

OCCUPATIONAL HEALTH & SAFETY NEWS

A newsletter published by the BCGEU
Occupational Health and Safety Committee

ISSUE THREE

Occupational Health & Safety News is published by the Occupational Health and Safety Committee of the Provincial Executive of the B.C. Government and Service Employees' Union.

In this issue:

'Give me a break'	...1
Chair's message	...2
OHS mandate	...3
OHS Committees	...4
Quilt for Life	...4
Problem solving	...5
Lifting agreement	...6
Emergency prep.	...6
Air quality	...7
Training schedule	...8
Prevent cancer	...8
Super bugs	...10

The B.C. Ferry and Marine Workers' Union, Brewery Workers' Union Locals 300 and 308, Grain Workers' Union Local 333 and the Union of Psychiatric Nurses are affiliated to the BCGEU.



'Give me a break'

A September 4, 2001 Arbitrator's decision has upheld Article 22.9 of the BCGEU Master Agreement which says that, "Employees who are required to operate VDTs on a continuous basis shall be entitled to two additional 10-minute breaks per work day to be scheduled by agreement at the local level."

The intent of this contract language is to help prevent injuries to the employee. The breaks are designed to be preventative initiatives and should be seen as such.

While some staff may not feel the need for a break or are aware of discomfort, it is important to take a break to avoid discomfort and pain.

"If you are having these symptoms you've likely been injured!," said Peg Orcheron, the shop steward that took on this issue. "This break should not be seen as a frivolous extra but something that has been negotiated on your behalf because of past hardships which led to the recognition of legitimate injuries which can occur while working at a VDT."

See Break on page 3

OH&S COMMITTEE:

Mike Clarke, *Chairperson*
Deb Foster, *Vice-Chairperson*
Mona Sykes, *Secretary*
Peter Dignard (1)
Bob Langley (2)
Val Cleary (4)
Ken Milligan (5)
Edna Park (6)
Fran White (7)
J. R. Waite (10)
Rusty Blanes (12)
Dave MacDonald (17)
Dean Draper (20)
Lorraine Ibbitson (UPN)
Brian Watson (GWU)
Steve Milne (BCFMWU)
(BWU) -TBA

Message from the Chair

By Mike Clark,
BCGEU Vice-President,
Chair, Occupational Health and Safety Committee

Cuts to the public service by the Campbell government is going to put increased pressure on all of us, especially around issues related to occupational health and safety.

Our latest OH & S newsletter offers numerous articles that will assist members facing these issues at their worksite. We're trying to provide a mix of stories about immediate concerns as well as some positive results.

A lot has changed since our last newsletter. Even the events of September 11th in New York City are being used as an excuse to deepen already severe cuts.

However, an immediate threat are the cuts being planned by the government.

We will very likely work in places that are more unsafe than they are today, and with less rights to do anything about it. I expect that the eight hours of annual educational leave for OH & S committee members will be gone.

How the Liberals plan to slash the Workers' Compensation Board (WCB) regulations is equally scary. You can bet your last dollar that it won't be changed in the direction of helping the workers. After all, this government's attitude is clear: no matter what the circumstance the employer knows best.

The WCB is being subjected to yet another core review. While workers input and concerns should be given equal weight in these discussions, it seems the only true reference to workers is within the actual title of WCB. This so-called review is yet another excuse to offer artificial opportunities for meaningful input. The open door policies this government promised are as two-faced as the politicians themselves.

The government has appointed Allan Winter to conduct the review. The B.C. Federation of Labour has made a presentation on the possible changes and the BCGEU submission will be presented soon.

Beyond the fact that the review process is severely flawed in that it is closed to the public, and far too short to seriously consider key issues, it was clearly stated that accident prevention and not profits should be the driving force for WCB. Check the B.C. Fed web site (www.bcfed.com) and the BCGEU web site (www.bcgeu.ca) for more information.

