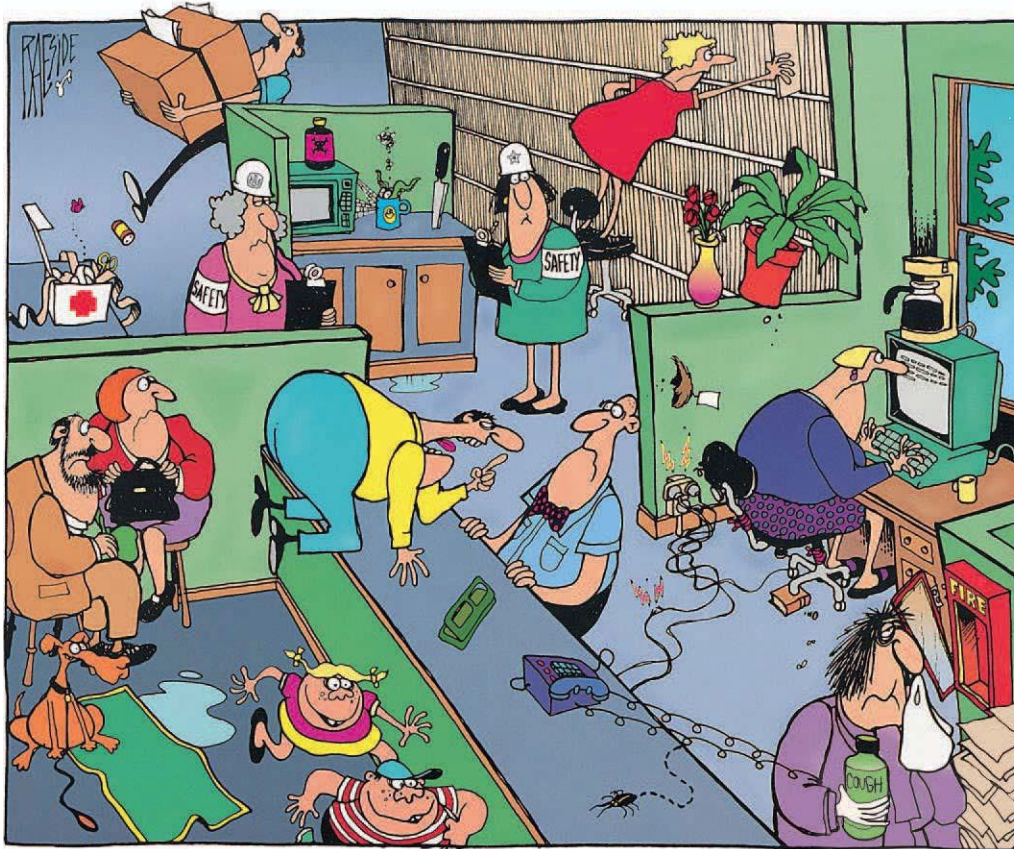


OHS

Occupational Health & Safety



Joint Committee Handbook

April 2020



BC Public Service Agency

“Together, promoting safe workplaces through empowerment, education and practice” OHS Joint Training Program Mission Statement

Acknowledgment

BC Public Service Agency Corporate Safety, represented by

Mark Offerhaus, Learning Consultant, BCPSA

Joseph Claudio, Learning Consultant, BCPSA

Dean Gamblewest, Corporate Safety Specialist, BCPSA

Brad Buck, Director, Safety, BCPSA

BC Government and Service Employees' Union Represented by

Megan Scott, OHS Officer

Brandon Thistle, OHS Officer

Word Processing

Beth Baker

While this Handbook was prepared for the BC Public Service Agency and the BC Government and Service Employees' Union, it can be applicable to other public sector groupings and workplaces.

|

|

Contents

4 Basic Rights	5
Right to Know	5
Right to Participate	5
Right to Protection from Prohibited Actions	6
Right to Refuse	6
Main Public Service Agreement and OHS.....	7
Workers' Compensation Board /WorkSafeBC	8
OHS & Liability.....	10
Duties and Responsibilities of JOHS Committees	13
Joint OHS Committee Meetings.....	16
JOHS Committee Terms of Reference	21
Preparing Written Recommendations.....	23
JOHS Committee Deadlock	29
Risks & Hazards.....	31
Hazard Control	32
Safety Inspections	34
Joint Accident/Incident Investigation	37
Protocols.....	37
Recommendations	39
Investigating Occupational Disease	39
Joint Accident Investigation Form: PSC 38.....	40
Section 3.12 Work Refusals and the Role of the Joint OHS Committee.....	41
First Stage:.....	42
Second Stage:	42
Third Stage:	42

Ergonomics—Manual Lifting.....	43
Lifting.....	43
Control Measures.....	44
Violence Prevention.....	46
First Aid.....	48
Types of First Aid Attendants and Training Programs	49
Indoor Air Quality and Mould.....	53
Lighting	55
Noise.....	57
Working Alone or in Isolation	58
Emergency Preparedness	60
Biohazards and Blood Borne Pathogens.....	62
Infectious Diseases.....	65
What is AIDS?.....	65
What is Hepatitis?.....	65
How are HIV and Hepatitis B and C spread?	66
How are people exposed to infected blood and body fluids?.....	66
Are HIV and Hepatitis B and C spread by casual contact?.....	66
Tuberculosis	67
Sharps.....	69
Pandemic Planning.....	70
How will it affect workplaces?	70
What should individuals do?.....	70
Protective Measures.....	71
Heat Stress	72
Worker Protection in relation to Prohibited Actions.....	74
Vehicle Travel.....	76
WHMIS / SDS	78
How Do I Get OHS Training?	80
OHS Resources.....	81

4 Basic Rights

Right to Know

All workers have a right to be informed of any hazards in the workplace—before they might be exposed to them—and have the right to be trained on any process or procedure which reduces the risk of the hazard to the worker. Workers also have the right to be trained on the safe operation of all equipment they might have to use. This general “right to know” is established through a number of safety – related programs including:

- ▶ Workplace Hazardous Materials Information System (WHMIS)
- ▶ Ergonomics
- ▶ Violence Prevention
- ▶ Worker Orientation
- ▶ Hazard Identification and Control



Right to Participate

The right to participate in all aspects of Occupational Health and Safety programs is stipulated by the *Workers' Compensation Act*. It isn't only Joint OHS committee members that have active roles and responsibilities with respect to safety; it's the role and responsibility of everyone in the workplace to ensure that safety issues are effectively addressed. This right to participate in the OHS program can be ensured and supported by:

- ▶ Prominently posting minutes of JOHS committee meetings where they can be reviewed by everyone in the workplace
- ▶ Posting the names (and pictures too, if available) of members of the Joint OHS Committee
- ▶ Encouraging workers to take part in safety inspections and accident/incident investigations and incident reporting

If you identify a hazard yourself and it's within your ability to remedy it, don't wait until a Joint OHS committee meeting—do something about it immediately! It's your workplace: keep it safe.

Right to Protection from Prohibited Actions

The *Workers' Compensation Act Part 2, Division 6* provides protection to workers exercising their OHS rights or duties from prohibited actions such as:

- ▶ Suspension, lay-off or dismissal
- ▶ Demotion or loss of opportunity for promotion
- ▶ Transfer of duties, change of location of workplace, reduction of wages or change in working hours
- ▶ Coercion or intimidation
- ▶ Imposition of any discipline, reprimand or any penalty
- ▶ The discontinuation or elimination of the job of the worker

Right to Refuse

Section 3.12 of the WorkSafeBC Regulation gives workers the right—and it's not only a right, but also a responsibility—to refuse to carry out work if they have reasonable cause to believe that any of the following conditions exist:

- ▶ Any equipment, machinery, appliance or tool that they are to use or operate is likely to create an undue hazard to them or to another person
- ▶ The physical condition of the workplace or the part of the workplace in which the work is being carried out is likely to create an undue hazard that could endanger them or another person
- ▶ The work process itself could create an undue hazard to the safety and health of either the worker themselves or any other worker in the workplace

These 4 basic rights should be applied to all aspects of every element of all OHS-related programs.



Main Public Service Agreement and OHS

Article 22—Occupational Health and Safety of the Main Public Service Agreement between the BC Public Service Agency and the BCGEU details the way in which both parties will jointly implement the OHS program.

As a committee member, you should familiarize yourself thoroughly with this Article.

The following sections will be of particular interest:

- ▶ **22.3 Joint Occupational Health and Safety Committees** in which the establishment and ongoing operations of a JOHSC are addressed
- ▶ **22.4 Unsafe Work Conditions** with cross-reference to Article 3.12 of the WorkSafeBC OHS Regulation
- ▶ **22.5 Investigation of Accidents** which details the format for conducting an investigation and reporting on its findings and recommendations
- ▶ **22.6 Occupational First Aid Requirements and Courses** outlining the employer’s responsibility to maintain appropriate first aid services
- ▶ **22.10 Dangerous Goods, Special Wastes, Pesticides and Harmful Substances** which incorporates the provision of safe work instructions and a WHMIS program
- ▶ **22.11 Radio Contact or Employee Check** for workers performing their duties alone or in isolation
- ▶ **22.12 Communicable Diseases**
- ▶ **22.13 Workplace Violence**
- ▶ **22.15 Training Program for OHS Committee Members**
- ▶ **22.18 Strain Injury Prevention**



It should be noted that in several instances the employer and the Union have agreed to standards higher than those required by WorkSafeBC.

The Main Public Service Agreement is available on-line on both the BCGEU website (www.bcgeu.ca) and the BC Public Service Agency MyHR website ([18th Main Public Service Agreement](#))

Workers' Compensation Board/ WorkSafeBC

The Workers' Compensation Board is also called their brand name, WorkSafeBC, but the legal entity remains the same—the Workers' Compensation Board.

How did the Workers' Compensation Board develop its present mandate? Where did its guiding principles come from?

And what do Joint OHS Committee members need to know and do in order to ensure that their workplace achieves—and remains in—compliance with Workers' Compensation Board's legislative and regulatory requirements?

The principles that direct the actions of the Workers' Compensation Board today are the product of a Royal Commission chaired by Justice William Meredith from 1910-1913. Justice Meredith considered the issues and challenges facing injured workers and their families and finally presented a set of recommendations that were so forward-thinking and progressive that they still form the basis of current Workers' Compensation Board policies and programs.

The basic concepts of Workers' Compensation Boards legislation include:

No fault

The worker is entitled to benefits without regard to fault. The worker forfeits the right to sue the employer or other workers but gains income protection due to workplace injuries or disease.

Universal coverage

Subject to certain exclusions, all workers are eligible for benefits. Being a participant in the workers' compensation system is compulsory for all employers.

Collective liability and funding

Employers share the costs of Workers' Compensation Board programs. Most employers pay assessments based on an "experience rating" determined by the accident statistics for their industry sector. The BC Public Service is an exception

(in essence, it's "self-insured") as the provincial government pays claims costs as incurred plus a fee to the Workers' Compensation Board for administration.

Compensation is paid for the duration of the injury

Lump-sum payments have proven to be problematic where they have been tried. Sometimes they didn't cover the entire duration of the worker's recovery; sometimes they were treated as a windfall and spent on things other than the necessities of life.

Compensation is paid in proportion to the worker's income prior to the claim

This decision was made to allow the injured worker to as much as possible maintain their pre-claim lifestyle without incurring financial hardship.

Appeal rights

Workers and employers have rights of appeal without resorting to the courts. The Workers' Compensation Boards administrative process, procedures and timelines for appeals are outlined in the legislation and regulation.

As a member of a JOHS committee, you will likely not have much involvement with the Workers' Compensation Board claims process. If someone in your workplace approaches you with questions regarding a Workers' Compensation Board claim, your best response might be to refer them to the Workers' Compensation Board website. If you represent the employer, contact the BC Public Service Agency for further information and assistance. For members of the bargaining unit, contact the nearest BCGEU Area Office.

OHS & Liability

There are two types of legal liability that may impact everyone connected with an OHS program.

