

WORKING TO MAKE A DIFFERENCE

WORKERS' COMPENSATION BOARD CERTIFIED

6951 Westminster Highway, Richmond, BC Mailing Address: PO Box 5350, Vancouver, BC, V6B 5L5

Mailing Address: PO Box 5350, Vancouver, BC, V6B 5L5
Telephone: 604 276-3100 Toll Free: 1-888-621-7233 Fax: 604 276-3247

INSPECTION REPORT

WORKER AND EMPLOYER SERVICES DIVISION

An employer who fails to comply with the Occupational Health & Safety Regulation or Board orders or directions is subject to sanctions as prescribed in the Workers Compensation Act.

Occupational Health & Safety Regulation requires that one copy of this report remain posted in a conspicuous place at or near the eration inspected for at least seven days, or until compliance has been achieved, whichever is the longer period.

An affected employer, worker, owner, supplier, union or member of a deceased worker's family may, within 90 calendar days of this report, in writing, request the Review Division of the WCB to conduct a review of an order, or the non-issuance of an order, in this report by contacting the Review Division at the Board's Richmond Office. The time limit may be extended in certain circumstances. Employers requiring assistance can contact the Employers' Advisers at 1-800-925-2233 --workers can contact the Workers' Advisers at 1-800-663-4261.

Date of Issue	Number	Number of Orders	Employer	Location	Classification Unit Number	Activity Time Recorded*	Travel Time Recorded*
2007-04-26	2007101110071	3	4000	002	841102	6.50	1.75

^{*} The Time Recorded reflects only that time which has been charged to this inspection up until the document was printed for delivery. Subsequent time may be added for additional activity related to this inspection.

Number of Workers	Project Number	Site Visit Date	Lab Samples Taken		Results Presented	Sampling Inspection(s)
2-10		2007-04-26	N	N	N	

Head Office	Job Site
PROVINCIAL GOVERNMENT WORKERS' COMPENSATION PROGRAMS BC PUBLIC SERVICE AGENCY P O BOX 9404 STN PROV GOV'T VICTORIA BC V8W 9V1	Ministry of Attorney General Court Service Branch 305-350 Barlow Quesnel, BC

Portion	Jobsite	;				
าspected	UNKNOWN					
violations	REFER	то	ORDERS	ON	FOLLOWING	PAGE(S)

Employer Representative Name	Accompanied By Employer Representative
Nadine Kirby	Nadine Kirby
Employer Representative Position	Accompanied By Worker Representative
REGISTRY ADMINISTRATOR	Darlene Wakeen
Phone Number	Organization
-	BCGEU
Signature	Officer of the Board / Signature
	HAINES, GEORGE

Regulation(s) Referenced in Inspection Text

OHS 4.49.(a)



WORKERS' COMPENSATION BOARD OF BRATISH

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2007-04-26	2007101110071	3

Employer	Location	Classification Unit Number	Activity Time Recorded	Travel Time Recorded	
4000	002	841102	6.50	1.75	

Inspection Text

Comments issued on: Apr 27, 2007
A review of the employer's history regarding the order(s) cited on this inspection report has determined that consideration for proceeding with an Administrative Sanction is not necessary at this time. This decision relates only to this inspection date, location and order(s) noted on this IR. A follow-up inspection may occur and/or a Notice of Compliance document may be required to authenticate appropriate compliance with the order(s) noted.

Issued on: 2007/04/26

Officer Inspection Text

The following factors must be considered, where applicable, in the identification and assessment of the risk of MSI:

- (a) the physical demands of work activities, including
- (i) force required,
- (ii) repetition,
- (iii) duration,
- (iv) work postures, and
- (v) local contact stresses

Employer Representative	Officer of the Board
Nadine Kirby	HAINES, GEORGE



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	Date of Issue	Number	Activity Time Recorded	Travel Time Recorded	Employer
Ŀ	2007-04-26		6.50	1.75	PROVINCIAL GOVERNMENT

050			
Order 1 Decision N	WCB Reference OHS	4	47

The employer has failed to identify factors in the workplace that may expose workers to a risk of musculoskeletal injury (MSI).

This is in contravention of the Occupational Health and Safety Regulation Section 4.47.

The employer must identify factors in the workplace that may expose workers to a risk of musculoskeletal injury (MSI).

	T		
Employer's Compliance Action	Date	Decision	Initials

Employer Representative	Officer of the Board
Nadine Kirby	HAINES, GEORGE



WORKERS' COMPENSATION BOARD COMMISSION

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2007-04-26	2007101110071	6.50	1.75	PROVINCIAL GOVERNMENT

Order	O Decision se	WCB Reference			
1	2 Decision N	OHS	4	53	(1)(a)
Number		0110	•		

The employer has failed to consult with the joint committee, or the worker health and safety representative with respect to risk identification, assessment and control as they pertain to ergonomic (MSI) requirements. The work process for the court reporter has changed to computer based format and the desk used for this function is unacceptable, without modifications.

This is in contravention of the Occupational Health and Safety Regulation Section 4.53(1)(a).

The employer must consult with the joint committee, or the worker health and safety representative, as applicable with respect to risk identification, assessment and control when they are required by the ergonomics (MSI) requirements.

The desk needs to be modified so that the computer screen can be in front of the worker, but low enough to allow observation of the court. The present keyboard tray is not large enough to allow for a wrist rest and has a raised wooden edge that causes point stress on the workers wrist.

Employer's Compliance Action	Date	Decision	Initials
Employer's Complainte Action	Dute	Decision	mitraso

	Order	o Decision —	WCB Reference		
		3 5 cc. F	WCA	194	(1)
-	Number	- -	,		

You are required to notify the Board, in writing, of the steps to be taken to correct the contraventions cited that require a 'Notice of Compliance' \Diamond Decision Code will contain the letter N!.

The Notice of Compliance shall be delivered to the Prince George Board office by May, 28, 2007.

This order includes a requirement for a compliance report in accordance with WCA section 194(1).

	Employer Representative	Officer of the Board
		Windows Control of the Control of th
	Nadine Kirby	HAINES, GEORGE