It is so obvious that the future is very uncertain for many of our members. With drastic cuts that this government has so blindly pursued, it will take a strong and collective resolve on the part of our activists to withstand the onslaught. Besides the more direct assault in downsizing the workforce, this government will also demolish previously held rights that many of us have used to make our workplaces safer and healthier. In many cases these rights have forced employers to do the right thing, because they have a legal obligation to do so. Very few employers will, out of the goodness of their hearts and concerns for their workers,

See Mike Clarke on page 3

The OH&S Committee's mandate is to:

- promote health and safety awareness at all levels of the Union
- review, develop and recommend union policy in health and safety
- assist in identifying problem areas needing priority attention or action plans
- recommend, promote and assist in the development of health and safety collective bargaining proposals
- review and make recommendations concerning health and safety training needs and assist in the budgeting process for training
- act as a resource for the Health and Safety Officer
- act as a contact group for and receive and act on information and requests from Component health and safety committees
- recommend topics and assist in the development of the quarterly OH&S bulletins
- receive and review major problems referred from reviews of worksite reports and committee minutes
- exchange information regarding health and safety issues and coordinate health and safety activities of all components and areas.

Mike Clarke from page 2

voluntarily make their workplaces safe. It is once again up to the little guy.

Two of our Provincial Executive Occupational Health and Safety long time activists are moving on to other things. Fran White from Component 7, and Steve Milne from our affiliate, the BC Ferry and Marine Workers' Union are going to get involved in other activities. For the many years I have known Fran, she has always been very helpful and knowledgeable about virtually any question an activist could ask. In my early years as an activist in Component 14, I can clearly remember Fran as one of the people I could turn to with endless questions, and always get a genuine and kind response, without ever feeling I was wasting her time. Her very supportive nature and wealth of information will be sorely missed. Enjoy your very well-deserved retirement Fran!

Jumping into the role of Chairperson for this Committee was at the very least a daunting experience. Not only was the task big in respect to beginning to understand the issues related to the Components within the BCGEU, but there was also many related issues that were of concern to our affiliates as well that I needed even more help with.

Thankfully, I had a tremendous resource in Steve, who it seemed was involved, or knew about virtually every health and safety issue his union had pursued. More often than not, he won significant decisions for his members. We wish him well in his new endeavors.

We will forge ahead in search of the next generation of activists, in the uncertain times before us.

Break from page 1

If you are in a work area where the majority of your day is working at a computer you may also be entitled to a 10 minute rest break. The Master Agreement provides for breaks for employees who operate

VDT's on a continual basis or for longer periods.

Members who feel they are entitled to these breaks or need more information should contact their steward for more information.

The B.C. Federation of Labour is looking for members willing to be trained as Occupational Health and Safety Trainers. Contact Jane Player, Project Coordinator at (604) 430-1421 ext. 251 or fax (604) 430-5917. Mailing address: 200, 5118 Joyce Street, Vancouver, BC V5R 4H1. Web site: www.bcfed.com.

Organization and responsibilities of Occupational Health and Safety Committees

Do you require a joint occupational health and safety committee or health and safety representative?

A joint health and safety committee is required in workplaces with 20 or more employees who are regularly employed. Yes, this includes part-time workers. A worker health and safety representative is required where there are more than nine but fewer than 20 workers regularly employed. Check your collective agreement and Workers' Compensation Board (WCB) minimum standards.

Responsibility for ensuring committees and representatives are in place:

It is the employer's responsibility to establish and maintain a joint occupational health and safety committee, or to make sure a worker health and safety representative is chosen.

When a committee is required, the employer and workers should determine the size of the committee - the minimum is four. At least half of the committee members should be worker reps who do not exercise managerial functions. These members are selected by the BCGEU. The employer selects employer reps from persons who exercise managerial functions. The committee must have two co-chairs, one selected by the worker reps and one selected by the employer reps.