Civil liability is defined as “...the personal liability for monetary damages suffered by an individual or corporation that has relied upon the advice, representation or actions of the safety and health professional.” (Norman Keith, OHS Canada)

Quasi-criminal liability is “...the personal liability for the contravention of a safety and health statute or regulation. In both cases of liability, the safety and health professional may be alleged to have failed to perform his or her duties in a distinctly professional, competent and satisfactory manner. In the case of civil liability, money is usually the issue at stake. In quasi-criminal liability, a provincial offenses record, a monetary fine and even a jail term may be the penalties. In both categories of liability, the reputation, credibility, employment and professional future of the safety and health person may be seriously at stake.” (Norman Keith, OHS Canada)

For someone with OHS responsibilities to be liable for negligence:

- ▶ They must not have taken all reasonable measures possible not to pose harm to another person (a concept defined as “a duty of care”)
- ▶ It can be established that they breached that responsibility
- ▶ It can also be established that their breach was the cause of damage; and
- ▶ The damage caused is recognized by law as being compensable

To minimize these liabilities, Norman Keith recommends a seven-step process:

1. Recognize the hazard or OHS issue to be addressed
2. Analyze it
3. Identify possible causes
4. Determine possible solutions
5. Evaluate the possible solutions
6. Decide on a specific solution
7. Implement it



Westray Bill – Section 217.1 Criminal Code of Canada [CCC] - Criminal Liability of Organizations is federal legislation that establishes criminal liability for both organizations and individuals who fail to take reasonable steps to prevent workplace accidents. It originated in the aftermath of the 1992 Westray mine disaster in Nova Scotia.

CCC 217.1 establishes a specific legal duty requiring those who direct the work of others to take reasonable steps to prevent bodily harm arising from such work.

Simply stated, requires that employers take steps to provide a safe workplace for their workers.

To meet their responsibilities under CCC 217.1, employers—and their supervisors—must demonstrate:

- ▶ That sufficient, appropriate supervisory personnel are in place
- ▶ That the workplace is regularly reviewed for safety and health risks
- ▶ That policies and procedures are in place to protect workers from risks
- ▶ That disciplinary guidelines are in place and are implemented when appropriate
- ▶ That regular reports are received on the status of the OHS program
- ▶ That appropriate preventative steps are established, and that implementation of such steps occurs at all levels of the organization

This concept is called **Due Diligence**

When an employer's liability is challenged, practical tips that will assist in establishing a *Due Diligence defence* include:



- ▶ Written policies, practices and procedures are in place
- ▶ The workplace is monitored on a regular basis to ensure that employees are following the policies, practices and procedures
- ▶ Employees are provided with appropriate training and education so that they understand—and are able to carry out their work according to—established policies, practices and procedures

Occupational Health and Safety—Joint Committee Handbook

It is **important** that all these measures be **documented**.

A final note and recommendation: while discipline may (and sometimes must) be invoked for failure to comply with appropriate safety practices, it should seldom be the first action taken. Education and training to promote understanding and cooperation is infinitely preferable to a workplace where confrontation and adversarial attitudes are the standard.

Duties and Responsibilities of JOHS Committees

The *Workers' Compensation Act* (see **Duties and Functions of Joint Committee**) specifies the duties of JOHS committees in Part 2, Division 5, Section 36. They include:

- ▶ Identifying situations that may be unhealthy or unsafe for workers and advising on effective systems for responding to those situations
- ▶ Considering and dealing quickly with complaints relating to the safety and health of workers
- ▶ Consulting with workers and the employer on issues related to OHS and the occupational environment
- ▶ Making recommendations to the employer and workers for the improvement of OHS and the occupational environment
- ▶ Making recommendations to the employer on educational programs promoting OHS and compliance with OHS legislation and monitoring the effectiveness of those programs
- ▶ Advising the employer on OHS programs and policies required by legislation and monitoring their effectiveness
- ▶ Advising the employer on proposed changes to the workplace or to work processes that may affect the safety or health of workers
- ▶ Ensuring that accident investigations and regular safety inspections are carried out as required by legislation
- ▶ Participating in safety inspections, accident investigations and other OHS inquiries
- ▶ Carrying out any other duties or functions prescribed by regulation

Section 40 of the *Workers' Compensation Act* ensures that JOHS committee members receive paid time away from their regular duties to:

- ▶ Attend JOHS committee meetings
- ▶ Prepare—as reasonably necessary—for JOHS committee meetings and to carry out the other functions and duties of the committee

Occupational Health and Safety—Joint Committee Handbook

These rights are also mandated by Article 22.3—Joint Occupational Health and Safety Committees—in the Main Agreement. This Article also provides for:

- ▶ (subsection “e”) Conducting JOHS committee meetings during normal working hours whenever possible
- ▶ (subsection “f”) If the provisions of subsection (e) are not possible and JOHS committee members must attend to committee business outside of normal work hours or on a day of rest, they are to receive equivalent time off at regular straight-time pay

Section 41 of the Act provides for **annual educational leave** of 8 hours for each member of a JOHS committee to attend OHS training courses approved by WorkSafeBC.

This educational leave is to be at full regular pay and the employer is required to reimburse committee members for course registration fees and other reasonable costs of attending the course. In accordance with subsection (2), if a JOHS committee member is not going to use their annual educational leave, they may designate another member of the JOHS committee to use all or part of their 8 hours’ leave that year. In that way, some members of JOHS committees may be able to register for more than one training session or a single training session of more than 8 hours duration in any given year.



Section 42 of the *Workers’ Compensation Act* obliges **the employer to support the work of the JOHS committee** by:

- ▶ Providing meeting room space on the employer’s premises
- ▶ Furnishing necessary equipment for the carrying out of the committee’s duties and functions
- ▶ Providing administrative support for the committee’s work
- ▶ At the JOHS committee’s request, providing:
 - identification of health and safety hazards to which workers at the workplace is likely to be exposed
 - safety and health experience, work practices and standards in similar or other industries

Occupational Safety & Health—Joint Committee Handbook

- orders, penalties and prosecutions under the Act or Regulation relating to health and safety at the workplace

Finally, Section 42 requires that the employer provide the equipment and location to post and keep posted:

- ▶ the names and work locations of JOHS committee members
- ▶ reports of the 3 most recent JOHS committee meetings
- ▶ any orders issued by WorkSafeBC within the previous 12 months with respect to that workplace

Joint OHS Committee Meetings

Getting people in the workplace together on a regular basis to discuss OHS issues will reinforce the principle that people are the primary asset of any organization. The example set by the Joint OHS Committee, both in terms of health and safety practices and their collaborative role in resolving issues that affect all staff, will establish significant standards for everyone.

Regular meetings of the Joint OHS Committee are a fundamental requirement of the OHS program.

In order to be both effective and ensure that committee members continue to be willing to invest their time in attending meetings, Joint OHS Committee meetings should:

- ▶ Help ensure that the workplace is a **safe** workplace
- ▶ Have a goal of treating OHS issues as resolvable problems with the opportunity for equal input and suggestions from all the parties at the table. There should be a willingness to discuss issues objectively
- ▶ Be results-oriented. Document the committee’s decisions and achievements and make everyone in the workplace aware of the role the committee is playing to keep the job safe. Likewise, areas for improvement and issues requiring follow-up should be documented as well
- ▶ Be well-prepared and organized and managed appropriately

It’s important to remember that while the various members of the Joint OHS Committee may represent different parties and have different responsibilities within the organization, as members of the committee they’re working together—as equals—with a common goal.

The *Workers’ Compensation Act* ([Part 2, Division 5, Section 33](#)) specifies the *Membership of a Joint Committee*

- ▶ There must be at least 4—or more—members of the committee in workplaces with 20 or more staff



Occupational Health and Safety—Joint Committee

- ▶ There should be both worker and employer representatives on the committee
- ▶ **At least half—or more**—of the members must be worker representatives
- ▶ Worker representatives must be selected and appointed by the Union in accordance with the Act and the collective agreement, and workers selected must not exercise any managerial function at that workplace
- ▶ Employer representatives must be selected by the employer and must exercise managerial functions—preferably at the workplace represented by the joint committee

In workplaces with 10-19 workers, [section 45](#) of the *Worker’s Compensation Act* requires the selection of a worker OHS representative to be selected and appointed by the Union. This worker OHS representative must not exercise any managerial function at their workplace and will have the same duties and functions as a joint committee.

In public sector workplaces with 9 or fewer employees, the employer and the Union have agreed that an OHS representative will also be selected and appointed by the Union. This arrangement is often referred to as an “informal OHS committee.”

We’ve all attended meetings that were not chaired appropriately and were less productive than they could have been because they were poorly organized. To ensure that the Joint OHS Committee meeting is a productive use of the time of all its members:

- ▶ There should be an **agenda**, established in advance and circulated to all committee members well before the meeting starts
- ▶ The meeting should be run **informally**, with the co-chairs allowing for everyone’s participation while at the same time ensuring that conversations remain on-topic
- ▶ **Minutes** must be kept and to be effective, the minutes should indicate the names of those responsible for carrying out decisions reached by the committee, exactly what those decisions were and a date by which the plan of action for implementing those decisions will be completed.



Occupational Health and Safety—Joint Committee

See the BCGEU and BCPSA OHS websites for templates of JOHS Committee meeting minutes.

- ▶ The minutes must be **posted** (in hard copy) in a prominent location so that everyone in the workplace will be kept informed of the committee's activities. If all workers in your workplace have ready access to computers, the minutes may also be posted electronically

The date, time and location of the meeting should be established and circulated well in advance.

There must be **two co-chairs** for a Joint OHS Committee, one selected by the worker representatives, the other by the employer. Both co-chairs are responsible for:

- ▶ Jointly planning the meeting and preparing the agenda
- ▶ Conducting and managing the meeting, including ensuring that it starts and ends on time
- ▶ Making certain that minutes of the meeting are communicated to all employees, management and the Union

Typical **agenda items** for a Joint OHS Committee include:

1. A revisiting of the current meeting's agenda, with the co-chairs asking for any additions or corrections
2. A review of the previous meeting's minutes and a discussion (including further planning) of any issues that have either been brought forward or are as yet unresolved
3. Presentation and discussion of the current agenda's items. Often agendas will have standing agenda items. These may include:
 - (a) Review of safety inspection reports
 - (b) Review of incident/accident investigation reports
 - (c) A review of First Aid records (with Workers' names deleted to protect confidentiality)
 - (d) **Guests:** Many JOHS committees invite guest speakers and resources such as the BCGEU, the BC Public Service Agency, WorkSafeBC, First Aid Attendants, those responsible for building maintenance or a possible host of others who are members of the OHS community of practice

Occupational Health and Safety—Joint Committee

(e) **Training:** Review currently available and up-coming OHS-related training as well as JOHS committee members' entitlement to 8 hours of OHS training every year

4. Preparing written recommendations to management

Often, JOHS Committees can completely and satisfactorily resolve issues during their regular meetings. However, there will be times that some OHS matters will require further discussion and management consideration. These circumstances usually involve:

- ▶ A new or revised policy or procedure
- ▶ Equipment changes, office layouts or purchases requiring budget approvals
- ▶ Specific training including orientation programs for new employees
- ▶ Commitment and follow-up to issues for which earlier approved corrective measures have not been actioned
- ▶ Matters which require review and/or agreement of other divisions, ministries or central agencies (including the Provincial JOHS Committee)

In these instances, the committee will have to prepare recommendations or **formal written recommendations**, which should:

- ▶ Identify and describe the problem or issue
- ▶ Provide all essential background information
- ▶ Reference the appropriate WorkSafeBC regulation, government or ministry policy or provisions of the collective agreement
- ▶ Provide a solution or range of options and recommended course of action, including target date(s) for implementation
- ▶ Bear the collective endorsement of the JOHS Committee
- ▶ Be delivered to the appropriate management representative

Recommendations should be made in writing and should be directed to the management person who has responsibility for the program and the authority to take the appropriate action. Further review by more senior management may be required, depending on the nature of the issue or the scope of the recommendations being made.

Occupational Health and Safety—Joint Committee

In either case, management has an obligation to review and follow-up on the JOHS Committee's recommendation. Management is required to respond in writing to a JOHS Committee's written recommendation within 21 days if a written response is requested.

