.**  
It was commonly suggested that to increase employee commitment towards health and safety, employees should be encouraged to share their opinions and to work with management to improve workplace conditions, by identifying hazards and possible solutions.
- **Increase WorkSafeNB scheduled workplace inspections and change the role of the health and safety officer from 'enforcer' to 'helpful partner' in cases where there is no immediate danger.**  
Employers generally believed that while workplace inspections are a good way to identify areas of concern, they can be ineffective if they are not properly planned. Indeed, scheduling inspections to respect the organization's workload and staffing level were requested, ensuring that supervisors and employees can spend the required time to discuss health and safety

with the health and safety officer. In addition, advice from an health and safety officer as to how to improve/comply with findings from a visit is appreciated, but not always given, they stated. It was believed that WorkSafeNB should take the role of an advisor more so than that of an enforcer.

- **Support employers who manage health and safety claims and promote a fast claim resolution process.**  
Employers expressed a desire for increased support from WorkSafeNB in certain areas and there was also clearly a need for WorkSafeNB to better communicate services and practices that exist, but are not well known. There were suggestions for support and guidance in terms of establishing a disability management program. At the same time, it was believed that WorkSafeNB should better inform employers of the direct referral program and the various means of claim submission (i.e., online submissions). Improvement in the case management process, particularly related to speed, was also desired. In terms of incident prevention, it was mentioned that WorkSafeNB should assist employers in implementing health and safety best practices and guidelines (including providing templates and instructions). Finally, it was suggested that employers be encouraged to record 'near-miss' incidents.

All other recommendations were each less commonly cited including:

- Ensure workplaces are kept clean and tidy
- Look to other provinces for industry health and safety best practices
- Involve the automotive dealers associations to partner on the promotion of health and safety within the industry
- Work with equipment manufacturers so they increase training on the proper use of their equipment
- Improve communications between employers and WorkSafeNB
- Encourage employees to stretch and do warm-up exercises before embarking on physically demanding work
- Reconsider the industry's fee structure and performance-based compensation system
- Educate customers on risks involved in the automotive repair industry (to explain why a task might take longer than expected)
- Require that employers conduct regular workplace safety audits
- Provide financial incentives for the purchase of tools and equipment with a better safety record
- Provide each employee with personalized PPE (e.g., earplugs, masks)
- Ensure that PPE, notably earplugs and/or glasses, are worn in the workplace, with consequences for not adhering to policies
- Provide the CSA standards free of charge to employers who are interested or need copies of these standards
- Inform employers of the qualified inspectors for hoist and other garage equipment and tools that service rural locations.