'Quilt for Life' recognizes young workers killed or injured on the job

The Friends of the Quilt Committee is looking for names of young workers (ages 15-24) who have been injured or killed on the job. The names will be included on the *Quilt for Life*, a quilt mural being created by Toronto visual artist Laurie Swim with the help of volunteers from across Canada.

The Quilt is intended to be a lasting memorial to young workers who died or were injured at work. At the same time, it will spread a powerful message about the importance of prevention.

The centerpiece of the quilt is the image of a young person, overlaid with thousands of organza ribbons, bearing the names of young injured workers. Surrounding the centerpiece will be one hundred commemorative panels, each portraying a young worker who died on the job. Like the young workers they represent, each commemorative panel will be unique.

Laurie Swim's previous works, *Breaking Ground*, about the workers who lost their lives in the Hoggs Hollow tunneling accident, *Pulling Together*, about the building of the Rideau Canal and *Lost At Sea* about lost fishers, also honour working people. Ms. Swim uses the process of quilt building to build community as well, involving members of the community affected. The *Quilt for Life* will bring together families who have lost loved ones, as well as those injured at work. It will offer them an opportunity to share their stories in a unique way and in a way that contributes to the goal of prevention.

The centerpiece of the Quilt will be completed in November 2001, with the individual commemorative panels to be developed in time for the Day of Mourning, April 28, 2002. The finished work will tour across the country during the next two years. The *Quilt for Life* is supported by representatives from labour, business and government.

You can be part of this exciting and worthwhile project. Here's how:

- inform injured young workers and the families of young workers who died on the job about the Quilt,
- invite them to contact the Friends of the Quilt Committee to share their story,
- make a financial or in-kind donation to the project,
- volunteer to help construct the quilt.

For more information, contact Laura Pascoe at the Workers' Health and Safety Centre at 416-441-1939, 1-888-869-7950, laura@whsc.on.ca.

Included with this mailing of the Steward is a form for the *Quilt for Life* that you can complete and send in.

What does a joint occupational health and safety committee do?

The function of the committee is to improve health and safety in the workplace. Representatives ensure health and safety hazards are identified, complaints are promptly dealt with, and the regulatory as well as contractual health and safety language is complied with.

A worker rep also participates in workplace inspections, investigations (including accident investigations) and inquiries, as provided for under Section 130 of the *Occupational Health and Safety Regulations*. Committees are responsible for making recommendations on how to improve health and safety in the workplace. This includes identifying situations that may be unhealthy or unsafe, such as violence in the workplace and ergonomic issues. The committee has numerous functions, which are clearly outlined in the *Workers' Compensation Act*.

Are workers entitled to training?

Employers are required by law to provide training for committee members or representatives. Each member of the joint committee is entitled to annual education leave totalling 8 hours to attend occupational health and safety training. The employer must provide the leave at no loss of pay or other benefits, and must pay for any costs associated with the training. Your collective agreement may provide additional training days.

Continued on page 6

The following information on helping resolve occupational health and safety issues has been developed by the BCGEU. Forms used for this can be found with this newsletter:

Health and Safety Problem Solving

1. Identify and clarify the health and safety 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 health and safety risk from 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.

Do worker reps get paid for their work on the committee?

Employees who are committee members or representatives are entitled to time off work with pay for their participation in occupational health and safety activities. Employers are required to pay the committee members or representatives at the same rate they would have been paid if they had been performing their regular jobs.

Employer obligation to support committee

The employer has a responsibility to ensure committee representatives, upon request, receive information regarding orders, penalties and prosecutions relating to health and safety. Information relating to known or foreseeable health or safety hazards to which workers may be exposed must be made available. The employer is also responsible for providing the committee with equipment, premises and clerical personnel necessary for the carrying out of its duties and functions.

Employer must respond to committee recommendations

Management is allowed a 21-day time limit in which to respond to the occupational health and safety committee's recommendation. If the employer does not accept the recommendation of the committee it must supply the reasons in writing. A co-chair may report this matter to the WCB.