Should written recommendations not be adopted by management, the JOHS committee should attempt to determine if other solutions are possible. The employer has an obligation to explain what steps are being taken to mitigate the risks. The JOHS committee should also request reasons for the management decision. As a final option, if the committee is not in agreement with the employer's response, WorkSafeBC may be called for assistance. More detail on written recommendations can be found on page **23 and 24** of this handbook.



JOHS Committee Terms of Reference

Among its Terms of Reference, JOHS Committees may wish to consider:

- ▶ A statement of committee purpose and objectives, including a name for the committee
- ▶ Scope of representation—what parts of the operation or groups of workers are represented by the committee
- ▶ Powers and functions
- ▶ Composition—including how many members and the specific areas of the workplace from which worker and management representatives will be selected
- ▶ Number of members
- ▶ Terms of office
- ▶ Selection procedures
- ▶ Replacements
- ▶ Frequency of Meetings
- ▶ Quorum and attendance
- ▶ Special meetings
- ▶ Order of business
- ▶ Records
- ▶ Provisions of Article 22 of the Main Agreement



An example of the Purpose of a JOHS Committee might be:

“It is a joint committee made up of worker and employer representatives consulting in a cooperative spirit to identify and resolve safety and health problems in support of a planned occupational safety and health program in the workplace.”

One example of a list of JOHS Committee functions includes the following suggestions:

1. *Make recommendations for the establishment and enforcement of health and safety policies and practices.*

Occupational Health and Safety—Joint Committee

2. *Participate in the identification of dangers to health and safety in places of employment and recommend means of controlling the hazards.*
3. *Obtain information from the employer and from such other sources as necessary regarding the identification of existing or potential dangers to health and safety at the place of employment.*
4. *Advise on and promote health and safety programs for the education and information of the employer and workers.*
5. *Receive, consider, and, where necessary, investigate complaints—including incident/accident investigations—respecting health and safety of workers at the place of employment, and, where necessary, make recommendations to the employer.*
6. *Maintain records regarding the complaints received and the resolution of those complaints.*
7. *Where applicable, review the information resulting from monitoring and measuring procedures, and, where necessary, make recommendations to the employer.*
8. *Participate in inspections at places of employment concerning the health and safety of workers.*
9. *Perform any other duties that a WorkSafeBC officer may assign to a committee.*

Please remember that the example “Purpose,” “Terms of Reference” and “Functions” statements provided above are **not** comprehensive and are provided only as samples. You and your JOHS committee will want to determine your own standards and craft your own statements.



Preparing Written Recommendations

As mentioned in the section of this Handbook on Joint OHS Committee meetings, there will be some OHS matters that will require referral to the employer for consideration. These circumstances usually involve:

- ▶ New or revised policies or procedures
- ▶ Equipment changes, workplace layouts or purchases requiring budget approvals
- ▶ Specific training, including orientation programs for new employees
- ▶ Commitment and follow-up to issues for which earlier approved corrective measures have not been actioned
- ▶ Matters which require review/agreement of other divisions, ministries or central agencies (including the provincial JOHS committee)

In these instances, your JOHS committee will have to prepare **written recommendations**.

To ensure that written recommendations have maximum effectiveness and achieve the desired impact:

- ▶ Identify how the issue was raised. Was it as a result of a safety inspection by the JOHS committee? Was it because of an order by WorkSafeBC? Was it as a result of a worker's complaint? (And was it brought to the attention of a supervisor/manager before the JOHS committee was approached?)
- ▶ If so, what was the date of the safety inspection/complaint/order? Provide the names of the worker and employer representatives involved in the inspection
- ▶ Attach a copy of the safety inspection report
- ▶ Describe the issue in detail
- ▶ Is there a violation of the WorkSafeBC OHS Regulation or *WCB Act*? If so, identify the specific sections
- ▶ Is there a violation of the Main Agreement? If so, which articles?
- ▶ Present a recommended resolution or range of options including a target date for implementation

Occupational Health and Safety—Joint Committee

- ▶ Identify possible interim solutions and any further recommendations the JOHS committee may have
- ▶ Ensure that the written recommendations are dated and bear the collective endorsement of the JOHS committee
- ▶ Request a written response from management
- ▶ Deliver the recommendations to the appropriate management representative

Management has an obligation to review and follow-up on the JOHS committee’s recommendations and to provide a written response to the JOHS committee within 21 days. Should the committee’s written recommendations not be adopted by management, the JOHS committee should request reasons for the management decision as well as what other responses the employer is prepared to make to deal with the issue.

****A sample of how to prepare effective written recommendations is provided. For copies of the form, go to the BCGEU website: [JOHSC Recommendations Report](#) or BCPSA website: [Recommendations Report Template](#)**

**Example of a Recommendation
Which Would go to the Employer**

Date:	
Location:	
Who is on committee:	
Issue:	Needle Stick Injuries

Background

Five workers employed at Children & Families Alcohol & Drug Services in Kamloops reported needle stick injuries. Information on whether this is a provincial issue or one related to our site is not available currently. These injuries exposed workers to bloodborne pathogens, which can cause infection. The most important of these are Hepatitis B and C viruses.

Infections to each of these pathogens are potentially life threatening and preventable.

Discussion—Analysis

The workers who have been exposed have suffered emotional impact—with three still being absent from employment. Currently we have not included needle stick injuries as part of the stress counselling program.

In analyzing needle stick injuries in the work place we have identified the following injury trends:

Most were because of accidental puncture from students leaving used needles in the wastebasket or in washrooms.

Conclusions—Health and Safety Recommendations

The health and safety committee recommends the following action plan:

1. Workers need to be trained and educated regarding risk factors This could be accomplished at a staff meeting. The duration should be two hours.
2. Promote safety awareness in the work environment We would recommend posters or fact sheets. One a month for four months starting Jan 1, 2020.
3. Establish procedures for reporting and follow-up of needlestick injuries. This is a requirement of the *Workers Compensation Act* and Regulation section 6.33 Biohazardous material. A copy is attached for your reference.
4. Develop a written exposure control plan designed to eliminate or minimize worker exposure to bloodborne pathogens. This is to be done in the next month on a joint basis (worker and employer participation).
5. Change work practices to eliminate worker exposure. Change how frequently garbage is removed.
6. Free hepatitis B vaccinations should be offered to all workers.

If you have any questions or concerns regarding the committee recommendations please do not hesitate in contacting either of the two co-chairs of the committee. The committee requires a written response within 21 days of this letter. Thanking you in advance for your attention regarding this matter.

Co-chair

Co-chair

Health and Safety Problem Solving

1. Identify and clarify the safety and health problem. What is the risk? Some issues create more of a hazard and risk than others. Some are annoyances, such as not meeting regularly. The first step is to pinpoint the problem.
2. Gather information. Learn more about the problem. What is the cause of the problem and what may be a solution. You may have to do an internet search, have a brainstorming session with the committee. Look at old committee reports. Check the first aid book. Look at all incidents that have occurred and talk to workers.
3. Evaluate the information. What information did you review? Does the information represent both the worker reps and the employer reps? How accurate is the information? Is it fact or based on the opinion of the committee.
4. Consider alternatives and implications. Draw conclusions from the information and recommend solutions. What are the advantages and disadvantages of each resolution? Most important, which solution eliminates the safety and health risk to workers? Cost should not be a factor.
5. Choose the best solution and draft the recommendation. Make sure once the recommendation has been accepted that you follow up and monitor the situation.

Joint Health and Safety Committee Recommendation Report

To:
Date:
Location:
Committee Members:
Please respond by: (within 21 days)

Issue:

Background:

Occupational Health and Safety—Joint Committee

Discussion—Analysis:	
Conclusions—Health and Safety Recommendations:	
Co-Chair	Co-chair
Employer Response:	
Signature	Date Returned

JOHS Committee Deadlock

Sometimes, your JOHS committee may find that it is unable to reach agreement on an issue it has been considering.

In those instances—and hopefully they will only happen rarely—the WorkSafeBC Prevention Manual: [Joint Committees—Procedures and Resolving Disagreements](#) identifies 5 items that are appropriate for referral to the Board for investigation and resolution. These items are:

1. A dispute over the process for selecting worker representatives for the committee.
2. A dispute over joint committee rules of procedure, including rules respecting how it is to perform its duties and functions.
3. If a joint committee is unable to reach agreement on a matter relating to the health or safety of workers at the workplace.
4. If the employer does not accept the joint committee’s recommendations with respect to a particular matter.
5. If the joint committee is not satisfied that the employer’s explanation for a delay in responding to the committee’s recommendations is reasonable in the circumstances.

WorkSafeBC’s **Policy** in determining whether to investigate matters in order to resolve disagreements requires it to consider:

- ▶ WorkSafeBC’s statutory authority to investigate in the particular situation
- ▶ Whether there is an immediate hazard that needs to be resolved
- ▶ Whether the issue is significant in terms of preventing injuries and illnesses
- ▶ Whether there is an alternative method for resolving the issue, and
- ▶ Whether WorkSafeBC is likely to be able to resolve the issue

Not all WorkSafeBC’s investigations will involve a visit to the workplace.



Occupational Health and Safety—Joint Committee

Sometimes, their approach may be to discuss the issue with the respective parties and suggest options but not to decide the disagreement.

Finally, if the employer fails to make any response at all or to meet a deadline set by WorkSafeBC, the Board may order that a response be made (under Section 187) and/or take whatever other enforcement action may be appropriate.

Remember: a referral to WorkSafeBC may not be your committee's only option. You may choose to consult with the **BCGEU Area Office**, the **BCGEU's Safety Officer** or a **BC Public Service Agency OHS Specialist** and request their input and suggestions on resolving the impasse.

Risks & Hazards

In your role as a JOHS committee member, you'll hear a lot about Risks and Hazards. Some people use the terms interchangeably, but they do have very specific—and different—meanings.

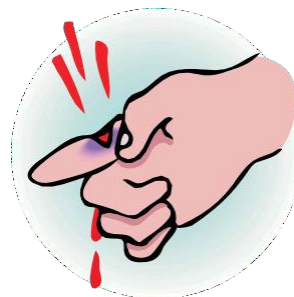
Part 1 of the WCB OHS Regulation (see **Definitions**) says that

A **hazard** is a thing or condition that may expose a person to a risk of injury or occupational disease.

Risk means a chance of injury or occupational disease

Expressed in other terms, “risk” is the likelihood that you'll be hurt and a “hazard” is what will hurt you.

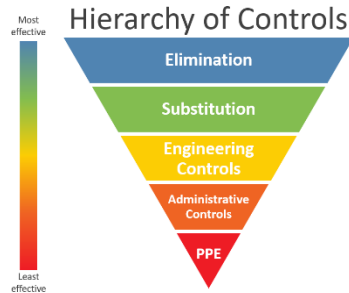
Another term that is often used is “harmful condition.” The generally accepted definition of **harmful condition** is an existing or potentially existing unsafe or harmful condition, substance or circumstance that may have an adverse effect on a person's health.



Hazard Control

A **hazard** is defined as “a thing or condition that may expose a person to a risk of injury or occupational disease.”

Once a hazard is identified, the employer has a responsibility to **eliminate** it entirely or if that is not possible to take every reasonable measure to minimize it.



There are three recognized methods of hazard control, and it is very important that you start with and always adhere to the following sequence:

- ▶ that is not possible, proceed to
- ▶ Along the path (by implementing engineering or administrative controls) and only if that is not possible
- ▶ At the worker (with the use of Personal Protective Equipment or PPE)

In some instances, one or more methods of hazard control may be utilized at the same time. If a worker has to handle Sharps, that may involve:

Engineering controls: a safe sharps container and tongs

Administrative controls: written safe work procedures and the provision of appropriate training on the handling of sharps

Personal Protective Equipment: the wearing by the worker of gloves, an apron, safety shoes and possibly eye protection.

1. **At the source** through **elimination** or **substitution**
In other words, ensure worker safety by getting rid of the substance, the work location, the work process, the tools and equipment or whatever is exposing the workers to risk and substituting completely safe—or at the very least less hazardous—alternatives.
2. **Along the path** through **engineering controls** or **administrative controls**

Sometimes the work itself cannot be changed but it may be possible to take steps to improve the work environment. The installation of a better ventilation system may be one example; another may be the implementation of an ergonomics training program to make lifting safer.

