

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

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

Report Date	Number	Employee Number	Number of Orders
2000-02-18	2000101930040		2

Employer	Location
4000	031

Number of Workers	Shift	Project Type	Project Number	Closure Imposed	Closure Removed
4	1				

Classification Unit Number	SIC
841102	8250

Lab Samples Taken	Direct Readings	Results Presented	Sampling Inspection
N	N	N	

Assisting Employees		

Head Office	Job Site
PROVINCIAL GOVERNMENT PUBLIC SERVICE EMPLOYEE REL COM 548 MICHIGAN ST VICTORIA BC V8V 1S3	FORD MOUNTAIN CAMP CHILLIWACK LAKE ROAD CHILLIWACK

Portion Inspected	TREE FALLING SITE PARTIAL	Principal Contractor	
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Type of Industry	ACADEMY - RIDING
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Violations	REFER TO ORDERS ON FOLLOWING PAGE(S)
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Employer Representative Name		Accompanied By Employer Representative	
BARRY LYNDEN		BARRY LYNDEN	
Employer Representative Position		Accompanied By Worker Representative	
LOCAL DIRECTOR		VINCE MACGEE	
Telephone Number		Organization	
604 824-2224			
Signature		Officer of the Board / Signature	
		GOULDING, ALBERT	

Administration Notes	

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Report Date	Number	Employee Number	Employer
2000-02-18	2000101930040		PROVINCIAL GOVERNMENT

Inspection Text

SITE VISIT MADE ON 16 FEB 2000. DISCUSSED THE INCIDENT ON SITE WITH CORRECTIONS OFFICERS VINCE MACGEE & JAMES MAZURICK AND LOCAL DIRECTOR BARRY LYNDEN. THE TREE AND STUMP HAD BEEN REMOVED FROM THE SITE PRIOR TO MY ARRIVAL. DISCUSSIONS INDICATED THAT THERE WAS A LINE ON THE TREE IN AN ATTEMPT TO ENSURE THAT IT WAS FELLED IN THE INTENDED DIRECTION BUT THE HOLDING WOOD WAS INSUFFICIENT TO KEEP IT FROM GOING SIDWAYS. THE ESTIMATED HEIGHT OF THE TREE WAS DERIVED FROM DISCUSSIONS WITH THE PEOPLE ON SITE AND BRIAN CLARK OF B.C. HYDRO.

Employer Representative	Officer of the Board
	GOULDING, ALBERT

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Report Date	Number	Employee Number	Employer
2000-02-18	2000101930040		PROVINCIAL GOVERNMENT

Order Number	Decision	WCB Reference	Action Due Date
1	N	WCA 115 (2) (e)	

TWO INMATES AT THIS FACILITY LOST CONTROL OF A TREE ESTIMATED TO BE 100(+/-) FT IN HEIGHT DURING A FALLING OPERATION. THE TREE WENT SIDWAYS STRIKING A POWER POLE AND KNOCKING DOWN A 25KV LINE. STATEMENTS FROM OTHER INMATES INDICATE THAT THEY WERE WITHIN REACH OF THE TREE AT THE TIME OF THE INCIDENT. THE SUPERVISOR WAS NOT IMMEDIATELY PRESENT AT THE TIME THE TREE WAS BEING FELLED. THIS EMPLOYER HAS NOT PROVIDED THE WORKERS WITH ADEQUATE INFORMATION, INSTRUCTION, TRAINING AND SUPERVISION TO ENSURE THE HEALTH AND SAFETY OF THOSE WORKERS IN CARRYING OUT THEIR WORK AND TO ENSURE THE HEALTH AND SAFETY OF OTHER WORKERS AT THE WORKPLACE.

THIS IS IN CONTRAVENTION OF THE WORKERS COMPENSATION ACT SECTION 115 (2)(e).

AN EMPLOYER MUST PROVIDE TO THE EMPLOYER'S WORKERS THE INFORMATION, INSTRUCTION, TRAINING AND SUPERVISION NECESSARY TO ENSURE THE HEALTH AND SAFETY OF THOSE WORKERS IN CARRYING OUT THEIR WORK AND TO ENSURE THE HEALTH AND SAFETY OF OTHER WORKERS AT THE WORKPLACE.

Employer's Compliance Action	Date	Decision	Initials

Order Number	Decision	WCB Reference	Action Due Date
2	N	WCA 194 (1)	

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' (DECISION CODE N).

THE NOTICE OF COMPLIANCE SHALL BE DELIVERED TO THE ABBOTSFORD OFFICE OF THE WORKERS' COMPENSATION BOARD AT: PO BOX 2098, ABBOTSFORD BC, V2T3X8 OR BY FAX AT: 604-556-2077 WITHIN 60 DAYS OF THE DATE THIS REPORT WAS ISSUED.

THIS DIRECTIVE IS ISSUED PURSUANT TO SECTION 194 OF THE WORKERS COMPENSATION ACT.

Employer's Compliance Action	Date	Decision	Initials

Employer Representative	Officer of the Board
	GOULDING, ALBERT

