

WORKING TO MAKE A DIFFERENCE

## WORKERS' COMPENSATION BOARD CONTINUES

6951 Westminster Highway, Richmond, BC 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.

e Occupational Health & Safety Regulation requires that one copy of this report remain posted in a conspicuous place at or near the seration 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*
2008-01-11	200805825	0016	2	4000	028	841102	8.75	0.25

<sup>\*</sup> 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.

 of Workers	Project Number	Site Visit Date	Lab Samples Taken	Direct Readings	Results Presented	Sampling Inspection(s)
2-10		2008-01-11	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	BRITISH COLUMBIA GOVERNMENT MINISTRY OF ATTORNEY GENERAL SHERIFFS SERVICES 540 BORLAND STREET Williams Lake, BC

Portion	Jobsite					
<sup>া</sup> ণspected	UNKNOWN					
violations	REFER '	го	ORDERS	ON	FOLLOWING	PAGE(S)

Employer Representative Name	Accompanied By Employer Representative			
DAVE OLSON	DAVE OLSON			
Employer Representative Position	Accompanied By Worker Representative			
HEAD SHERRIF	DWAYNE ARDELL			
Phone Number	Organization			
-	BC Government & Service Employees Union			
Signature	Officer of the Board / Signature			
	PEDERSON, DON			

For Interna	i Use	Only
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Delivery Method: In Person



## WORKERS' COMPENSATION BOARD CERTIFIED

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Inspection Text

Issued on: 2008/01/11

This inspection report requires a reply in writing.

Employer Representative	Officer of the Board
DAVE OLSON	PEDERSON, DON



### WORKERS' COMPENSATION BOARD & BRITISH

6951 Westminster Highway, Richmond, BC Mailing Address: PO Box 5350, Vancouver, BC, V6B 5L5 WORKING TO MAKE 9 DIFFERENCE Telephone; 604 276-3100 Toll Free; 1-888-621-7233 Fax; 604 276-3247

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Date of Issue	Number	Activity Time Recorded	Travel Time Recorded	Employer
2008-01-11	2008058250016	8.75	0.25	PROVINCIAL GOVERNMENT

Order		Decision **	WCB Reference		
Number	3	N	OHS	4	29
Humber					

A risk of injury to workers from violence has been identified by an assessment performed under section 4.28 the employer has not established work environment arrangements to eliminate the risk to workers from violence, and if elimination of the risk to workers is not possible, establish procedures, policies and work environment arrangements to minimize the risk to workers. It is possible to undertake environmental alterations on the fourth floor to accommodate a sheriffs office and prisoner holding cells .This would allow prisoners to be moved in and out of the building avoiding the public in the foyers that there during regular business hours.

This is in contravention of the Occupational Health and Safety Regulation Section 4.29.

If a risk of injury to workers from violence is identified by an assessment performed under section 4.28 the employer must:

(a) establish procedures, policies and work environment arrangements to eliminate the risk to workers from violence, and

(b) if elimination of the risk to workers is not possible, establish procedures, policies and work environment arrangements to minimize the risk to workers.

Until the above changes and be made additional manpower must be planned for and made available for safety whenever high risk/high profile cases are to be heard in this building and prisoner movement is required. This would be an interim measure which would allow sheriffs to control the general public in the foyers.

Employer's Compliance Action	Date	Decision	Initials
Employer a Compliance Action		Decialon	miciais

Employer Representative	Officer of the Board
DAVE OLSON	PEDERSON, DON



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Order	o Decision **	WCB Reference				Ĺ
Number	2 N	WCB Reference WCA	194	(1)		
Traitibe:					ļ	į

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 faxed or e mailed to the nearest Board office within 30 days of this order.

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

Employer's Compliance A	ation	Date	Decision	Initials
	ction	Date	Decision	initials

Employer Representative	Officer of the Board		
DAVE OLSON	PEDERSON, DON		