3. **At the worker** through the provision by the employer of **Personal Protective Equipment** If eliminating or substituting for the hazards isn't effective and if engineering or administrative/organizational controls are not feasible and cannot guarantee worker safety, then Personal Protective Equipment must be worn. Some examples of PPE's include gloves, aprons, safety footwear and ear and eye protection.

A word of caution: Sometimes in some workplaces, the only hazard control methods utilized involve the workers wearing Personal Protective Equipment.

PPE should never be the first option when hazards are present. It should only be used in conjunction with at the source and along the path controls and only after those processes have been fully explored.

Your role as a member of your JOHS committee is to ensure that these protocols are followed consistently.

Safety Inspections

In order to prevent accidents and occupational diseases, the employer—with the assistance and input of Joint Occupational Health and Safety committees—needs to identify, evaluate and control hazards and/or hazardous conditions in the workplace.

The WorkSafeBC OHS Regulation Section [3.5](#) specifies that

“Every employer must ensure that regular inspections are made of all workplaces, including buildings, structures, grounds, excavations, tools, equipment, machinery and work methods and practices, at intervals that will prevent the development of unsafe working conditions.”

In addition, Section [3.7](#) requires that

“A special inspection must be made when required by malfunction or accident.”

And Section [3.8](#) of the Regulation states that

“An inspection... must... include the participation of members of the joint committee or the worker safety and health representative, as applicable...”

There are a number of different types of Safety Inspections:

1. **Planned Inspections** which are normally carried out jointly (employer and JOHS committee members) by people who are familiar with the worksite and who have been trained in conducting inspections.
2. **Equipment/work area inspections** should be conducted by employees at the start of each shift and throughout each workday to ensure the proper functioning of the equipment they will be using and that their workplace is free from hazards. Workers need to be trained on how and what to inspect.
3. **Special Inspections** are conducted when equipment malfunctions or following an accident. WorkSafeBC may also choose to conduct an inspection at any time and for any reason of their choosing. Both an employer representative and at least one worker representative from the JOHS committee should accompany the WorkSafeBC Officer on such inspections.

4. At the request of the employer **in response to worker complaints** as part of the **3.12**—Right to Refuse Unsafe Work process.
5. **Supervisory Inspections** which should occur as “walk-about;” an informal but regular part of every supervisor’s role.

It’s important to **prepare for planned inspections** by identifying the who, what, where, and when as well as how the inspections will be conducted and then:

- Review previous inspections reports, accident records and action plans to determine which specific items will be reviewed
- Plan questions to ask of supervisors and workers during the inspection
- Prepare an inspection checklist specifically for your worksite
- Prepare a worksite map
- Develop an inspection report format

An effective safety inspection cannot be rushed; take your time and do it right! **During the inspection** in addition to checking out the work environment, make sure to observe the work being done. Interact with the supervisor and the workers, discuss their concerns, invite their input and use this as an opportunity to promote the OHS program. Use the worksite map/floor plan to diagram hazards identified during the inspection.

After the inspection make sure that your report clearly describes in detail issues requiring corrective action. Recommend a timeline for completion of the corrective action and identify who will be responsible. Present the supervisor with a copy of your report and recommendations and ensure that the report is reviewed at the next JOHS committee meeting for follow-up if required.

When preparing your worksite’s safety inspection checklist, OHS issues you may wish to consider could include:

- ▶ Ergonomics
- ▶ General Hazards
- ▶ First Aid
- ▶ Biohazards
- ▶ WHMIS/SDS
- ▶ Tools & Equipment
- ▶ Training



Occupational Health and Safety—Joint Committee

- ▶ Maintenance
- ▶ Noise
- ▶ Lighting
- ▶ Environmental conditions
- ▶ Prevention of Violence
- ▶ Working Alone or in Isolation

As members of a JOHS committee, you and your colleagues should consistently and continually be evaluating/inspecting your workplace throughout your workday.

Joint Incident Investigation

Protocols

The WCB OHS Regulation (see www.worksafebc.com) uses the terms:

“Accident” and “Incident” interchangeably and defines them as

An occurrence which resulted in or had the potential for causing an injury or occupational disease

Why are incidents investigated?

The primary purposes of an incident investigation are:

- ▶ To identify all the factors that contributed to the incident
- ▶ To recommend corrective measures necessary to prevent a recurrence.

It also serves as a worthwhile opportunity to re-evaluate the workplace’s OHS program

Note: The outcome of an incident investigation should **never** be the allocation of blame.

What needs to be investigated?

- ▶ occurrences resulting in serious injury or death
- ▶ major structural failures or building or equipment collapses
- ▶ the major release of a hazardous substance
- ▶ any occurrence resulting in injury to a worker requiring medical treatment
- ▶ an occurrence that resulted in either a minor injury or no injury at all to a worker (where no medical treatment was required) but that had the **potential** of causing serious injury. These events are often referred to as a “near-miss” or “near-misses.”

Note: In addition to requiring investigation, the first three items on the above list must be immediately reported to WorkSafeBC. In the event of a fatality of a BCGEU member the Ministry shall immediately notify the President of the Union of the nature and circumstances of the accident and arrange as soon as possible for a joint investigation.

Who should conduct the investigation?

Your JOHS committee should have an investigation team, consisting of an Employer and a Union designated representative (in accordance with the collective agreement), trained and prepared to complete worksite investigations.



Investigations must always be conducted jointly.

When should investigations be conducted?

The Preliminary Investigation must be completed within **48 hours** and any interim corrective measures must be implemented immediately. The Full Investigation must be completed within **30 calendar days** and the report is sent to WorkSafeBC.

How do you prepare for an investigation?

- ▶ Identify all equipment—including Personal Protective Equipment—you will need to conduct the investigation
- ▶ Prepare maps and diagrams of the work location; use them to identify where evidence was found
- ▶ Identify who was directly involved. Identify witnesses
- ▶ Identify who was indirectly involved (emergency responders, supervisors and managers)
- ▶ Identify who will be interviewed
- ▶ Prepare a list of questions. Ensure that questions are open-ended
- ▶ Arrange for a private location for the interviews; interview only one witness at a time
- ▶ Determine the date, time and location of the occurrence or report of illness/injury.

What should be considered in the investigation?

- ▶ The work location
- ▶ The job process
- ▶ A reconstruction of the scene of the occurrence (locations of people/materials/substances; movement; sources of heat, light, glare, noise, air flow, odours; safety devices)
- ▶ Environmental factors

- ▶ Ergonomic factors
- ▶ Worker fatigue, stressors
- ▶ Morale

Recommendations

All incident reports should conclude with recommendations for corrective action. The conclusions and recommendations should be discussed with the JOHS committee and the employer. A timetable for action should be established. Workers involved in the investigation should be kept informed of any progress in achieving changes. Recommendations and implementations must be communicated to all workers.

Investigating Occupational Disease

The investigation of illness/disease is different from investigating accidents/incidents. Instead of investigating the actual disease, you and the other members of the JOHS committee will be involved in investigating the exposure that resulted in the occupational disease. There are four main ways in which a worker can be exposed to the biohazards that are the primary causes of occupational disease:

- ▶ Inhalation (breathing)
- ▶ Absorption (skin contact)
- ▶ Ingestion (swallowing)
- ▶ Sub-coetaneous (needle stick)

Sometimes, acute responses to certain substances and agents can be immediately visible, as is the case with occupational dermatitis. In other instances, the effects of chronic exposure may not be identifiable for many years.

The process for investigating occupational illness/disease requires the collection of a great deal of information such as WHMIS/SDS, incident reports, complaints from other workers, sick leave records/illness reports, exposure data and medical information.

Occupational Health and Safety—Joint Committee

When investigating occupational diseases, you and your JOHS committee colleagues will need to do research and you should consult with your BC Public Service Agency OHS Specialist, BCGEU (Area Office) staff rep., or the BCGEU Safety Officer prior to beginning the investigation.

PSC 38 Incident Investigation Form, or an agreed to form, should be used to investigate. A sample is provided on the BCGEU website: [Joint Accident-Incident Investigation Steps](#) and the BCPSA website: [Joint Accident-Incident Investigation Form](#)

Occupational Health and Safety—Joint Committee

Section 3.12 Work Refusals and the Role of the Joint OHS Committee

If a worker has reasonable cause to believe that either:

- ▶ The equipment they're being asked to work with
- ▶ The physical condition of the workplace
- ▶ The work process itself

is likely to create an undue hazard to the worker or to anyone else in the workplace, they should/must elect to exercise their right to refuse to carry out that work in accordance with Section 3.12 of the WorkSafeBC Regulation. Article 22.4 of the collective agreement is similar to the provisions contained in Section 3.12.

While **reasonable cause** is an objective test, a worker does not have to be correct in exercising the right to refuse. Labour relations jurisprudence has established the following principle:

“Whether the average employee at the workplace, having regard to his general training and experience, would, exercising normal and honest judgement, have reasonable cause to believe that the circumstances presented an unacceptable degree of hazard.”

It has also been determined that the concept of undue hazard should be interpreted more broadly than meaning “imminent danger.”

When responding to work refusals under Section 3.12, some other important considerations to keep in mind are:

- ▶ One does not have to have proof that another worker was injured performing the same task/using the same equipment
- ▶ The potential hazard does not have to be certain to occur, but only reasonably expected
- ▶ An increase in the normal degree of risk may be considered “reasonable cause”
- ▶ A time frame in which the hazard will occur is not required. A work refusal under Section 3.12 should trigger a 3-stage response.

First Stage:

A worker must immediately report the circumstances of the unsafe condition to either the supervisor or employer. The supervisor must investigate the matter and either remedy the unsafe condition or—if the supervisor believes the report is not valid—they must inform the worker.

Second Stage:

If the worker still believes that the work is unsafe—despite any corrective measures taken or opinions offered by the supervisor—the worker can still refuse. The issue will now be investigated by a team comprised of the worker who initiated the complaint, a worker representative from the Joint OHS committee and a representative of the employer. As a JOHS committee member, you should discuss the worker’s refusal with the worker in detail and should make sure that you have captured all of the refusing worker’s issues and concerns.

If the second stage of this process fails to provide a satisfactory, acceptable resolution to the refusing worker then the process moves on to the . . .

Third Stage:

The supervisor and the worker representative notify an officer of WorkSafeBC who must then investigate the matter without undue delay. The WorkSafeBC officer may issue whatever orders are deemed necessary and whether orders are issued or not, an inspection report is always generated in response to Section 3.12 complaints.

During this process, the worker can be temporarily reassigned to alternative work at no loss of pay until such time as the matter is resolved.

Part 2, Division 6 of the *Workers’ Compensation Act* protects workers from any prohibited action as a result of filing a Section 3.12 complaint. Refer to page 6 of the handbook on Worker Protection in Relation to Prohibited Actions.

It is extremely important that young and new workers be made aware of the right and responsibility to refuse unsafe work and JOHS committee members should monitor the orientation process to ensure that this is occurring.

For further information, please see the BCGEU website: [Right to Refuse Unsafe Work Booklet](#) and the BC Public Service Agency OHS website: [Right to Refuse Unsafe Work](#)

Ergonomics—Manual Lifting

A lot of information is readily available about office ergonomics but proper procedures for the physical handling of materials are less accessible. The content provided here is taken from the joint BCGEU—BC Public Service Agency publication “Workplace Guidelines for the Prevention of Musculoskeletal Injuries.”

Manual handling (i.e. lifting, carrying, pushing and pulling) of heavy, bulky, and/or irregularly shaped objects during work tasks can lead to possible musculoskeletal injuries. In these circumstances, a worker is more susceptible to injury as these types of tasks often require using awkward body postures which can place considerable physical demands on the body—especially the back.

Examples of manual material handling include:

- ▶ Loading and unloading materials from vehicles, boxes or pallets
- ▶ Moving materials by hand in warehouses, offices or outdoor work locations
- ▶ Stocking shelves

Lifting

Proper lifting techniques are helpful and important in reducing the risk of musculoskeletal injuries (MSI’s). When lifting, make sure you:

- ▶ Hold the object close to your body
- ▶ Lift with your legs, not with your back
- ▶ Lift only between knuckle and shoulder height



“Knuckle height” is the distance between the ground or floor and the knuckles of your hands when you are standing straight with your arms hanging by your sides.