Lifting agreement reached

An unprecedented new agreement on manual lifting between health care unions, including the BCGEU, and health employers will go a long way to eliminating all unsafe manual lifting of patients and residents.

The new agreement comes as a result of the facilities subsector agreement.



"We are very pleased with this agreement since lifting has been a difficult part of the job of many workers in facilities," said Bobbi Pettet, the health facilities bargaining committee co-chair.

The agreement also calls on the employers to "...make every reasonable effort to ensure the provision of sufficient trained staff and appropriate

equipment to handle patients/ residents safely at all times, and specifically to avoid the need to manually lift patients/ residents when unsafe to do so."

The following issues will be taken up by the Occupational Health and Safety Agency for Healthcare:

- Work in partnership with the Workers' Compensation Board, the Ministry of Health and others to establish a financing framework to make funds available to purchase the necessary mechanical equipment;
- Finalize and distribute clear industry guidelines for safe patients/ residents handling;
- Encourage the full participation of the local joint Occupational Health and Safety Committee in the development, implementation and on-going monitoring of this goal;
- Recommend to the Ministry of Health that all new health care facilities be equipped with appropriate lifting equipment;
- Produce an annual report card on the progress to date including specific recommendations for the coming year.

Emergency preparedness

Every workplace should have written instructions and training in dealing with emergencies. Employees should know when and how to evacuate their workplace during an emergency.

Does your workplace have instruction and training/ equipment to deal with an earthquake, fire, security emer-

gency?

Knowing how to respond to an emergency and planning ahead can save lives and helps to promote a safer work environment for employees and the public. Evaluation means completely leaving the building to a designated area. Review the emergency plans for your workplace now.

In British Columbia:

- Three workers are killed on the job every week.
- 14 workers are permanently disabled every day.
- Young workers experience the most injuries.
- Injury rates are increasing for health care workers.
- Harassment, stress, and workplace violence contribute to occupational disease.

BCGEU members have the right to:

- be informed of workplace hazards
- receive quality health and safety training
- refuse unsafe work
- report hazardous conditions
- participate in improving workplace health & safety

Air quality issue shuts down B.C. Ferries route

Air quality concerns have been an ongoing concern for B.C. Ferry and Marine Workers' Union (BCFMWU) members on the B.C. Ferries route between Comox, Little River and Powell River. A number of ferries have run on the route, all with varying degrees of problems. Most workers hoped that the refitted *Queen of Burnaby*, to be used on the route, would have fewer problems.

It didn't take long for those hopes to be dashed.

The *Queen of Burnaby* started serving the route in early March and by the middle of the month there were problems.

Engineers on board the ferry had to work with respirators because of a number of air quality problems.

Then, on March 14, the First and Third Engineers told the Chief Engineer they no longer felt safe in the engine room. Work was stopped and the ferry didn't sail.

Throughout the day a Workers' Compensation Board (WCB) official met with ferry corporation managers. Without inspecting the ferry, the WCB officer ordered the workers back.

A reluctant crew went ahead with the evening sailing. Later in the day, the ferry corporation went before the Labour Relations Board (LRB) to get a ruling on the issue. The LRB refused to have union representation at its hearing, despite the fact the *Burnaby* had already sailed.

Appeals were quickly launched against the LRB and the WCB's decisions.

Union officials, including BCFMWU President Trevor Oram and BCGEU Vice-President Mike Clarke met with the workers to show their support.

The WCB eventually ruled that the union didn't have a right to question how its officer performed his duties in this case. A later submission to the Appeal Division of the WCB supported the earlier ruling.

"This is ridiculous," said Mike Clarke, BCGEU vice-president. "The WCB is saying that workers have no right to appeal the decisions of its officers."

"Workplace safety is critical for all workers and we intend to continue to pursue this issue, perhaps through the Ombudsman," he said.

The BCFMWU continues to pursue the issue at the LRB.

The BCFMWU is affiliated to the BCGEU.





