

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 operation 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*
2008-02-27	2008058250123	2	4000	028	841102	3.25	0.25

* 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	Direct Readings	Results Presented	Sampling Inspection(s)
2-10		2008-02-27	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 Inspected	Jobsite
	UNKNOWN
Violations	REFER TO ORDERS ON FOLLOWING PAGE(S)

Employer Representative Name	Accompanied By Employer Representative
DAVE OLSON	DAVE OLSON
Employer Representative Position	Accompanied By Worker Representative
HEAD SHERIFF	DWAYNE ARDELL
Phone Number	Organization
-	BCGEU
Signature	Officer of the Board / Signature
	PEDERSON, DON

For Internal Use Only

Delivery Method: In Person

Other
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WOULD NOT ALLOW ME TO POPULATE THIS FOLLOW IR FROM THE REGULAR SYSTEM.

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2008-02-27	2008058250123	2	4000	028	841102	3.25	0.25

Inspection Text

Issued on: 2008/02/27

This was a follow-up inspection to authenticate appropriate compliance with the order(s) noted.

Employer Representative	Officer of the Board
DAVE OLSON	PEDERSON, DON

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Date of Issue	Number	Activity Time Recorded	Travel Time Recorded	Employer
2008-02-27	2008058250123	3.25	0.25	PROVINCIAL GOVERNMENT

Order Number	1	Decision C	WCB Reference
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THIS IS A FOLLOW UP TO INSPECTION 2008058250016 ORDER 1

REGARDING INSPECTION REPORT 2008058250016 AND ORDER #1.

WE HAVE NOW RECEIVED YOUR RISK ASSESSMENT IN WRITING.

IN THIS RISK ASSESSMENT YOU HAVE IDENTIFIED THE AREAS OF RISK TO WORKERS OF THE LOCAL SHERIFFS DEPARTMENT AND HAVE MADE SUGGESTIONS TO MAKE SHORT TERM REDUCTION STRATEGIES IN REGARDS TO WORKERS RISKS WHEN ESCORTING PRISONERS TO AND FROM COURT ROOM APPEARANCES.

THIS REPORT WILL INDICATE THAT WE ACCEPT THE RISK REPORT AS REQUESTED AND NOW Completed, and YOU HAVE TO ENSURE THAT IT IS FOLLOWED AND IMPROVED ON.

ALSO THAT YOU CONTINUE TO WORK TOWARDS THE COMPLETION OF THE ENVIRONMENTAL CHANGES TO THE BUILDING AND ROUTES TAKEN WHEN ESCORTING PRISONERS AS WAS DISCUSSED AT THE MEETING FEB.20/08 IN THE JURY ROOM AT 540 ROWLAND STREET.

Order Number	2	Decision C	WCB Reference
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THIS IS A FOLLOW UP TO INSPECTION 2008058250016 ORDER 2

REGARDING INSPECTION REPORT 2008058250016 AND ORDER #2 THIS ORDER HAS NOW BEEN COMPLIED WITH IN THAT WE HAVE RECEIVED YOUR WRITTEN REPLY.

Employer Representative	Officer of the Board
DAVE OLSON	PEDERSON, DON