Lifting and handling materials above shoulder level or below knuckle level (particularly if you are bending or twisting) adds unnecessary stress to the spine and back muscles.

In some cases, lifting may have to be performed from ground or floor level. When a mechanical lift is not available and the material you’re trying to move does not allow for the proper use of body mechanics, make sure you employ one or more of the following.

Control Measures

- ▶ Seek assistance from a co-worker
- ▶ Where possible, separate the material into more manageable loads
- ▶ Test the weight of an item before trying to lift it
- ▶ Don't overestimate your ability to handle heavy items
- ▶ Minimize the frequency of lifting
- ▶ Don't place an item on the floor/ground if it will need to be manually lifted again later
- ▶ Position yourself as close as possible to the load and get a firm grip (wearing gloves can be helpful) before lifting
- ▶ Position yourself so that you are squarely facing the load
- ▶ Be sure of your footing before starting the lift
- ▶ Restrict lifting to between knuckle and shoulder height
- ▶ Avoid reaching, twisting or bending
- ▶ Where feasible, use lifting aids (lift tables, mechanical or powered assists, hoists, etc.) to move heavy or bulky loads

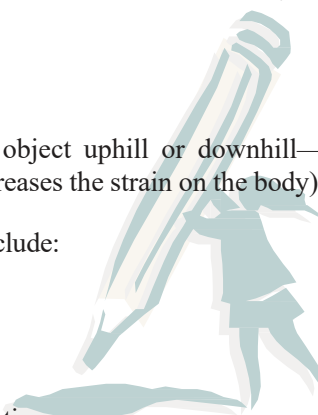
As a member of the JOHS committee, you should help ensure that your workplace has written safe work procedures for tasks involving lifting and that all workers have received the appropriate training.

Once an object is lifted, it is sometimes necessary to move it. **Carrying** an object can also contribute to MSI's. Some of the risk factors to consider when carrying an object are:

- ▶ Distance the object must be moved
- ▶ Weight of the object
- ▶ Grade you're walking on (carrying an object uphill or downhill—especially on stairways—significantly increases the strain on the body)

Control Measures for moving lifted objects can include:

- ▶ Using a cart, dolly or pallet jack
- ▶ Using a conveyor
- ▶ Rearranging the workplace
- ▶ Providing slides or tables between workstations



Risks of MSI's while carrying an object can be minimized by reducing the weight you have to move. This can be done by:

- ▶ Reducing the size of the object
- ▶ Using lighter material for the object
- ▶ Reducing the capacity of the container
- ▶ Reducing the weight of the container itself
- ▶ And, as always, asking for assistance to move the object

Training—jointly developed by the BCGEU and the BC Public Service Agency—OHS Office Ergonomic Assessor training is available through MyLearning. See their website to register.

Reporting - if you or any of your colleagues identify signs and or symptoms of MSI's report to your supervisor and request an ergonomic assessment.

Resource guides to supplement the training are available for both office environments and all other work settings, including vehicles.

Additional information regarding office ergonomics and vehicle ergonomics is available on the BCGEU website: [Ergonomics](#) and the BC Public Service Agency OHS website: [Workplace Planning and Ergonomics](#)

“Prevention Guidelines for Strain Injuries in the Office Environment” and “Workplace Guidelines for the Prevention of Musculoskeletal Injuries.”



Violence Prevention



Violence in the workplace is considered to be a hazard and should be addressed in a manner similar to other hazards.

Section 4.27 in the WorkSafeBC OHS Regulation—**Violence in the Workplace**—provides the following definition:

“Violence means the attempted or actual exercise by a person, other than a worker, of any physical force so as to cause injury to a worker, and includes any threatening statement or behavior which gives a worker reasonable cause to believe that he or she is at risk of injury.”

Violence is not just physical assault; it can include verbal abuse, unwanted sexual advances or the threat of these or other actions—including threats made against your family, if those threats arise as a result of your employment.

When a risk of injury to workers from violence may be present, employers are required to conduct a risk assessment, taking into consideration:

- ▶ Previous experience in that workplace
- ▶ Occupational experiences in similar workplaces
- ▶ The location and circumstances in which the work takes place

The information from the risk assessment will be used to establish procedures and policies that will eliminate or reduce the risk of violence.

Section 4.30—Instruction of Workers requires that employers inform workers of a risk of violence before the workers may be exposed to it. This includes providing information about persons with a history of violent behavior who workers are likely to encounter in the course of their work. Also considered are issues arising from domestic violence spill-over into the workplace. (more information on Domestic Violence can be found in the [Domestic Violence Toolkit](#) at the WorkSafeBC website and on MyHR.

Workers need to be trained on how to recognize the potential for violence; appropriate response protocols when a violent act occurs—including **how to summon assistance**—and procedures for reporting, documenting and investigating incidents of violence.

The BCGEU and the BC Public Service Agency offer a one-day training seminar on “OHS Mitigating Workplace Violence.” Course details and registration information can be found on the MyLearning website. You should discuss this with your supervisor before registering.

If there is a risk of violence at your workplace, as a JOHS committee member you should take responsibility for raising it as an agenda item for discussion at your committee’s next meeting.

If you believe that you are at risk of violence, you should report your concerns to your employer immediately. Your employer is responsible for taking appropriate measures to eliminate—or where that is not possible—to minimize on an ongoing basis—any risks of violence or injury.

If you feel that you still have reasonable cause to believe that you are at risk of injury, you have **the right to refuse unsafe work**. Please see Section 3.12 of the OHS Regulation (**Procedure for Refusal**) and / or the corresponding section of this Handbook starting on page 43.

Note: if you’re wondering why the definition of “violence” includes the phrase “other than a worker,” it’s because **Section 4.24—Workplace Conduct** provides the following definition:

“Improper activity or behavior includes the attempted or actual exercise by a worker towards another worker of any physical force so as to cause injury, and includes any threatening statement or behavior which gives the worker reasonable cause to believe he or she is at risk of injury.”

So, the protections afforded workers are the same whether the risk of violence originates from a colleague or from someone else. They’re just covered by different sections of the Regulation.

Please also refer to Main Agreement *Article 22.13—Workplace Violence*, which also contains a provision for immediate critical incident stress debriefing and post traumatic counseling.



First Aid

The OHS Regulation (see [Occupational First Aid](#)) defines the requirements of workplace First Aid programs.

As a JOHS committee member, you have an important part to play in ensuring that your workplace First Aid program is in compliance with the Regulation.

First Aid Assessments must be conducted at least annually, and these assessments will identify the level of first aid certification, first aid supplies and necessary equipment required in each workplace. The Joint OHS committee will have a significant role in the conducting of these assessments. A First Aid Assessment tool is available on the BC Public Service Agency OHS website. The WorkSafeBC web site provides details of how First Aid Assessments should be conducted. The OHS regulation specifies that

First Aid Records must be confidential, must be maintained for at least 3 years and must be made available to WorkSafeBC officers upon request. It also outlines the **Responsibilities of First Aid Attendants** and indicates that they have full authority and responsibility for the injured worker—and the incident scene—until relieved by a higher medical authority.

Schedule 3-A Minimum Levels of First Aid right after OHS Regulation 3.21 provide further information about recommended levels of first aid certification, the first aid supplies, equipment and facility that the employer must provide and what transportation arrangements must be in place in the event of a worker’s medical emergency.

If someone is injured at work, it’s essential that they report the circumstances—including date, time and location of occurrence, what happened to cause the injury and the names of any witnesses to both their supervisor and the First Aid Attendant. The First Aid Attendant will record the incident in the First Aid Record Book and these records will be maintained even if no treatment is required at the time.

Workers should know how to contact their First Aid Attendants. The Attendants’ names (photographs would be helpful too) and phone numbers should be posted prominently throughout the workplace.

Types of First Aid Attendants and Training Programs

The Board recognizes three types of Occupational First Aid attendants: Level 1, Level 2, and Level 3. The Board has developed training courses for each of these levels as well as endorsement training courses that are available to Level 1, Level 2, and Level 3 attendants.

All certificates and certificate endorsements are valid for 2 years. Extensions of the duration of certificates are not permitted.

Level 1 First Aid Certificate

Level 1 certification requires successful completion of an Occupational First Aid Level 1 training course. This is a 7-hour course. Renewal of Level 1 certification requires successful completion of the full course. In some circumstances, restricted Level 1 certificates may be issued to firefighters employed by municipal fire departments who have not taken the course.

Level 2 First Aid Certificate

Initial Level 2 certification requires participation in a 36-hour training course and passing an examination acceptable to the Board. Renewal is normally accomplished by retaking the course and exam; however, the candidate may elect to take the exam without additional training. Based on qualifications and experience, restricted Level 2 certificates may be issued to physicians and registered nurses in hospitals and to firefighters in municipal fire departments who have not taken the course.

Level 3 First Aid Certificate

Initial Level 3 certification requires participation in a 70-hour training course and passing an examination acceptable to the Board. Renewal is normally accomplished by retaking the 70-hour course, or a 35-hour refresher course, before taking the exam; however, the candidate may elect to take the exam without additional training.

Transportation Endorsement

A Transportation Endorsement for a Level 1 or Level 2 first aid certificate requires the certificate holder to successfully complete a 7-hour Occupational First Aid Transportation Endorsement training course.

Occupational Health and Safety—Joint Committee

Other training courses, providing they meet specific standards set by the Board and are approved by the Board, may qualify candidates for equivalent Level 1, 2, and 3 certifications, or a transportation endorsement. These other courses, however, cannot be titled Occupational First Aid Level 1, Occupational First Aid Level 2, Occupational First Aid Level 3, or an Occupational First Aid Transportation Endorsement.

General recommendations for all first aid facilities

Location and access

A first aid facility should be located as near as practicable to the work area or areas it is to serve. It should be a room within a building or, if this is not practicable, a tent, vehicle, or other suitable structure.

The first aid facility should be designed and located for easy entrance to and exit from the facility for a worker requiring stretcher transport. A stretcher should not have to be tipped or turned to enter or exit the first aid facility.

In remote areas, building a first aid facility may not be practicable. However, the facility should be at least of the same design and construction as workers' lodgings. If trailers are provided for workers' lodgings, a trailer should be provided for the first aid facility.

When a tent is used, it should:

- ▶ Be of the same size and have the same equipment as a first aid room or dressing station, as appropriate
- ▶ Be fitted with a non-porous floor that can be cleaned with soap and water
- ▶ Have a source of heat that will provide sufficient warmth for good patient care (maintaining body temperature)

A first aid facility may be locked to prevent theft and vandalism or for other appropriate reasons. If so, there must be effective means of immediate access during all working hours.

Utilities

The facility should be adequately illuminated, heated, and ventilated. It should have a sink plumbed with hot and cold running water or, if this is not practicable, an alternative system for supplying fresh, potable water. If showering may be a required treatment for chemical exposure, the facility should have a shower or have a shower facility as near as practicable.

It may be impracticable to plumb a first aid facility in certain situations, such as where the facility is a trailer on a construction site or the work is at a remote location. In these cases, one of the following alternative sources of water, with means to heat it, may be considered until a permanent source of water can be connected:

- ▶ The facility has an internal tank able to hold a minimum of 45 litres (10 gallons) of fresh potable water, which can be pumped into the facility's sink. The water in this tank must be changed daily or changed weekly if treated for the prevention of contamination.
- ▶ The facility is connected to a hose or water line from a fresh potable water outlet that can be pumped into the facility's sink.
- ▶ The facility has an insulated container able to hold about 20 litres (5 gallons) of fresh potable water changed daily to prevent contamination.
- ▶ A fresh water supply company provides fresh water in a bottle or jug attached to a hot/cold dispenser.

Other recommendations

Since the facility must be kept clean and sanitary, a non-porous floor covering is recommended.

The facility should have a notice conspicuously displayed outside the door or in the area, indicating how to call and where to find the attendant.