Occupational Health and Safety Training Schedule 2001- 2002

January 8: OHS, (public sector). Location: Victoria Area Office, 2994 Douglas St., Victoria.

January 8: OHS, (public sector). Location: Headquarters, 4911 Canada Way, Burnaby.

January 22: OHS, (public sector). Location: Fraser Valley Area Office, 102-19433 96th Ave., Surrey.

February 5: OHS, (public sector). Location: Kelowna Area Office, 1591 Sutherland Ave., Kelowna.

March 5: OHS, (public sector). Location: Headquarters, 4911 Canada Way, Burnaby.

April 2: OHS, (public sector). Location: Ft. St. John Area Office, 10251-100th St., Ft. St. John.

April 9: OHS, (public sector). Location: 521 Vernon St., Nelson.

April 23: OHS, (public sector). Location: Prince George Area Office, 1070 4th Ave., Prince George.

For information on public sector OHS courses please contact your Ministry representative. For the broader public sector contact your local BCGEU area office.

CLC Prevent Cancer Campaign

The Canadian Labour Congress (CLC) is launching a national campaign to combat cancer. The following are excerpts from a longer presentation.

The labour movement has long been concerned with preventing the devastation of occupational illnesses and injuries. Cancer is one of the most devastating. In the 1930s, one in ten Canadians contracted cancer. By the 1970s that had increased to one in five. Today one in three Canadians will contract cancer.

The World Health Organization estimates that 20% of cancers are genetic in origin and that 80% are environmentally based. That 80% includes those caused by lifestyle factors, occupation, environmental pollution, industrial products, sunlight and ultra-violet radiation, either alone, in combination, or together with a genetic factor. This is actually good news, because it means that 80% of cancers are preventable.

The International Agency for Research on Cancer (IARC) recognizes 24 substances that cause lung cancer (carcinogens). One of these is tobacco. Tobacco was identified as a carcinogen through studies of the population, comparing those who smoked with those who did not. But what about the other 23 substances that cause lung cancer? They were all identified through studies of workers who had died as a result of exposures to carcinogens on the job. And what about the combined effect of



tobacco with other workplace carcinogens? For example, smokers have about 10 times the risk of developing lung cancer as non-smokers, but smokers who work with asbestos have about 50 times the risk of developing lung cancer.

But workers aren't the only ones who are suffering. While living nearer to industrial pollution is more dangerous than living farther away, geography itself won't protect us. For example, the breast milk of Inuit women in Canada's far north has been contaminated with high levels of polychlorinated biphenyls (PCBs) – a chemical considered as a "probable human carcinogen" by the International Agency for Research on Cancer (IARC). The PCBs did not originate in the far north. They were brought north by air and water currents from the industrialized parts of the world and then entered the human food supply.

The National Cancer Institute of Canada annually publishes statistics which take age into account (age standardized incidence and mortality rates). In 1970, 272 out of every 100,000 Canadian women contracted cancer. This number peaked in 1992 at 338 per 100,000 and in 1994, 335 out of every 100,000 Canadian women developed cancer. So, even controlling for age, 23% more Canadian women developed cancer in 1994 than in 1970.

The situation for men is even more grave. In 1970, 330 out of every 100,000 Canadian men contracted cancer. It peaked in 1993

Continued on next page

Clean Air Coalition

BCGEU members interested in information about the work of the Clean Air Coalition on public health issues related to tobacco can contact them the following ways:

Clean Air Coalition
200 – 1212 W. Broadway
Vancouver, B.C.
V6H 3V2
Phone 604-736-1665
Toll free 1-800-233-7148
Fax 604-736-4063
E-mail: clainair@hsf.bc.ca
www.cleanaircoalitionbc.com

Clean air case filed

The Physicians for a Smoke-Free Canada (PSC) have filed an action against the B.C. Government on October 15, 2001 over the “delay” of the Workers’ Compensation Board (WCB) ban on second-hand smoke.

