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IHSA talks with Ontario's new Chief Prevention Officer, Dr. Joel Moody

IHSA's President and CEO, Enzo Garritano, spoke with Ontario's recently appointed Chief Prevention Officer (CPO), Dr. Joel Moody. In this interview, Dr. Moody talks about his background, what he brings to the Prevention Office, and his vision for keeping Ontario one of the safest jurisdictions in Canada.

NOTE: This interview is a condensed version of the original. For the full discussion, visit IHSA's podcast page: ihsasafetypodcast.ca. IHSA podcasts are also available on Spotify and Apple.



Q *We know you came from the Electrical Safety Authority (ESA), but can we step back a little and learn more about your background?*

A I grew up in Alabama in a small town of about 14,000 people. A textile corporation called Russell Athletic was big there and employed a lot of people. From the company's standpoint, having a well-educated population to draw from was important. And so in high school, I was fortunate enough to receive a scholarship from them—full room and board at any university of my choosing. I just had to get in.

I went to Duke University and majored in civil and environmental engineering, and then came back in the summer to work for Russell's Engineering and Health and Safety Departments. That involved things like cotton dust sampling, noise dosimeters for hearing protection, as well as some heavy civil projects including road construction, and bringing in different mechanisms of boilers and pressure devices. But for me, it was really about maintaining health and safety and finding ways to keep people safe from harm.



with Joel Moody

Q And that started you down the public health path?

A Growing up in the Southern United States, we originally had a lot of malaria, yellow fever, and diseases spread by mosquitoes. What kind of changes in society really helped get those diseases out of the population? It was engineers building the dams and the water systems. That's what got me into public health and epidemiology.

After Duke, I went to the University of Alabama, Birmingham where I did my Master of Public Health with a concentration in infectious diseases. I looked at how to configure ventilation systems to prevent the spread of tuberculosis in hospitals. After that, I had the opportunity to do an infectious disease fellowship in Lima, Peru.

Q You completed your master's and then a fellowship in Peru. How did you end up in Canada?

A I went to school one more time—medical school—and was in California for my residency. My preceptor said he had some friends at the University of Toronto

who did the type of research he knew I was interested in about cancer and genetics. And that I should check them out! So I interviewed at U of T and got accepted for a fellowship in oncology. The goal was to get that additional training and then go back to the States. But you know, you're at school and you find your significant other. So I met my wife and we've been married and in Canada for almost 15 years now.

Q And how did you move into your last role at the Electrical Safety Authority?

A Somehow, a recruiter received my resume. The ESA was looking to really understand the causes of electrical injury and interventions that could be developed to reduce those injuries. They said they were looking for someone with an epidemiology background, but also said my skills as an engineer would be a benefit. So I said, sure.

In the U.S., we always refer to CDC as Centers for Disease Control, but we forget that it's actually Centers for Disease Control and Prevention. And that's the additional part of epidemiology that has been fascinating for me: injury prevention.

The ESA wanted someone to help them understand data and trends and to use the epidemiology to break down root causes, identify sectors where we had increased risk of fatality or injury, and then develop plans that the organization and its stakeholders could rally behind in order to effect change.

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Q *There are a number of different parties that contribute to prevention within that scope—the workers doing the work, the public, and the utilities themselves. Can you comment on their relationship?*

A Injury prevention is a puzzle and no one person or entity has all the pieces. It does take collaboration and coordination. From the epidemiological world, we've always had to collaborate—with physicians, scientists, ergonomists, industrial hygienists. All of those skills are so important.

This has created my philosophy about what I do now with the Prevention Office, and even organizations as great as IHSA. It's about working together within the system and using the expertise that exists. You hire people for their expertise, their passion, their knowledge. But how do we bring them all together? I pride myself on being able to bring all parties together.

Q *Regarding the expertise of different associations and system partners overall, where do you see opportunities to move Ontario into a better place from a health and safety perspective?*

A We've just rolled out the new Prevention Works strategy. As part of that, we've identified four pillars around data using a collaborative approach, working with small businesses, and talking to those subject matter experts. We had to learn from the people in Ontario themselves about what concerned them the most.

But at the end of the day, it's about implementation—and where do we find opportunities for those subject matter experts to help develop interventions? And how do we then measure the impacts that the strategy is having on the system? I'm committed to making sure that our system has the tools we need to measure those intended outcomes. We know Ontario is one of the safest jurisdictions in Canada. So how do we continue to have that strong safety record and even improve it?

Q *What are your thoughts about Ontario's pandemic response, what we learned, and how we can move forward?*

A One of the most important things, from a response perspective, is communication. We want to have very clear, relevant, and consistent communication that always provides stakeholders with what they need to

do and why. Throughout the pandemic, there's been so much confusion, and there's been the frustration that can happen when information is really hard to find. I remember, early on, you would get the communication and then two hours later something would change. So it's always evolving in a rapid environment.

But when we talk about work-safe planning, safety standards, and frameworks: How do you design a system where it talks about risk? Having a risk-based occupational health and safety approach to managing the workplace response is key. We try to understand risk and then minimize it as much as possible. But you have to have all individuals—be it an executive, the frontline worker, or middle management—working together in order to find ways to minimize risk.

Q *I know mental health and workplace violence and harassment are also high on your priority list.*

A Definitely. Part of my ethos has been around questions of anti-racism. We want people to be able to come to work and make an honest day's living in an environment that's safe for them. And this translates to mental health as well. If you're having mental health challenges, you're not able to be fully productive. And so quality of life, working with your family, working with your colleagues on the jobsite, those are all tied together. You cannot separate the individual from the work. All of the characteristics of that individual come to the workplace with them.

Q *Speaking of diverse characteristics, what keeps you busy and interested outside of work?*

A I have two young girls who keep me busy. And, of course, my wife. We like to do things around the house like gardening and cooking. But also, for me, I enjoy music. I've played piano and I play saxophone. The house is always full of music.

Q *Have the kids picked up any of your skills?*

A They are beginning to. I definitely don't want to force them. We did get my oldest daughter an electronic drum set. She's having fun putting on her headphones and hitting things other than the pots and pans. So that's very helpful.

IHSA would like to thank Dr. Joel Moody for granting us this interview. We wish him luck in his role as Ontario's Chief Prevention Officer.