The first aid facility is also subject to the general requirements relating to workplace premises in the OHS Regulation, for example, [sections 6.33 to 6.41 \(Biohazardous Agents\)](#) and [sections 4.81 to 4.83 \(Environmental Tobacco Smoke\)](#).

Smoking should not be permitted in a first aid facility, and “No Smoking” signs should be conspicuously posted.

Using a first aid facility for purposes other than first aid

A first aid facility may be used for purposes other than first aid if:

- ▶ It is immediately available for first aid treatment
- ▶ The facility is not at a remote workplace (more than two hours' surface travel from a hospital)
- ▶ The minimum floor area needed for first aid is maintained
- ▶ Such use will neither impede the treatment of an injured worker nor pose a hazard to workers

Open your first aid checklist on your smartphone WorkSafeBC App before inspecting your first aid room/supplies.

Indoor Air Quality and Mould

With increasing attention being paid to environmental issues—both outdoors and indoors—Indoor Air Quality (or IAQ) is inevitably going to come to the attention of Joint OHS Committee members. Indoor Air Quality issues are often hard to investigate because there are so many environmental pollutants.

Most modern office buildings lack opening windows and are dependent on ventilation systems to control temperature and humidity. These systems also control the amount of outdoor air that is brought into the building environment. In order for the air quality in an office to be acceptable, there must be:



- ▶ A sufficient supply of outdoor air
- ▶ A system with intake and discharge vents that are completely unobstructed
- ▶ Regular maintenance and appropriate cleaning of the ventilation system
- ▶ Fresh air intakes located outdoors and in a position that ensures the air entering the building does not contain more contaminants than the normal ambient air in that vicinity

Some of the common indicators of poor indoor air quality may include employee reports of headaches, drowsiness, nosebleeds and sore throats. Members of the Joint OHS committee should be made aware of complaints of this nature.

Section 4.79(1) of the OHS regulation states...: *The employer must ensure that the indoor air quality is investigated when*

(a) complaints are reported...

Section 4.79 (2) states...: *An air quality investigation must include...*

(a) sampling for airborne contaminants suspected to be present in concentrations associated with the reported complaints...

The JOHS committee should be involved in the investigation of complaints.

Indoor Air Quality should not only be assessed when complaints are reported, but also when substantial changes occur to the building's occupancy or when significant changes are made to the building's ventilation system. Often, third

Occupational Health and Safety—Joint Committee

parties (landlords, agencies other than the ministry) will need to be involved in addition to the employer.

Joint OHS committee members also need to be vigilant in looking for signs of mould in the workplace. A visual inspection is the most reliable method of identifying mould and signs to watch for include:

- ▶ Water damage
- ▶ Discolouration
- ▶ Stains (moulds often appear as dark spots or stains or patches)
Mould needs a moist environment to thrive and moisture is usually present in buildings as a result of:
 - ▶ Flooding
 - ▶ Leaks in the building envelope
 - ▶ Sources of standing water
 - ▶ Higher than normal humidity
 - ▶ Buildings which were sealed during construction (presenting a barrier to escaping moisture)

Sometimes mould may be indicated by workers' reports of eye irritation; unusual and persistent coughing or congestion; headaches; runny noses and general breathing difficulties.

The BC Public Service Agency offers a “first response” service when IAQ complaints are received. Trained staff will conduct testing, analyze the results and make recommendations. For further information, contact a BC Public Service Agency OHS Specialist.

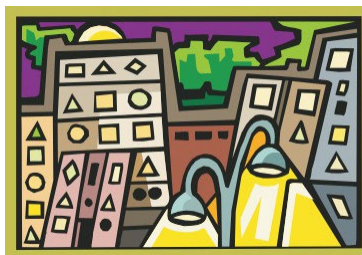
Another source for information is The Canadian Centre for Occupational Safety & Health (CCOHS). Contact them at www.ccohs.ca



Lighting

Section 4.65 Illumination Levels of the WorkSafeBC OHS Regulation specifies that:

- ▶ An employer must provide and maintain minimum illumination levels to ensure safe working conditions, safe passage and the identification of hazards or obstructions
- ▶ in areas of low activity, such as parking lots, building exteriors and basements
- ▶ in areas of high activity, such as frequently used walkways and building entrances and exits
- ▶ for tasks which require the ability to distinguish detail



Specific measurements of the lux levels (the “lux” is the metric unit of light measurement, replacing the foot-candle) required by different tasks and work environments can be found in Table 4—1 Illumination levels for task categories in **Part 4 General Conditions—Illumination** of the OHS Regulation. Go to www.worksafebc.com [Illumination](#) for further information.

Section 4.69 Emergency lighting requires the employer to provide an emergency lighting system capable of dependable illumination while the primary lighting system is off.

The purpose of an emergency lighting system is to enable all emergency measures to be carried out, including:

- ▶ emergency shutdown procedures, and
- ▶ evacuation of workers from the premises

Emergency lighting systems are not designed to provide illumination to sustain the ongoing operation of the workplace. In fact, the average battery life of an emergency lighting unit is 10-20 minutes; just enough time to carry out the emergency measures identified above.

Two lighting issues that are often brought to the attention of JOHS committee members are general concerns about **fluorescent lighting** and, on occasion, specific requests for “full-spectrum” lighting in the workplace.

Fluorescent lights can produce “light-flicker” caused by the quick, repeated changes in light intensity. Humans cannot “see” fluorescent lights flicker, but somehow some individuals can sense this phenomenon. For these people, the stroboscopic effect of light-flicker may produce eye-strain, headaches and sometimes even migraines.

Flicker is usually only a potential problem with lighting that requires ballasts, like fluorescent lights. The type of ballast—which controls the electrical supply to fluorescent lights—affects the amount of flicker. Electronic ballasts, which are more energy-efficient than conventional ballasts, convert electrical power to voltages at a much higher frequency. The resulting fluctuations in light intensity cannot be detected by the human eye, making the fluorescent lights essentially “flicker-free.” An additional benefit is that electronic ballasts produce less “hum” than that emitted by other types of ballasts.

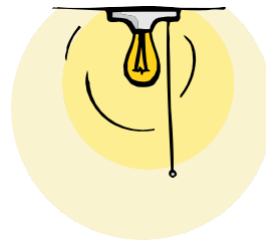
As a member of the JOHS committee, you should check the fluorescent lighting in your workplace as part of your regular safety inspections and ensure that bulbs/tubes are replaced on a regular basis. Old fluorescent bulbs/tubes tend to flicker more because they are not as bright. Ballasts should be checked regularly by the staff responsible for maintenance in your workplace and when replacements are needed, your committee may choose to recommend that electronic ballasts be used.

Full spectrum lighting was a term coined by Dr. John Ott in the 1960’s to describe the light of the sun at noon. Full spectrum bulbs are designed to mimic this light.

Full spectrum bulbs/tubes are more expensive to purchase and operate than conventional light sources. Many people express personal preferences to work under full spectrum lighting. However, a Canadian government study in 2001 found that:

“the best studies show that there is generally no intrinsic benefit to a full-spectrum fluorescent lamp in comparison to other common electric light sources.”

For further information on these topics, please see www.ccohs.ca



Noise

Noise is one of the most common hazards of the workplace and some jobs are noisier than others. Workers could be exposed to a potential health hazard if working in a noisy environment over a long period of time. The long-term impact of exposure can adversely affect workers' hearing and health. Hearing loss is a gradual process and most people will not notice the loss of ability to hear until it's too late.

Some of the common symptoms of hearing loss may include:

- ▶ Not being able to converse with another worker at arm's length without having to raise your voice
- ▶ Getting into your vehicle for the drive home from work and having to turn up the volume on your sound system in order to hear it properly
- ▶ Thinking that someone turned up your car radio during the night because the volume seems uncomfortably loud first thing in the morning when you're on your way to work



If you notice any of these conditions, it may be an indicator that the noise level in your workplace needs to be checked.

For more specific information, check out **Part 7**, Noise, Vibration, Radiation and Temperature, **Division 1**, [Noise Exposure](#), of the WCB OHS Regulation at www.worksafebc.com

Working Alone or in Isolation

Section 4.21 of the OHS Regulation (see www.worksafebc.com) establishes the employer's responsibility to develop written procedures for checking the well-being of anyone who is appointed to work alone. These procedures must include:

- ▶ The time intervals between checks
- ▶ A protocol to be followed in the event that the worker cannot be contacted
- ▶ Provisions for emergency assistance/rescue if necessary



Working alone procedures must be reviewed at least once a year or more often if there is a change in work arrangements and employers must ensure that workers who work alone or in isolation—and the people responsible for checking on them—receive training in these policies and procedures.

It is especially important—in fact it's mandatory—that young or new workers be trained on these protocols before they begin work (OHS Regulation, Section 3.23—Young or new worker orientation and training). As a JOHS committee member, you should be regularly reviewing your employer's orientation check-list records to ensure that this is happening.

The employer must designate a person to establish contact with the worker and the results of those contacts must be recorded. In addition to the checks that must occur at regular intervals throughout the workday, a check must also be done at the end of each shift.

Ideally, the check-in procedures should be developed in consultation with the Joint OHS committee. The specific intervals for check-in should be developed with the input of the worker who will be assigned to work alone or in isolation. The higher risk the activity, the shorter the time intervals between checks will be. The preferred method for checking is visual or two-way voice contact. If such a system is not practicable, a one-way system that allows the worker to call or signal for help (or which will send a call for help automatically after a pre-determined interval without a check-in) is required.

Occupational Health and Safety—Joint Committee

Workers should never be required to work alone in potentially dangerous situations.

If a worker in these circumstances feels that their personal safety is threatened, they must follow the established protocols and should leave the workplace immediately. When they are in a safe place, they should contact their supervisor to report their concerns.

Emergency Preparedness

It has often been said that the most effective safety device ever invented is your own knowledge.

Information—plus some fundamental knowledge about what to do in a variety of emergency situations—should help protect you and those around you from harm.

Find out what the **emergency phone numbers** are for your location. Write them down and keep them where you'll be able to find them quickly and easily if you need them.

Don't rely on your memory; in a crisis even frequently used numbers can be forgotten.

It is recommended that you keep some emergency supplies on hand:

- ▶ Non-perishable foods
- ▶ A supply of water (change it every week)
- ▶ A flashlight and batteries
- ▶ Comfortable shoes
- ▶ Any prescription medications that you may need

The more you are prepared, the better you can act and minimize panic or confusion when an emergency occurs. No matter what the crisis, **STOP** and **THINK** before you **ACT**, then proceed to minimize your exposure to danger.

Prepare yourself and your family at home so they will know what to do, where to go and how to cope until you are able to get home.

It is the policy of the provincial government that employees have the opportunity to ensure that their families are safe and secure before returning to work after a disaster. If you are at work at the time of an emergency, consult your supervisor to see when you can go home.

Know what to do if an **earthquake** occurs.

DROP
COVER
HOLD ON



Get under a table or desk if you can. Don't stand in a doorway. Stay away from objects that might fall on you. Keep well away from glass, as it might shatter. Grab a table leg or other solid object and hold on until the shaking stops.

When the earthquake is over, stay where you are! Many people make the mistake of going outdoors following an earthquake, but the outdoors can be a very hazardous environment.

The **only** reasons for leaving a building following an earthquake are:

1. the building is on fire
2. the building is falling down around you
3. there is a gas leak



Otherwise—stay put!

If you must leave the building, know how to evacuate your worksite safely and know where your designated assembly point is. Learn the location of fire-fighting equipment but don't try to be a hero. Sound advice would be that unless you're trained in fire-fighting techniques, never try fighting a fire that has grown larger than a wastebasket. If you become aware of a fire, the safest course of action is always to activate the alarm and evacuate the building.

Risk assessments must be conducted on a regular basis; as a member of the JOHS committee, you should have information about the most recent risk assessment at your worksite.

Your employer will provide you with written instructions and train your colleagues on safe emergency procedures at your workplace.

Biohazards and Blood Borne Pathogens

Biohazards are pathogenic (that is, they are biological agents that cause disease or illness in the host).