This legal action takes the form of a detailed Human Rights Complaint filed with the Human Rights Commission.

The Commission has advised that the action is currently in the hands of one of their analysts. The analyst has referred some aspects of the file onto the Commission’s lawyers who are deciding what the “file is going to look like from a legal perspective”. As well, the Respondents (the Labour Minister and Premier) are contacted for their input.

Once all is in order, the file is passed on to an officer who determines whether mediation is an option. If not (or, if it is and mediation does not result

Continued on page 10

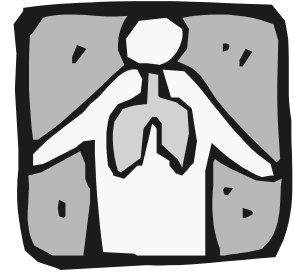
at 485 per 100,000 and decreased slightly in 1994 (the most recent year for which statistics are available), to 470.5. Controlling for age, 35% more Canadian men developed cancer in 1994 than in 1970.

The Canadian Labour Congress, together with its affiliated unions, believes that the time has come to talk about real cancer prevention. We do not believe that the continued increases in cancer rates are inevitable. We believe that by working together with our members and with others – educators, environmental activists and other concerned Canadians, we can help to turn the tide and to focus cancer prevention efforts on the major cause of cancer – the widespread use of cancer causing chemicals – in the workplace, in the environment, in our food and in pharmaceuticals.

The time for arguing about the numbers has passed. In 1999, 129,300 Canadians learned they had cancer and 63,400 died of cancer. Another way to look at this is to estimate the number of potential years of human life lost due to cancer. In 1996, the most recent year for which statistics are available, cancer was the leading cause of potential years of lost life for adult Canadians, who lost 917,000 potential years of life. In that same year, children under the age of 15 lost 13,514 potential years of life due to cancer. That’s close to one million years of human life lost in 1996 alone.

Cancer may be caused by one carcinogen alone, or by several factors – occupational, environmental, genetic and lifestyle – all working together. We will never know, from examining one person’s cancer, whether she or he became ill because of working with carcinogens, and/or smoking and/or living in a polluted area and/or a genetic predisposition. Industry has successfully argued that we need definitive proof in order to act to make our environment and workplaces safer. But as we wait for such proof, more will die. Healthy public policy requires that we act now.

Check the CLC web site at www.clc-ctc.ca.



in resolution of the Complaint), the matter proceeds to the investigation phase. In this phase, the Commission decides whether the Complaint has merit. If it is determined to have merit (in this case, what else could they find), it will be referred to the Human Rights Tribunal for hearing.

It can take up to six months from the filing of the Complaint to reach the point where the Commission decides whether the Complaint has merit.

For more information: <http://airspace.bc.ca>.

Superbugs

Superbugs are bacteria, which are resistant to antibiotics. Community health care workers and those members who work in facilities are at increased risk of exposure to two types of superbugs, MRSA (Methicillin resistant staphylococcus aureus) and VRE (Vancomycin-resistant enterococcus).

The more dangerous MRSA is found in about 40 percent of healthy people while only a few actually become ill. MRSA has increased 12 fold in the United Kingdom during the last eight years and was the cause of 37 percent of all fatal blood poisoning cases, compared with only 3 percent in 1991.

MRSA is on the increase across Canada and is entrenched in our BC hospitals as a result of downsizing and overcrowding. Patients on intravenous, catheters and those who have had surgery are particularly vulnerable as the disease can be contracted through a break in the skin. Superbugs are also life threatening to patients already weakened by other ailments and to the elderly and very young.

MRSA and VRE are transferred from patient to patient by poorly cleaned equipment such as bedrails, hospital carts, stretchers and wheelchairs. Cleaning and infection controls are extremely important factors in resisting superbugs.

The most apparent solution is to ensure adequate health care funding and staffing levels. After all, health care should be responsible for ensuring that diseases are not transferred from the hospital sector into the community.