They can enter the body through:

- ▶ Inhalation (breathing)
- ▶ Absorption (skin contact)
- ▶ Ingestion (swallowing)
- ▶ Subcutaneous (accidental needle prick)



Generally, the effects of biological hazards are not as well-known as those of physical or chemical hazards.

What is known is that they include viruses and bacteria and that they can be transmitted by plants, animals, insects or parasites and harmful by-products of living organisms.

Pathogens can be transferred:

- ▶ By blood and all body fluids, secretions and excretions (except perspiration) regardless of whether or not they contain visible blood
- ▶ Through non-intact skin
- ▶ Via mucous membranes

To prevent biological infection

- ▶ Always wear personal protective equipment prior to any anticipated contact with blood or body fluids or other biohazardous materials
- ▶ Wash your hands (use antiseptic if dealing with an infected person or object) before and immediately after gloves are removed
- ▶ Check with your colleagues on the Joint Occupational Safety and Health committee to ensure when the workplace ventilation system was last cleaned and serviced
- ▶ Make sure you are immunized if at risk of exposure to an infectious disease (all Public Sector First Aid Attendants are offered no-cost vaccinations against Hepatitis B)

- ▶ Do not try to clean up any substance unless you have been properly trained in sanitization procedures (you could increase the risk to yourself and other workers)
- ▶ Consider all sharps as potentially infectious
- ▶ Handle sharps using the safe work procedures outlined in the “Sharps” section of this handbook on page 80
- ▶ Dispose of all sharps in approved Sharps containers immediately
- ▶ Know post-exposure protocols. If you are accidentally exposed to an infectious disease (e.g. through a needle-stick injury) seek First Aid
- ▶ Only use resuscitation devices with one-way valves for manual ventilating
- ▶ Ensure that you pursue education and training provided by your employer

Accidental exposures to blood and body fluids pose the risks of contracting

- ▶ Hepatitis B
- ▶ Hepatitis C
- ▶ H.I.V. and A.I.D.S.
- ▶ Other infections

If blood or any other bodily fluid comes in contact with an open wound or your eye(s) or your mouth or your nose:

STOP what you are doing immediately!

CLEANSE your eyes or mouth or nose by rinsing them well with water or a normal saline solution

WASH your skin well with soap or a 4% concentration of Hibitane (Hibitane is an antiseptic)—chlorhexidine gluconate—effective against a wide range of bacteria, yeasts, some fungi and viruses and is used for disinfection of the skin) and water.

For a needlestick, wash well with soap or a 4% concentration of Hibitane and water

DO NOT try to promote bleeding by cutting, squeezing or puncturing the skin



Occupational Health and Safety—Joint Committee

SAVE the needle (or whatever stuck you)—without washing it—in a new, clean Sharps container or in a sterile puncture proof container and transport it to the hospital with you

NOTIFY your First Aid Attendant and Supervisor right away!

REPORT to the nearest Hospital Emergency Room immediately!

After your medical assessment and diagnosis, make sure that you closely follow the doctor's advice and course of treatment.

There will be a Joint Incident Investigation following the event. Be sure to cooperate fully and provide the investigating team with all the information related to your incident. The purpose of the investigation is to ensure that similar incidents do not recur. Your employer should have post-exposure protocols (you should be advised of them when you report the incident); be sure to follow them.

For more information, please refer to the joint *"Guide to Prevention and Control of Infectious Diseases in the Workplace"* available in hard-copy through the BCGEU and electronically on the BC Public Service Agency website [here](#).

Infectious Diseases

Much information is readily available on this topic. Please see: "[HIV/AIDS, AND HEPATITIS B AND C Preventing Exposure at Work](#)" at www.WorkSafeBC.com

Other potential sources of information include:

- ▶ BC Centre for Excellence in HIV / AIDS at St. Paul's Hospital in Vancouver
- ▶ The physicians and nurses at any office of the BC Public Service Agency's Occupational Health Programs
- ▶ The nearest Public Health Unit
- ▶ www.WebMD.com



What is AIDS?

AIDS is caused by the Human Immunodeficiency Virus (HIV). When HIV enters the body, it infects the cells that the body needs to fight infection and gradually destroys the body's immune system. As a result, the body is unable to resist illnesses and infections, many of which (such as pneumonia) are serious enough to cause death.

There is no cure for HIV infection or AIDS but there are drugs that can help people live longer. There are also drugs called **anti-retrovirals**, which are administered after a person has been exposed to blood and certain body fluids to lower the risk of HIV infection. It is believed that taking these drugs for a month following an exposure incident reduces the risk of becoming infected by about 80%.

What is Hepatitis?

Hepatitis is a virus that affects the liver. The symptoms are severe but for Hepatitis B are very seldom fatal and most people with Hepatitis B completely recover with time.

Hepatitis C can cause acute and chronic liver disease and is more likely to lead to liver cancer than Hepatitis B.

While there is no cure for either Hepatitis B or C, there is a vaccine for Hepatitis B that works more than 95% of the time when administered to healthy individuals. That's why First Aid Attendants in the BC Public Service are offered free Hepatitis B vaccinations.

Since there's no cure for AIDS or Hepatitis B and C, it's particularly important to prevent them.

How are HIV and Hepatitis B and C spread?

HIV and the Hepatitis B and C viruses can all be spread by infected blood and certain body fluids.

Body fluids that **do not** spread HIV and Hepatitis B and C—**unless you can see blood in them**—include tears, nasal secretions, sputum, sweat, vomit and bladder and bowel excretions.

How are people exposed to infected blood and body fluids?

The two most common ways in which people are exposed are:

- ▶ Participating in unprotected sex
- ▶ Sharing injection needles with an infected person

Are HIV and Hepatitis B and C spread by casual contact?

No. You **cannot** get HIV and the Hepatitis B and C viruses from casual contact such as:

- ▶ Shaking hands
- ▶ Having someone cough or sneeze near you
- ▶ Mosquito or other insect bites
- ▶ Sharing phones, workstations or other office tools or equipment
- ▶ Sharing washrooms or cafeteria facilities
- ▶ Swimming in a pool, showering in a locker room or using a hot tub

As a member of a Joint OHS committee, you can play an important role in helping the employer, which is responsible for implementing an exposure control program; ensure that workers are prepared for unexpected contact with blood and certain body fluids by:

- ▶ Participating in developing hazard awareness campaigns
- ▶ Promoting worker attendance at training sessions
- ▶ Reviewing safe work practices
- ▶ Helping to select tools, equipment and Personal Protective Equipment (PPE)

- ▶ Participating in workplace safety inspections to identify potential hazards
- ▶ Reviewing accident and incident reports

To safely clean up and disinfect contaminated areas if a blood or body fluid spill occurs:

1. Put on all appropriate Personal Protective Equipment.
2. Use disposable towels to clean up all visible material. Discard the towels in a waterproof garbage bag. Seal the garbage bag.
3. Disinfect the area with a fresh bleach solution. A solution of 1 part of common household bleach to 100 parts of water will kill HIV and the Hepatitis B and C viruses. Leave the solution on for 10 minutes. In the event of the spill of a large amount of blood, increase the strength of the solution to 1 part of common household bleach to 10 parts of water.
4. General caution: never mix cleaning chemicals such as bleach and ammonia.

The right to privacy

Workers with HIV / AIDS and other bloodborne diseases have a right to privacy and are not legally obliged to tell employers or co-workers about their medical conditions.

If you know that a colleague has a bloodborne disease, you **do not** have the right to share that information unless you have the individual's permission to do so.

Some people have refused to work with or help people they thought had HIV / AIDS. This reaction is based on false beliefs about how HIV / AIDS is spread. There is no reason to stop individuals with HIV / AIDS from working. If they are well enough to perform the job, they **must** be permitted to work.

Tuberculosis

What is Tuberculosis?

TB is a bacterial infection most often found in the lungs. It is easily spread to other people through coughing, sneezing, laughing or singing. Treatment is often successful, although the treatment process is long and averages between 6-9 months.

How is it spread?

Active TB in the lungs (Pulmonary TB) is communicated when a person with the active disease exhales air containing TB-causing bacteria and another person inhales the bacteria from the air.

How is it diagnosed?

TB is often confirmed through a skin, blood or sputum test. Chest X-Rays are also sometimes used.

How is it treated?

Usually, a combination of 4 antibiotics taken over the course of 6-9 months is sufficient to cure a person with active tuberculosis. A case of latent (non-communicable) tuberculosis is usually successfully treated with 1 antibiotic over the same period of time.

What can I do to avoid getting TB?

- ▶ Do not spend long periods of time in stuffy, enclosed rooms with anyone who has active TB unless that person has been treated for their tuberculosis for at least 2 weeks
- ▶ Use protective measures—such as face masks—if you work in a facility that provides care for people who have untreated TB
- ▶ If you think you may have been exposed to a person with active TB, report to your doctor immediately. Follow your physician's advice and recommended treatment plan

For further information, see the joint *“Guide to Prevention and Control of Infectious Diseases in the Workplace”* available in hard-copy through the BCGEU or on-line at the BC Public Service Agency OHS website [here](#).



Sharps

Needles, knife blades, box cutters and other sharp surfaces may carry biohazards including HIV and hepatitis B and C viruses.



Workers need to be trained in workplace procedures related to bio-hazardous materials. Workers should not be expected to reach into any container without prior knowledge of the exact contents and appropriate Personal Protective Equipment provided by the employer.

Workers are not required to pick up sharps or anything else that might represent a hazard unless they have the proper personal protective equipment and necessary tools to do so and have received appropriate training.

The employer must supply impervious gloves and tongs or pliers to pick up and move needles and other sharps. Sharps must always be placed—**pointed end first**—into an approved container for sharps disposal.

Never dispose of sharps in the garbage under any circumstances.

If your skin is punctured by a sharp, seek first aid immediately and if the sharp may have been contaminated, seek medical attention—preferably within two hours.

Section 6.36 (1) of the OHS Regulation states that

“Engineering controls and work practice controls must be established to eliminate or minimize the potential for occupational exposure to a bloodborne pathogen or other biohazardous material.”

As of 2008, any medical sharp used to care for or treat a person must be a safety-engineered medical sharp, safety-engineered hollow bore needle or a needleless device.

A safety-engineered medical sharp is defined by Regulation as *“a medical sharp with a built-in safety feature or mechanism that eliminates or minimizes the risk of . . . contact while or after the sharp is used.”*

A *“safety-engineered needle includes a self-sheathing needle device and a retractable needle system.”*

See www.worksafebc.com for further information.

Pandemic Planning

Almost everyone gets the ‘flu from time to time. Influenza is a common virus that is present primarily on a seasonal basis.

But a pandemic is different and potentially very serious. A **pandemic** is a *worldwide epidemic which may constitute a global health emergency*. Influenza pandemics have the capacity to cause serious mortality and morbidity as the population has little or no immunity to the circulating strains of influenza. Pandemics occur every 35-40 years and the most recent one was the “COVID-19” in 2020. It will happen again—we just don’t know when—and we all need to be prepared.

How will it affect workplaces?

- ▶ It is estimated that 10%—50% of employees may be absent
- ▶ Portions of some workplaces may have to be shut down
- ▶ Essential roles will have to be identified in advance and back-ups trained
- ▶ Infection control policies and procedures will have to be in place
- ▶ An effective communication strategy will be essential
- ▶ Appropriate Personal Protective Equipment (PPE) will have to be made available by the employer, who will be responsible for ensuring that workers are fitted properly with PPE and trained appropriately on its use
- ▶ Sick workers should be encouraged to stay home

What should individuals do?

- ▶ Pay attention to local news bulletins
- ▶ Follow instructions/advice from public health officials
- ▶ Ensure that you have a fully stocked first aid kit
- ▶ Be prepared for the closure of many public institutions you regularly use (such as hospitals, medical clinics, schools, retailers); develop alternative strategies if possible
- ▶ Arrange for enough supplies so that you can be self-sufficient for up to two weeks in case you get sick or need to stay home to care for a sick family member

- ▶ If you are concerned that your workplace may be unsafe because too many people are off sick, talk to your supervisor

Protective Measures

- ▶ Follow effective procedures about infection control practices, such as hand washing
- ▶ Wash or sanitize your hands before touching, eating or preparing food and after sneezing, coughing or using the washroom
- ▶ Avoid coughing into your hands. Use the crook of your elbow if you don't have tissues
- ▶ Keep your hands away from your face. The 'flu enters your body when germs get on your hands and you then touch your eyes, nose or mouth
- ▶ Determine if you need to use Personal Protective Equipment at work
- ▶ If you have the 'flu—or think you might—stay home. Staying home when you're sick and regular, thorough hand-washing are the most effective ways to help stop the spread of a virus



A lot more information about [planning for pandemics](#) is available on the internet. The British Columbia Centre for Disease Control (www.bccdc.ca) and the Canadian Centre for Occupational Safety and Health (CCOHS) have excellent content on their websites.

The JOHS committee should ensure that the employer has a comprehensive pandemic response plan in place and is prepared to provide adequate Personal Protective Equipment.

Heat Stress

Working in hot environments puts stress on the body's natural cooling system. When heat is combined with hard physical work, the loss of fluids through perspiration can cause fatigue or heat related illness and disability or even death may result. This can happen no matter what the age or physical condition of the worker.

Our bodies are usually very effective at regulating their internal temperatures. If we get too cold, we start to shiver—which is the body's way of trying to warm up. If we get too hot, we start to perspire—which is the body's method of releasing heat so that we can cool down.

But sometimes the body can't release enough heat to cool down sufficiently and our internal temperature rises. When that happens, we become vulnerable to heat stress and ultimately heat stroke which could lead to death.

The risk of heat stress increases depending on the outside temperature, the humidity level and what kind of work is being done.

Following **precautionary principles** to alleviate the effects can help protect our bodies from heat stress.

- ▶ If you're doing hard physical labour in hot conditions, the employer must provide regular breaks. If you're working indoors and it's hot, the employer should provide an electric fan or other appropriate means to circulate the air—you'll feel cooler because circulating air evaporates perspiration more quickly
- ▶ Drink lots of water. In these conditions the employer should ensure that an adequate supply of drinking water is available. During periods of physical exertion—especially in hot conditions—your body will need several litres of water each day to replace the fluids lost through perspiration
- ▶ Wear loose fitting clothing made of light materials. This will permit more air circulation close to the surface of your skin
- ▶ If you're working outdoors, wear light-coloured clothing. It absorbs less of the sun's heat than does dark clothing and you'll feel noticeably cooler

- ▶ The employer should schedule periods of peak exertion for cooler times of the day
- ▶ Physical exertion in hot conditions has an adverse impact on the human body. To acclimatize to hot conditions takes the human body up to two weeks
- ▶ All workers exposed to heat stress must be adequately trained to recognize the signs and symptoms of heat-related disorders. If you experience any of the signs or symptoms of heat stress, remove yourself from the hot environment right away and immediately arrange to be assessed by a Level 2 or 3 First Aid Attendant or by a physician

Early signs and symptoms of heat stress include:

Fatigue
Headaches
Dizziness
Loss of appetite
Nausea
Abdominal pain
Vomiting
Shortness of breath
Flushing of face and neck
Glazed eyes
Psychological disturbances such as apathy, poor Judgment and irritability



Heat exhaustion occurs when the body loses an excessive amount of fluid or salt because of inefficient sweating and inadequate fluid replacement.

Heat stroke—the most serious heat stress illness—occurs when the body temperature reaches a level at which sweating stops. Tissue damage and death may result.

For further information, please refer to **Part 7**, Noise Vibration, Radiation and Temperature, **Division 4**, [Thermal Exposure](#) of the WCB OHS Regulation at www.worksafebc.com

Also, the Canadian Centre for Occupational Safety & Health (CCOHS) has excellent resource materials and reference information available. Visit their website at www.ccohs.ca

Worker Protection in relation to Prohibited Actions

Part 2 Division 6 of the *Workers' Compensation Act* protects workers from prohibited action by either their employer or their Union with respect to any action the worker may take in connection with the *Workers' Compensation Act*, Regulation or any order WorkSafeBC may issue.

In this instance, the prohibited actions and protections are specifically defined.

Section 48 states that:

An employer or Union (or any person acting on their behalf) must not take or threaten prohibited action against a worker

- (a) for exercising any right or carrying out any duty in accordance with (the Workers' Compensation Act), the regulation or an applicable order*
- (b) for testifying about an issue related to occupational safety and health or occupational environment*
- (c) for providing any information about OHS issues or the OHS environment to:*
 - i. an employer or their representative*
 - ii. another worker or their Union*
 - iii. a WorkSafeBC officer*

Section 47 defines prohibited **action** as including:

- (a) suspension, lay-off or dismissal*
- (b) demotion or loss of opportunity for promotion*
- (c) transfer of duties, change of location of workplace, reduction in wages or change in working hours*
- (d) coercion or intimidation*
- (e) imposition of any discipline, reprimand or other penalty, and*
- (f) the discontinuation or elimination of the job of the worker*

Occupational Health and Safety—Joint Committee

Section 49 states that a worker who feels they have been the object of prohibited actions covered by Part 2 Division 6 may either have the matter dealt with through the grievance procedure under a collective agreement or may make a complaint in writing to WorkSafeBC.

If such a complaint involves the failure to pay wages, the complaint must be made within 60 days after the wages become payable. For all other prohibited actions under this Section, the complaint must be made within 1 year of the specified action.

For further information, go to www.worksafebc.com

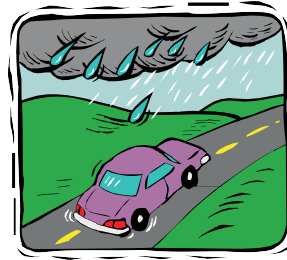


Vehicle Travel

As a JOHS committee member, you have an important role to play in making certain that workers have received appropriate training on how to inspect a vehicle being used for work prior to its use. Employers should make available a vehicle inspection check-list and provide sufficient time for the following activities:

Before traveling inspect the vehicle and:

1. Ensure that the vehicle is in good driving condition. If it's winter, are appropriate tires installed?
2. Ensure that the vehicle has a fully-stocked survival kit—including first aid supplies—and that it's easily accessible from the passenger cabin and not kept in the trunk.
3. Check that the survival gear is adequate for the number of people who will be in the vehicle.
4. Check the road conditions with the Ministry of Transportation and Infrastructure (MoTI) and with the police—both locally and for your destination.
5. Check weather conditions for your travel route using both the radio and the internet.
6. **Do not travel** if the police, the weather office or MoTI have issued travel advisories or warnings.
7. Inform your worksite when you will be leaving, what route you will be taking and when you expect to arrive at your destination.
8. Ensure that there is adequate and appropriate clothing for everyone in the vehicle. This should include:
 - a. Rain protection and/or cold weather outerwear
 - b. Two sets of footwear
 - c. A complete change of clothes from the underwear out
 - d. Mittens or gloves
 - e. A hat or other head covering to both prevent heat loss and provide ear protection



During the trip:

1. Employers must ensure that workers have adequate and functional means of communication and that there is a check-in procedure in place. See the section on *“Working Alone or in Isolation”* on page 69 of this handbook.
2. If able, advise your worksite of any delays so they will know you are safe. (This process should be covered by the employer’s Working Alone or in Isolation procedures and training.)
3. In the event of any breakdowns or accidents, follow the process outlined in your working alone procedure, which should cover how and who to report to.
4. Employers should ensure that emergency situations in adverse weather conditions are covered in Working Alone or in Isolation procedures and training.

If a worker becomes stranded: the workplace procedures must cover:

1. How to notify the police or appropriate personnel for assistance and the check-in contact person for your worksite.
2. Do not attempt to travel until the authorities have confirmed that it is safe to do so.
3. **Do not leave the vehicle** in an attempt to “walk-out”. Utilize the survival gear in the vehicle and wait for assistance to reach you.



Refer to the procedures for *“Working Alone or in Isolation”* in this Handbook on page 69.

When you arrive at your destination check in with the appropriate contact person to let them know that you’ve completed this portion of the trip safely.

WHMIS / SDS

Chemicals and other toxic substances may present risks to the health of workers but unlike the immediate injury caused by an accident, the adverse effects of exposure to chemicals may take several years to become evident.

In many jobs, workers are exposed to dust, fumes, gases or chemical vapours. It has been estimated that over 500,000 chemical substances are present in workplaces worldwide; 25,000 of these substances are known to be toxic.

The WHMIS (Workplace Hazardous Materials Information System) program requires mandatory training so that you and your colleagues will know what chemicals are used in your worksite. For each chemical that you may be working with—or exposed to—you have a right to review an up-to-date MSDS (Material Safety Data Sheet) prior to working with that chemical.

WHMIS labels will in most cases have the following information:

- ▶ A product identifier
- ▶ A hazard symbol
- ▶ A risk phrase and precautionary statement—including safe handling instructions
- ▶ First aid measures
- ▶ Supplier information
- ▶ An SDS reference

You should always review an **SDS** prior to handling any hazardous material. **Safety Data Sheets** provide more detailed information than there is room for on a WHMIS label. Included in this important information is:

- ▶ Hazardous ingredients
- ▶ Properties and potential hazards of the product
- ▶ How to use the product safely
- ▶ What to do in an emergency

Your employer is responsible for training workers on how to interpret and use the information on SDS's.

Occupational Health and Safety—Joint Committee

As a member of the JOHS committee, you have a significant responsibility in ensuring:

- ▶ That everyone in the workplace regularly attends WHMIS training
- ▶ That SDS's are kept current and are readily available
- ▶ That all workers know where they can access the SDS's

For more information, see the WorkSafeBC publication "[*WHMIS At Work*](#)" available on their website www.WorkSafeBC.com or the "*Workplace Safety Guide*" available through the BCGEU, the BC Public Service Agency OHS website and many public sector employers.

You will also find WHMIS training available on the BC Public Service Agency OHS website.



How Do I Get OHS Training?

Some training programs—such as WHMIS—should be available to you at your worksite. Ask your supervisor.

Other OHS training, including the two-day training for Joint OHS Committee members, is available through the BC Public Service Agency’s **Learning Hub**. You can access their website at:

<https://learningcentre.gwww.gov.bc.ca/learninghub/?s=OHS>

There you will find a list of current training offered and the dates and locations. In addition to the Joint OHS Committee training, courses are available on:

- ▶ OHS Risk Assessment Office Ergonomics
- ▶ OHS Risk Assessment Violence
- ▶ Accident/Incident Investigation



Other OHS courses will be added to this list in the future.

Click on the “View Our Courses & Register” link and follow the instructions.

Remember, as a JOHS committee member, you are entitled to 8 hours of OHS-related training every year. Many WorkSafeBC-approved OHS courses are available. If you find a training session that you’d like to attend, discuss it with your supervisor.

WHMIS training is available on the BC Public Service Agency OHS website.

You can also access training opportunities directly by contacting the BC Public Service Agency or the BCGEU.

Note: employees of some government organizations (like the Liquor Distribution Branch) may not be able to access the Learning Services Branch website. Please contact your organization’s Training Department for further information.

OHS Resources

If you have questions or need advice, support or direction on any OHS issue, expert help is readily available.

A BCGEU Safety Officer can be contacted at ohs@bcgeu.ca or call 604-291-9611

The **BC Public Service Agency** has both OHS Specialists and Corporate Advisors available for consultation. OHS Specialists can be reached at www.gov.bc.ca/myhr/contact or call 1-877-277-0772

Occupational Safety & Health—Joint Committee Handbook

Remember: You don't have to be a manager or an employer's representative to contact the BC Public Service Agency's OHS Specialists. And you don't have to be a Union member to contact a BCGEU Safety Officer. All are equally interested partners in ensuring that our workplaces are the safest they can be and any one of them would be pleased to discuss your issue with you.

In addition, you may also wish to refer to:

The Canadian Centre for Occupational Safety & Health (CCOHS)

www.ccohs.ca 1-905-572-2981

WorkSafeBC

www.worksafebc.com 1-888-621-7233



Occupational Safety & Health—Joint Committee Handbook



A series of 25 horizontal lines for writing, spaced evenly down the page.



—

—

|

|