Combined with appropriate staffing and health care funding, the use of alternative cleaning solutions to triclosan will be required. Dr David Rice, of Sheffield University argues that triclosan; an anti-bacterial cleaning agent used as a disinfectant in many hospitals is actually spreading superbugs. In his study, Dr. Rice shows that this chemical enables some bacteria strains to become resistant to antibacterial agents, thus helping to create superbugs.

Ensure policies and procedures are in place to deal with clients who have become infected with a superbug. For further information contact your local health and safety committee.

Blood-borne Pathogens

Many workers in BC are at risk of exposure to blood borne pathogens as a result of occupational exposure. In BC the occupational health and safety regulation establishes specific measures that must be taken to protect workers from exposure.

Employers must develop and implement an exposure control plan where workers may have occupational exposure to a blood borne pathogen or other biohazard material specified by the Workers' Compensation Board.

If your job duties or occupation place you at risk of exposure your employer is obligated to have a exposure control plan which

See blood on page 10

Blood...from page 10

would include risk identification, assessment and control. Staff are required to be trained by the employer in all measures taken to prevent exposures to a blood borne pathogen. This includes ensuring staff has personal protective equipment available for use. Staff should be trained regarding work procedures and the effective use of PPE. Your training should include post exposure protocols and how to report all potential exposures.

Employers are required to maintain a list of all job classifications, tasks and procedures that may place a person at risk for occupational exposure to a bloodborne pathogen.

Two thumbs down go to the Attorney General. When a staff member requested the protocol for exposure to biohazards -an inmate had sent a letter with body fluids. The response was:

"If an envelope or letter being sent out has any type of body fluids such as blood it is to be returned to the inmate."

This protocol is not only in non-compliance with the regulation but also spreads disease within a facility!



"Our new statistical formula shows a decrease in workplace accident and illness."

**Get fast breaking
news at www.bcgeu.ca**

The *Workers' Compensation Act* says...

REFUSAL OF UNSAFE WORK

3.12 Procedure for refusal

- (1) A person must not carry out or cause to be carried out any work process or operate or cause to be operated any tool, appliance or equipment if that person has reasonable cause to believe that to do so would create an undue hazard to the health and safety of any person.
- (2) A worker who refuses to carry out a work process or operate a tool, appliance or equipment pursuant to subsection (1) must immediately report the circumstances of the unsafe condition to his or her supervisor or employer.
- (3) A supervisor or employer receiving a report made under subsection (2) must immediately investigate the matter and
 - (a) ensure that any unsafe condition is remedied without delay, or
 - (b) if in his or her opinion the report is not valid, must so inform the person who made the report.
- (4) If the procedure under subsection (3) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, the supervisor or employer must investigate the matter in the presence of the worker who made the report and in the presence of
 - (a) a worker member of the joint committee,
 - (b) a worker who is selected by a trade union representing the worker, or
 - (c) if there is no joint committee or the worker is not represented by a trade union, any other reasonably available worker selected by the worker.
- (5) If the investigation under subsection (4) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, both the supervisor, or the employer, and the worker must immediately notify an officer, who must investigate the matter without undue delay and issue whatever orders are deemed necessary.



3.13 Discriminatory action

- (1) A worker must not be subject to discriminatory action as defined in section 150 of Part 3 of the *Workers Compensation Act* because the worker has acted in compliance with section 3.12 or with an order made by an officer.
- (2) Temporary assignment to alternative work at no loss in pay to the worker until the matter in section 3.12 is resolved is deemed not to constitute discriminatory action.

OH&S News

The OH&S News is published by the Research, Campaigns and Communications Department of the B.C. Government and Service Employees' Union, 4911 Canada Way, Burnaby, B.C., V5G 3W3.

Telephone: (604) 291-9611 or toll free 1-800-663-1674.

Fax: (604) 291-1537

E-mail: mike.clarke@bcgeu.ca

Website: www.bcgeu.ca

B.C. Government and Service
Employees' Union

